



CAPITOL IMAGING
"WHERE MAKING A DIFFERENCE MATTERS"

3635 Bradshaw Rd. Suite C
Sacramento CA 95827
Phone: (916) 891-5980
Fax: (916) 580-1773
Support@capimg.com
www.Capimg.com

Scan QR Code to make an appointment

DIAGNOSTIC IMAGING | REFERRAL



PATIENT INFORMATION:

Full Name:

Date of Birth: ____ / ____ / ____ Gender: ☐ Male ☐ Female

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ E-Mail: _____

Insurance Information:

Authorization Number:
(If Applicable)

STUDY INFORMATION:

Imaging Modality Requested: ☐ X-ray ☐ Ultrasound ☐ Mammogram

**Please Note: We do NOT offer contrast studies. 300lb Limit **

Study Requested:

Indication:

What are we ruling out?:
(Please Specify)

ICD-10/DIAGNOSIS CODE(S): ☐ Routine ☐ STAT

☐ Allow facility to make changes to order if needed ☐ Request Images on CD

PROVIDER INFORMATION:

Provider Name: Provider NPI#:

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Provider Signature: Date: ____ / ____ / ____

MAP OF LOCATION AND EXAM PREP ON THE BACK PAGE

CAPITOL IMAGING POLICY:

Carefully follow the instructions and if you have any questions, please call our office at least **24 hours** before your scheduled appointment for better assistance.

Upon your visit to Capitol Imaging, please bring the following:

- Form of identification
- Insurance information/ form of payment
- Referring physician order form

Children 18 and under **CAN NOT** be left alone or go into the exam room without a legal parent or guardian.

We do have a **10 min late policy.**

If you are more than 10 mins late OR have not followed the prepping instructions, we **WILL** reschedule your appointment.

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ABDOMINAL ULTRASOUND EXAM PREPERATION:

Must be fasting.

DO NOT eat or drink anything **8 hours** before your exam.

We will reschedule if you do not fast.

OB/GYN & RENAL/BLADDER ULTRASOUND EXAM PREPERATION:

1 hour before your exam, drink 32oz.of water(about 2 water bottles).

DO NOT empty your bladder before your exam.

A full bladder is essential for better image quality

The technician performing the exam will direct you to use the rest room.

TRANSVAGINAL EXAMS:

Have An **EMPTY BLADDER**

NO PREPERATION NEEDED FOR THE FOLLOWING:

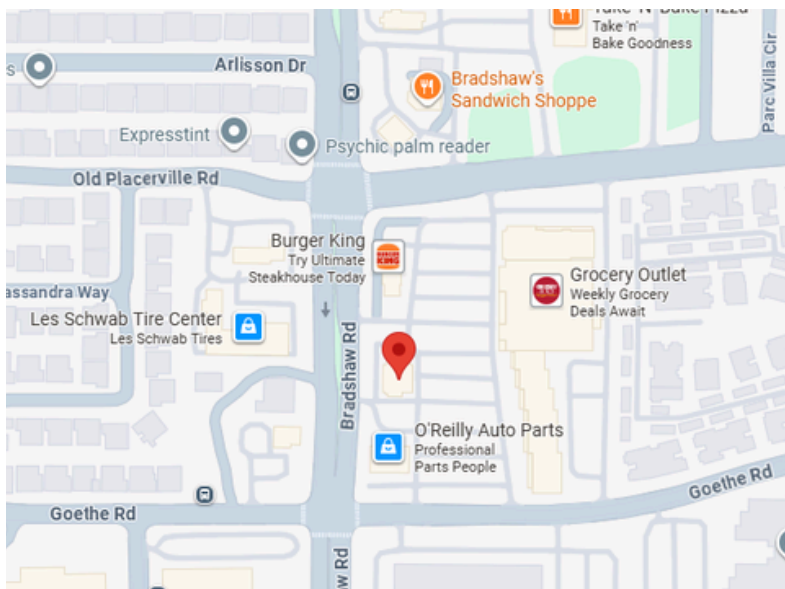
Ultrasound:

- **Vascular**
- **Small Parts (Thyroid, Scrotal, Breast)**

X-Ray

Mammogram

HOURS AND LOCATION:



Location:

**3635 Bradshaw Rd, Suite C
Sacramento CA 95827**

Hours:

Monday-Friday

9am-5pm

Saturday

10am-1pm

Sunday

Closed

NOW ACCEPTING MOST MAJOR INSURANCES