



**Woodburn Nuclear Medicine**  
**Metro Region PET Center**  
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**Nuclear Medicine Referral Form**

Call Stat Report     Fax Report     Phone Report     Patient to Return with Films

Patient's Name:		Appointment Date:	Appointment Time:
Referring Physician's Name:		Physician's Signature:	Physician's Phone/Fax: P: F:
Physician's Address:			
Diagnosis (Reason for Testing / Comments / Special Remarks):			

**IF YOUR TEST IS FOLLOWED BY AN ASTERISK (\*), PLEASE REFER TO THE BACK FOR ADDITIONAL INFORMATION/INSTRUCTIONS.**

**Bone\***

- Whole Body Bone Scan
- 3-Phase Bone Scan  
Specify Area: \_\_\_\_\_
- Bone SPECT Scan
- DEXA Bone Mineral Density Scan

**Cardiac**

- Myocardial Perfusion Imaging (MPI)\*  
Specify Stress Method:  
 Adenosine  
 Dobutamine  
 Treadmill
- MUGA\*
- First Pass Study

**CNS\***

- Brain SPECT Scan

**Endocrine\***

- Thyroid Scan and Uptake (I-123)
- I-131 Whole Body Scan  
 Thyrogen     Withdrawal
- I-123 Whole Body Scan  
 Thyrogen     Withdrawal
- Parathyroid (Sestamibi) Scan
- I-131 Therapy Hyperthyroidism
- I-131 Therapy Ablation\*\*** (See Below)
- I-123 MIBG Adrenal Scan

**Gastrointestinal\***

- Hepatobiliary Scan (HIDA)
- Hepatobiliary Scan with CCK
- Liver/Spleen Scan
- Hemangioma Study
- Meckel's Diverticulum Scan
- Gastric Emptying Study
- Milk Aspiration Scan

**Pulmonary\***

- Lung V/Q Scan
- Lung Quantitative Scan

**Genitourinary**

- Renal Scan\*
- Renal Scan with Lasix\*
- Renal Scan with Captopril\*
- Renal Cortex Scan (DMSA)
- Cystogram

**Miscellaneous\***

- Labeled WBC Scan
- Gallium Scan
- Octreoscan (In-111)
- Strontium/Samarium (Bone Pain Therapy)
- Zevalin/Bexxar Therapy
- Other: \_\_\_\_\_

\*\* For I-131 Therapy Ablation, please have nuclear medicine physician call to discuss I-131 dose.     Yes     No

- Please administer \_\_\_\_\_ mCi of I-131 ablation dose.
- Please administer appropriate dose for patient pathology and age.

**CT Scan**

PLEASE FORWARD ALL DIAGNOSTIC IMAGING REPORTS FROM THE PAST 12 MONTHS THAT PERTAIN TO THE PATIENT'S DIAGNOSIS.  
 CT SCAN WITH CONTRAST; BUN & CREA LAB VALUES, OBTAINED WITHIN THE PAST 30 DAYS, ARE REQUIRED FOR ALL PATIENTS OVER 50 YEARS OF AGE.  
 OUR FACILITY USES ONLY NON-IONIC CONTRAST.

**Head**

- Brain

**Spine**

- Cervical Spine
- Thoracic Spine
- Lumbar Spine

**Body**

- Neck
- Chest
- Abdomen
- Pelvis

**Extremities**

- Upper Extremity  
 Left     Right
- Lower Extremity  
 Left     Right

**Contrast** Please choose from the following:

- With Contrast     IV     Oral
- Without Contrast
- With & Without IV Contrast
- Known IV Contrast Allergy?     Yes     No

## Patient Instructions for Nuclear Medicine Scans

**Note: Patients should be well hydrated for all studies. Patients may take their usual medications unless instructed otherwise by their referring physician. Patients may also eat normally except for these studies:**

- (1) All radioiodine studies for thyroid disease
- (2) Gastrointestinal studies
- (3) Myocardial perfusion imaging

### BONE

**Bone Scan (Whole Body, 3-Phase, SPECT)** -- The total time commitment for the study is approximately four hours.

**DEXA Bone Mineral Densitometry** -- Calcium supplements should be held beginning 48 hours prior to the test. No other preparation is required. The total time commitment for the study is approximately 20 minutes.

### CARDIAC

**Myocardial Perfusion Imaging** -- Patients should have no solid food or caffeine for at least six hours prior to the test. They should, however, be well hydrated for the study. Patients may take their usual medications unless instructed otherwise by their referring physician. The total time commitment for the study is approximately two to four hours.

