IMAGING CENTER
AT CDA SPINE

For Authorization & Billing purposes use:
Coeur d'Alene Spine and Brain
Tax ID#: 57-1155831

3320 N Grand Mill Lane
Coeur d'Alene, ID 83814
Phone: (208) 765-1770
Fax: (208) 292-3177

PLEASE PRINT THE FOLLOWING INFORMATION:

Patient name: _____ Date of birth: ___/___/___ SS#: _____-____-_____

Home phone: _____ Work phone: _____ Cell: _____

Address: _____ City/State/Zip: _____

Insurance Information: (Please FAX front and back of insurance card)

Primary Insurance: _____ Policy#: _____ Group#: _____

Secondary Insurance: _____Policy#: _____Group#: _____

☐ **MRI** Please specify: with contrast? YES NO

(**MRI IV contrast** is indicated in the following circumstances: post surgical spine, r/o infectious process, spinal cord syrinx and r/o cancer or tumor.)

Brain	**Spine**	**Joints**		**Other**
□ Routine	□ Cervical	Shoulder	□ L□ R	□ Abdomen
□ TMJ	□ Thoracic	Elbow	□ L□ R	□ Pelvis
□ Posteria Fossa	□ Lumbosacral	Wrist	□ L□ R	□ Prostate
□ Sinuses		Hip	□ L□ R	
□ LAC's		Knee	□ L□ R	
□ Pituitary		Ankle	□ L□ R	
□ Orbits		Foot	□ L□ R	

☐ **MRA**

□ Circle of Willis □ Carotid Arteries □ Vertebral Arteries

Specialty Images:

Cervical	**Lumbosacral**	**Arthrogram**
□ Neutral	□ Neutral	□ Shoulder
□ Flexion	□ Flexion	□ L □ R
□ Extension	□ Extension	□ Hip
□ Lateral Bending	□ Lateral Bending	□ L □ R
□ L □ R	□ L □ R	

Other _____

_____

_____

Diagnosis Code

Cervical, Spondylosis	721	Lumbar Radiculopathy	724.4	C1 - C4 FX	806
Cervical, Hermiated Disc	722	Sacralgia	724.6	C5 - C7 FX	806.05
DDD Cervical	722.4	Nonunion Fracture, Lumbar	733.82	T1 - T6 FX	806.2
Cervical Disc w/myelopathy	722.71	Spondylolisthesis	756.12	T7 - T12 FX	806.25
Cervical, Stenosis	723	Knee DJD	715.16	Lumbar FX	806.4
Neck Pain	723.1	Shoulder Pain	719.41	Traumatic Disc Cervical #	839.0*
Cervical Radiculopathy	723.4	Elbow Pain	719.42	Traumatic Disc Lumbar	839.2
DDD Thoracic	722.51	Wrist Pain	719.43	Clavicle FX	810
Thoracic Pain	724.1	Hand Pain	719.44	Wrist FX	813.41
Lumbar, Spondylosis	721.3	Hip Pain	719.45	Forearm FX	813.8
Lumbar, Herniated Disc	722.1	Leg Pain	719.46	Carpal FX	814
DDD Lumbar	722.52	Ankle Pain	719.47	Femur FX	820
Lumbar Stenosis	724.02	Limb Pain	729.5	Tibia FX	823.8
Low Back Pain	724.2	Chest Pain NOS	786.5	Ankle FX	824.2
Sciatica	724.3			Foot FX	825.2

Please specify Signs & Symptoms:

_____

_____

_____

Order date: _____ Physician's signature:_____

Phone: _____ Fax: _____