



CENTRA

Cardiovascular Imaging

CENTRALIZED SCHEDULING

Phone: 434.200.3900
Fax: 434.200.2859

- **Centra Lynchburg General Hospital**
1901 Tate Springs Road
Lynchburg, VA 24501
- **SCC Lynchburg**
2410 Atherholt Road
Lynchburg, VA 24501
- **SCC Moneta**
1039 Mayberry Crossing Drive, Suite C
Moneta, VA 24121
- **SCC Gretna**
291 McBride Lane
Gretna, VA 24557
- **SCC Danville**
414 Park Avenue
Danville, VA 24541

BEDFORD SCHEDULING

Phone: 540.425.7545
Fax: 540.425.7542

- Centra Bedford Memorial Hospital
1613 Oakwood Avenue
Bedford, VA 24523

FARMVILLE SCHEDULING

Phone:
Echo/Vascular: 434.392.4370
Stress Tests: 434.315.2470

Fax:
Echo/Vascular: 434.200.2872
Hospital Testing: 434.315.2476

- Centra Southside Community Hospital
800 Oak Street
Farmville, VA 23901
- **SCC Farmville**
900 W. Third Street
Farmville, VA 23901

Cardiovascular Diagnostic Testing Doctor's Order

NAME _____ MRN _____

DOB _____ DATE OF TEST _____ PHONE NUMBER _____

DIAGNOSIS & ICD-10 CODE _____

PATIENT'S INSURANCE COMPANY _____

PATIENT'S PHONE NUMBER _____

EXERCISE TEST

**NOT available in Lynchburg or Farmville offices*

- Exercise Stress Test-**
93015 (Office)/93017 (Hospital)
- Stress Echo*** - 93351
- Dobutamine Stress Echo**** - 93351
***Available ONLY in hospital settings*

NUCLEAR STRESS TEST

**NOT available in Moneta, Danville, Lynchburg or Farmville offices*

- Exercise Stress Nuclear** - 78452 & 93017
- Lexiscan Nuclear** - 78452 & 93017
- Dobutamine Nuclear** - 78452 & 93017

ECHO

**Available ALL locations*

- Echo/Doppler/Color (Complete Echo)** - 93306
- Echo Follow-up (Limited Echo)** - 93308

PULMONARY TEST

***Available in Lynchburg ONLY*

- Pulmonary Function Test** - 94060

MONITORING

Zio Patch
Zio XT 48hr-7d 93242 Zio XT 48hr-7d 93244
Zio XT 7d-14d 93246 Zio XT 7d-14d 93248

RADIOLOGY

- CTA of the Coronary Arteries**

VASCULAR TESTING

- Ankle Brachial Index*** - 93922
 - Lower Extremity Arterial Study***
(if NO stents or grafts present)
 - Without Exercise** - 93923
 - With Exercise** - 93924
 - Lower Extremity Arterial Duplex**
(if stents or grafts ARE present)
 - Unilateral, right** **Unilateral, left** - 93926
 - Bilateral** - 93925
 - Upper Extremity Arterial Study*** - 93923
 - Upper Extremity Arterial Duplex**
 - Unilateral, right** **Unilateral, left** - 93931
 - Bilateral** - 93930
 - Venous Doppler, Lower Extremity - DVT RULE OUT**
 - Unilateral, right** **Unilateral, left** - 93971
 - Bilateral** - 93970
 - Venous Doppler, Upper Extremity - DVT RULE OUT**
 - Unilateral, right** **Unilateral, left** - 93971
 - Bilateral** - 93970
 - Venous Doppler, Lower Extremity - VENOUS REFLUX (Includes DVT rule out)**
 - Unilateral, right** **Unilateral, left** - 93971
 - Bilateral** - 93970
 - Carotid Duplex** - 93880
 - Aortoiliac Duplex**** - 93978
 - Limited Aortoiliac Duplex**** - 93979
 - Abdominal Limited (AAA)***** - 76775
 - Renal Artery Duplex**** - 93975
 - Mesenteric Artery Duplex**** - 93976
- * NOT available in Moneta office*
*** Available in Lynchburg ONLY*
**** Available in Lynchburg, Gretna, Danville, and Moneta ONLY. NOT performed at SCC Farmville, Centra Southside Community Hospital, or Centra Lynchburg General Hospital*

ORDERING PHYSICIAN SIGNATURE: _____ DATE/TIME: _____

ORDERING PHYSICIAN NAME: _____

REFERRING PHYSICIAN PRACTICE: _____ PHONE: _____ FAX: _____