

**Computed Tomography (CT)
Screening Questions**

All CT Studies

Screening Questions	Additional Information for “Yes” and/or “Don’t Know” Responses
1. Is there a chance that you might be <u>pregnant</u> ?	- Do Not Schedule Patient. - Patient to notify referring physician for further instructions.
2. Do you weigh over <u>440 lbs</u> ?	- Do Not schedule patient. - Patient to notify referring physician for further instructions.
3. Do you have any <u>special needs</u> , Central Line, Port-A-Cath, or help with mobility?	- Document response in IDX - If “Yes”, prefer to schedule patient between 7am and 3pm, M - F.
4. Is this a “ <u>Research</u> ” study, associated with a “Clinical Trial”?	- Refer caller to the <u>Research Scheduling Office.</u>

CT Studies With IV Contrast

A <u>Serum Creatinine Blood Test</u> level is required for all patients <u>within 6 weeks of CT Study.</u>	- Document <u>Value and Date</u> in IDX - <u>Section C1, CT Outpatient Scheduling Guide</u>
Referring physicians <u>waiving</u> the <u>Serum Creatinine Blood Test.</u>	- Document the waiver in IDX - <u>Section C3, CT Outpatient Scheduling Guide</u>
<u>Serum Creatinine Level of 1.7 mg/dl or higher (Adults)</u>	- Do Not schedule patient. - Referring physician to contact appropriate section radiologist for advice.

Screening Questions	Additional Information for “Yes” and/or “Don’t Know” Responses
1. Do you have <u>sickle-cell disease</u> or <u>hyperthyroidism</u> ?	- Do Not schedule patient. - Referring physician to contact appropriate section radiologist for advice.
2. Do you have <u>kidney disease</u> ? Do you have <u>ACUTE Renal Failure</u> ? Are you on <u>Dialysis</u> ?	- Document response in IDX - <u>Section C6, CT Outpatient Scheduling Guide</u>
3. Are you allergic to <u>Iodine</u> ? Have you received <u>pre-medication</u> instructions? If so, specify instructions received.	- Document response in IDX - <u>Section E, CT Outpatient Scheduling Guide</u>
4. Are you taking <u>Mucomyst (acetylcysteine)</u> for this exam? If so, specify dosage.	- Document response in IDX - <u>Section C7, CT Outpatient Scheduling Guide</u>
5. Do you have <u>Diabetes</u> ? Do you take <u>Glucophage, Glucovance or other Metformin containing medications</u> ?	- Document response in IDX - <u>Section D, CT Outpatient Scheduling Guide</u>