



EDGEBROOK RADIOLOGY/OPEN MRI
5320 W. DEVON AVE, CHICAGO, IL 60646
TEL: (773) 774-6440: FAX: (773) 774-4372

PATIENT NAME: _____

PHYSICIAN: _____

TEL: _____ FAX: _____

CLINICAL HX: _____

MAGNETIC RESONANCE (MRI)	
BRAIN	
BRAIN/IAC	
BRAIN/ORBITS	
BRAIN/SELLA	
CERVICAL SPINE	
THORACIC SPINE	
LUMBAR SPINE	
SOFT TISSUE NECK	
CHEST	
BREAST	
ABDOMEN	
PELVIS	
SHOULDER	R L B
ELBOW	R L B
WRIST	R L B
HIP	R L B
KNEE	R L B
ANKLE	R L B
FOOT	R L B
OTHER:	
MR. ANGIOGRAPHY (MRA)	
HEAD	
NECK	
AORTA	
RENAL	
PERIPHERAL	UE/LE
MULTI - SLICE CT	
BRAIN	
SINUSES	
FACIAL BONE	
TEMPORAL BONE	
NECK SOFT TISSUE	
CHEST	
ABDOMEN	
PELVIS	
CERVICAL SPINE	
THORACIC SPINE	
LUMBAR SPINE	
UPPER EXTREMITY	R L B

LOWER EXTREMITY R L B	
BONE LENGTH	
SAG/COR RECON	
BONE DENSITY (QCT)	
LUNG SCREEN	
OTHER:	
ULTRASOUND	
AORTA	
APPENDIX	
LIVER/GB/PANCREAS	
SPLEEN	
KIDNEY/BLADDER	
BREAST	
THYROID	
TESTICLES	
PROSTATE	
PELVIS	
TRANSVAGINAL	
INFANT HEAD	
INFANT HIPS	
INFANT SPINE	
OB. 1 ST TRIMESTER	
OB. 2 ND TRIMESTER	
OB. LEVEL 2	
OB. F/U W/MEASURE	
AMNIOTIC FLUID	
BIOPHYSICAL PROFILE	
CAROTID DOPPLER	
ABDOMINAL DOPPLER	
2D ECHO	
ART. DOPPLER EXTRM.	UPPER LOWER
VENOUS DOPPLER	UPPER LOWER
EXTRM. NON VASCULAR	UPPER LOWER R L B
RADIOLOGY	
ESOPHAGRAM	
SMALL BOWEL	
UPPER GI	
IVP	
CHEST	
STERNUM	

CLAVICLE R L B	
RIBS	
SHOULDER R L B	
KUB	
CERVICAL SPINE	
THORACIC SPINE	
LUMBAR SPINE	
HIP	
PELVIS	
SKULL	
SINUS	
ORBITS	
TOE	
FOOT R L B	
ANKLE R L B	
TIB-FIB R L B	
KNEE R L B	
FINGER	
HAND R L B	
WRIST R L B	
FOREARM R L B	
ELBOW R L B	
HUMERUS R L B	
OTHER:	

CONTRAST AGENT:

W/O CONTRAST
W/CONTRAST
W/WO CONTRAST

MAMMO

Mammo Unilateral
Mammo Bilateral
Mammo Screening

COMMENTS:

PREPARATIONS FOR DIAGNOSTIC RADIOLOGY EXAMINATIONS:

UPPER GI/SMALL BOWEL:

Nothing to Eat or drink after midnight. After the test you may take one ounce of mineral oil to help eliminate the barium.

IVP: (Purchase DUCOLAX: 2 Suppositories from your local pharmacy)

1. Insert one suppository at 4pm the night before
2. Insert one suppository at 7am the morning of the exam
3. Eat a light meal the night before the exam. No raw fruit or vegetables
4. Nothing to eat or drink after midnight until after the exam.

COLON (LGI)

Preparation is provided by Edgebrook Radiology

CT. SCAN (ABDOMEN/PELVIS)

Preparation is provided by Edgebrook Radiology

MAMMOGRAMS:

No perfumes, deodorant or body powder.

MRI SCREENING:

G: Cardiac Pacemaker:	Yes	No
Metallic Implants	Yes	No
Patient Pregnant	Yes	No
Hearing Aids	Yes	No
Prior Surgery on the area	Yes	No
Worked in a Machine shop	Yes	No

If you answered Yes to any of the above questions, please contact one of our technologists prior to making the appointment.

OFFICE HOURS:

MON-FRI: 8:00AM –8:00 PM, SAT: 8:00 AM-4:00PM, SUNDAY: CLOSED

DIRECTIONS:

FROM THE SOUTH: Take I-90/94 (Kennedy) west to I-94 (Edens Expy) north. Exit Peterson West. Turn Right on Central Ave and another Right on to Devon Ave. We are located in the Edgebrook Medical Building across from the Chicago Public Library.

FROM THE WEST: Take I-294 West. Exit on Touhy Ave East. Make a Right Turn on Caldwell Ave going South. Turn Left on Devon Ave. Pass the Rail road and Central Ave. We are located in the Edgebrook Medical Building across from the Chicago Public Library.