

Location:

6565 West Loop South,
Suite 110
Bellaire, TX 77401

837 Cypress Creek Pkwy
Suite 106
Houston, TX 77090

1441 Highway 6 Suite
100
Sugar land, TX 77478

Reason for Referral:

Routine STAT

Vascular

- Peripheral Vascular Disease/Claudication Carotid Evaluation and treatment
- Varicose Veins/leg swelling May Thurner syndrome
- Wound care/leg ulcers
- Abdominal Aortic Aneurysm
- Mesenteric Ischemia Renovascular Hypertension
- DVT treatment
- IVC filter placement IVC filter removal
- Dialysis access: Percutaneous fistula creation declot fistulogram
- Venous access: Port Dialysis access PICC Removal

Interventional

- Uterine Fibroids/Uterine Artery Embolization Pelvic congestion syndrome
- Benign prostatic hyperplasia/Prostate artery embolization Nephrostomy/Ureteral stent/access
- Varicocele embolization
- Arthritis/geniculate artery embolization(knee) Adhesive capsulitis shoulder embolization
- Vertebral Compression Fracture/Kyphoplasty

Oncology

- Chemoembolization Y90
- Tumor ablation: Kidney Liver Spine Lung Other: _____
- Biopsy: _____
- Other: _____

Referring Physician: _____

Address: _____

Telephone: _____ Fax: _____

Office contact: _____ Phone: _____

Patient Information

Name of Patient: _____

Sex: ___ Female ___ Male Birth date: _____ Best contact #: _____

Insurance: _____

Is the patient on Blood thinners? Xarelot/Eliquis Coumadin/Warfarin Aspirin Other

Has the patient had previous imaging? YES NO If yes, where: _____

Please fax the following information with this request to

- Demographics Copy of Insurance card Diagnostic imaging History and Physical Medication List