**MUGA** -- A sample of blood is drawn and labeled for re-injection. This requires approximately two hours.

### CNS

**Brain SPECT Scan** -- The total time commitment for the study is approximately two hours.

### ENDOCRINE

**Thyroid Patients** -- See thyroid patients section below.

**I-123 MIBG Adrenal Scan** -- Imaging is performed at 4-6 hours, 24 hours and occasionally at 48 hours after injection of I-123 MIBG. A number of medications can interfere with this test. The patient may be asked by the referring physician to hold or discontinue one or more medications prior to the study. The patient's list of medications should be made available to the nuclear medicine physician at the time of scheduling.

**Parathyroid (Sestamibi) Scan** -- The total time commitment for the study is approximately four hours.

**GASTROINTESTINAL STUDIES** -- Patients should have nothing by mouth except sips of water for at least four hours prior to the study. The total time commitment for these studies is from one to four hours depending on the study.

### PULMONARY

**Lung Scan (V/Q and Quantitative)** -- The total time commitment for the study is approximately one hour.

### GENITOURINARY

**Renal Scan** -- Patients may receive an oral dose of Captopril or an intravenous dose of Lasix depending on the indication. Patients may take their usual medications unless instructed otherwise by their referring physician. The total time commitment for the study is approximately two hours.

### MISCELLANEOUS

**Gallium Scan** -- Imaging is performed 24, 48, and sometimes 72 hours after injection.

**Labeled WBC Scan** -- A sample of blood is drawn from the patient and labeled with In-111 for re-injection. This requires approximately two hours. Imaging is performed 24 hours later.

**Octreoscan (In-111)** -- Imaging is performed at 4-6 hours, 24 hours and occasionally at 48 hours after injection of In-111. A number of medications can interfere with this test, and the patient may be asked by the referring physician to hold or discontinue one or more medications prior to the test. The patient's list of medications should be available to the nuclear medicine physician at the time of scheduling.

**Strontium/Samarium radionuclide therapy for bone pain** -- Special arrangements should be made directly with the nuclear medicine physician.

**Zevalin/Bexxar radionuclide therapy for lymphoma** -- Special arrangements should be made directly with the nuclear medicine physician.

## Thyroid Patients

Other than water, patients should have nothing by mouth 4 hours prior to the oral administration of the radioisotope. A serum pregnancy test is required for all women of childbearing age 72 hours prior to the I-131 administration.

Thyroid cancer patients should begin the low-iodine diet 2 weeks prior to the study. Labs (TSH, serum thyroglobulin, spot urine iodine) should be made available for all patients.

**I-123 Whole body Scan with Thyrogen** -- The patient will receive 2 intramuscular injections of Thyrogen. The 1st injection will be administered on Monday and the 2nd injection on Tuesday morning. An I-123 capsule will be administered orally on Tuesday afternoon and the patient will return on Wednesday for camera imaging. If therapy with I-131 has been prescribed, the I-131 capsule will be administered orally on Wednesday after the scan. Post therapy imaging will be scheduled for 8-12 days later and requires no additional preparation.

**I-131 Whole body Scan with Thyrogen** -- The patient will receive 2 intramuscular injections of Thyrogen. The 1st injection will be administered on Monday and the 2nd injection on Tuesday. An I-131 capsule will be administered orally on Wednesday and the patient will return Friday for camera imaging.

**I-131 Therapy with Thyrogen** -- The patient will receive 2 intramuscular injections of Thyrogen. The 1st injection will be administered on Monday and the 2nd injection on Tuesday morning. An I-131 capsule will be administered orally on Wednesday. Post therapy imaging will be scheduled for 8-12 days later and requires no additional preparation.

**{ Note: If a scan or therapy is being performed after Synthroid withdrawal, Thyrogen will not be administered. The patient may be scheduled for Monday, Tuesday or Wednesday. The whole body scan will be performed 24 hours after I-123 or 48 hours after I-131 administration. }**

**Thyroid Scan and uptake (I-123)** -- Patients should avoid seafood for 3 days prior to the test. The patient should not receive iodinated contrast (e.g. CT contrast) for 6 weeks prior to the test. The patient should not be on thyroid replacement (Synthroid) or anti-thyroid medication (e.g. Tapazole or PTU) at the time of the test. An adjustment should be made by the referring physician if the patient is taking any of these medications.