



DPI of Ft Lauderdale: 1799 W. Oakland Park Blvd.

DPI of Pembroke Pines: 10950 Pines Blvd.

DPI of North Broward: 6808 N State Rd 7, Coconut Creek

DPI of Plantation 7301 NW 4th St #107

Fort Lauderdale Ultrasound: 7420 NW 5th St. #111 Plantation

Scheduling: 954-777-3466

Toll Free: 866-501-6100

FAX: 954-777-3510

Web Page: Diagnosticprofessionals.com

Email: mriscan@diagnosticprofessionals.com

Patient's Name: _____ Doctor's Name: _____

Patient's Phone: _____ Doctor's Phone: _____

Patient's Address _____ City _____ St _____ Zip _____

Patient's Other Phone or Pager: _____ Patient's SS#: _____

Birth Date _____ DOA _____ Type of Accident _____

Attorney's Name: _____ Atty's Phone #: _____

Diagnostic Test Prescribed:

MRI Scan Type _____ W / WO Contrast Cat Scan Type _____ W / WO Contrast

Nuclear Scan _____ Ultrasound _____

X-Ray _____ Dexa _____

Working Diagnoses:

Doctor's Signature: *(Must be Included)* x _____

Insurance Information: (This must be included unless your patient intake sheet is faxed.)

Patient Name _____ Birth date _____

Address _____ City _____ State _____ Zip _____

Insurance Company _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____

Policy or Claim # _____ Authorization # _____

Insured's Name _____ **Insured SS#** _____ **Relationship** _____

Secondary Insurance Company _____ Phone _____

Address _____ City _____ State _____ Zip _____

Group # _____ Policy or Claim # _____ Authorization # _____

Insured Name _____ Insured SS# _____ Relationship _____