If the answer is YES to any of the questions, please notify UCLA RADIOLOGY prior to scheduling your CT

ALL CT PATIENTS:
• Do you weigh more than 450 lbs.?
• Are you able to lift yourself onto a bed without help, or do you need assistance?
• FEMALE: Is there a possibility you may be pregnant? If Yes, pregnancy gestational week?
  • If pregnant, CT is not recommended, radiologist approval required. Consider US or MR.

CT PATIENTS WITH & W/O CONTRAST STUDIES ONLY:
• Did the ordering provider waive labs for this study?
• Are you allergic to iodine, or had complication with injected contrast, or have severe multiple allergies?
  If so, what was the reaction?
• Are you currently on dialysis?
  • If yes, has it been longer than 3 months and urine output is less than half cup per day?
• Do you have a central venous catheter /PICC/Port/Tunneled CVC/Non-Tunneled CVC available for contrast?
• Have you ever been diagnosed with asthma or use an inhaler?
• Do you have labs for Creatinine/eGFR (blood draw) within 8 weeks of the study? (See DETAILS* below)
• High Risk Conditions Questionnaire: (If Yes to any, labs within 8 weeks are needed unless waived)
  • Are you over 60 years old? (Labs within 6 months OK if over 60 YO w/ no other high risk conditions)*
  • Are you diabetic and currently on medication to manage your diabetes?*
  • Are you taking METFORMIN containing medications? If Yes, list medications. *
  • Have you had kidney surgery or any kidney disease? *
  • Have you had, or being evaluated for, solid organ transplant? (liver, kidney, heart, lung) *
  • Do you have high blood pressure or have had heart failure that you manage with medication? *
  • Are you taking daily/chronic (>3 months) over the counter anti-inflammatory/pain medications other than Aspirin and Tylenol (such as Advil, Naproxen, Motrin, Ibuprofen)? *
  • Have you had chemotherapy since your last Creatinine/eGFR lab draw? *
  • Have you ever been diagnosed with Myeloma, Lupus, Scleroderma, Rheumatoid arthritis? *

CT CARDIAC & CTA CORONARY STUDIES ONLY:
• Have you ever used beta-blockers? If yes, please comment on adverse reactions.
• Are you, regardless of male or female, taking any medications used to increase blood flow, for erectile dysfunction syndrome or for pulmonary hypertension such as Cialis, Viagra, Tadalafil, and Adcirca?
• NOTE: Avoid any food or drink containing caffeine or alcohol for 4 hours prior to your study.

* High Risk Assessment for Creatinine/eGFR Lab requirement:
• Patient is over 60 years old with no other high risk conditions, lab value within 6 months.
• Patient is over 60 years old with one or more other high risk conditions, lab value within 8 weeks.
• Patient is 60 years old or younger with one or more high risk conditions, lab value within 8 weeks.
• Patient is 60 years old or younger with no high risk conditions, lab value is not required.
DIAGNOSTIC MRI PATIENT SCHEDULING QUESTIONNAIRE

If the answer is YES to any of the questions, please notify UCLA RADIOLOGY prior to scheduling your MR

ALL MR PATIENTS:

- FEMALE: Is there a possibility you may be pregnant? If Yes, pregnancy gestational week?
  - If pregnant, contrast is not recommended, radiologist approval required. Non-contrast is OK.
- FEMALE: Do you have a breast expander, pessary, IUD, copper IUD or diaphragm?
  - If Yes for IUD or diaphragm, what is the make and model?
- Do you weigh over 300 lbs.?
- Are you able to lift yourself onto a bed without help, or do you need assistance?
- Is this your first MRI? Have you had any complications or issues with claustrophobia?
- Do you have anything in your body that you were not born with, like metal shavings, shrapnel, bullets, magnets, or data collecting capsules or pills?
- Have you had any major surgery, such as brain, heart, abdomen, head, bone, joint, or spine surgery?
  - Please note model of implant with Hospital & Year of surgery that implanted the foreign object.
    - BRAIN: Do you have an intra-cranial aneurysm clips, shunts, or coils?
    - HEART/CARDIAC: Do you have pacemakers, pacing wires, DBS, VNS/RNS wires, implant defibrillator, ICD, coils, filters or stents?
    - ABDOMEN: Do you have any coils, filters, stents or shunts?
    - HEAD/NECK: Do you have an eye implant, eye spring, or cochlear (ear) implants?
    - BONE: Do you have post-surgical rods, pins, screws, plates, wires, staples, surgical clips, prosthesis or artificial limb?
    - JOINT: Do you have a joint replacement? (Hip, Shoulder, Knee, etc.)
    - SPINE: Do you have an internal, external drug pump or implanted stimulator?
    - Are any of the implants held in place by a magnet?
    - Do you have any other implants or metals in your body?

MR PATIENTS WITH & W/O CONTRAST STUDIES ONLY:

- Did the ordering provider waive labs for this study?
- Are you allergic to gadolinium or had complication with injected contrast? What was the reaction?
- Are you currently on dialysis?
  - If receiving study from List A (below): Dialysis sessions are needed 12 & 24 hours after study.
- Labs for Creatinine/eGFR (blood draw) within 6 weeks of the study is needed if patient’s study is on List A AND patient has one or more high risk conditions from List B. Otherwise no labs required.
  - List A: Patient is receiving any study using Eovist or Feraheme contrast, or the study is an MR IAC W CON Meniere’s Protocol, MRI Cardiac w/ or w/wo con, or MRA or MRV with any type of LE run-off.
  - List B: High Risk Conditions List - 85 y/o or older, Hypertension, Type 1 diabetes-insulin dependent, history of renal disease (prior dialysis, single kidney, renal cancer, kidney surgery, renal transplant), or diagnosed with Myeloma, Lupus, Scleroderma, or Gout.

MR BREAST PATIENTS ONLY:

- When was your last menstrual cycle? (MR Breast must be scheduled between days 7 to 14 of the menstrual cycle unless reason is NEWLY DIAGNOSED BREAST CA or STAT. N/A if menopausal.)