

ATLANTA HEART SPECIALISTS, LLC

☐ 1468 MONTREAL ROAD, TUCKER, GA 30084, PH: 770-638-1400, FAX: 770-638-1411 □ 4375 JOHN'S CREEK PARKWAY SUITE 350 SUWANEE, GA 30024, PH: 770-622-1622, FAX: 770-622-1627

Coronary CT Order Form

<u>If patio</u>	ent is using insurance, a red	ent prog	ress no	te and ICD10 code	are red	juired. Please fax every	thing to	(770)-	<u>638-1411.</u>
□Routine	□STAT-Call Report#	□т	ucker [□Johns Creek □Us	sing Insu	rance (provide NPI)	lf-Pay □	CLEERI	LY Plaque Analysis+FFR
Patient Name:				h:	Ordering Practitioners Name:				
Patient Phone Numb	er:		Sex of Patie	nt: M F	Practition	ers Contact Number:			NPI:
Reason For Exam:					Practition	ers Fax Number:			
Primary Insurance: Subsc			bscriber Name:			Subscriber ID: Group#			
ICD10 Codes:				Practitioners Signature:			•		Date:
Patient Allergies:					BUN/Crea	ntinine Date Drawn:			Results:
appro 1. 2. 3. 4. 5. 6. 7. 8.	If applicable, hold MNo caffeine for 12 hoTry to avoid smokingIf applicable, please	ore exar of water or wor etformi ours. at leas refrain f ur exam ring Phy pefore in allergy nobic, p	m and prior kouts n 48 h t 4 hou from to indicate to iod lease to be prior to iod to be prior to iod	clear liquids on to your exam. day of exam. rs following sca urs prior to scar aking Viagra, Le inue taking all on the please bring oring it to the started	ly. n vitra, a other r n of M g it to aff's in bring	and Cialis for 48 hou nedications, especia etoprolol by mouth the staff's immedia nmediate attention it to the staff's imm	ırs prio ılly bloc 12 hou te atter	r to so od pre rs be ntion.	can essure fore exam
	_			:a-Blocker Ac		_			
	□Last recorded heart Patient <u>will</u> take oral N	_			•	-		Hg.	
	□Last recorded heart	rate is 6	О ВРМ	or less or systol	ic BP is	less than 100 mm/Hg	7 .		

Patient will not take oral Metoprolol Tartrate ∞All patients 65 years or older or diabetics must have a current creatinine