

CLINICAL INFORMATION

PATIENT NAME: Anderson, Jeffany REFERRING MD Murata MR# 579139
EXAM LOCATION: Rt knee MRI HEIGHT 5'4" WEIGHT 145
PATIENT BEEN HERE BEFORE? YES NO DATE _____ DOB 8-22-70

PACEMAKER/DEFIBRILLATOR YES NO
HEART SURGERY/VALVE WIRE SURTURES YES NO
STENTS/COIL/FILTERS YES NO
ANEURYSM/VASCULAR CLIPS YES NO
INSULIN/DRUG PUMP YES NO
METAL FRAGMENTS EYE, HEAD, EAR, SKIN YES NO
SHRAPNEL METAL WORKER OR GRINDER YES NO
CLAUSTROPHOBIC YES NO
PREGNANT YES NO
IMPLANTS (MECHANICAL, ELECTRICAL) YES NO
HARRINGTON RODS YES NO
TNS UNIT - ELECTRICAL UNIT FOR PAIN YES NO
DENTURES OR BRACES YES NO
HEARING AID/IMPLANT YES NO
PAIN MEDICATION WHAT KIND? YES NO
DIABETIC YES NO
KIDNEY DISEASE LIVER YES NO
ALLERGIES MEDICATIONS/CONTRAST YES NO
TATTOOS YES NO
BODY PIERCINGS YES NO

DO YOU HAVE A HISTORY OF ANY MEDICAL CONDITIONS? IF YES, WHAT? _____

PREVIOUS EXAMINATIONS

HAVE YOU HAD ANY OF THE FOLLOWING EXAMS? WHEN WAS YOUR LAST MRI? _____
MRI X-RAYS _____ CT _____ MYELOGRAM _____ ANGIOGRAM _____
EMG _____ ULTRASOUND _____ BONE SCAN _____ SPINAL INJECTION _____
WHERE/WHEN? HERE

PREVIOUS SURGERY

Rt Knee surgery 2008 + 2009 - MURATA

HISTORY/SYMPTOMS

PT WALKED INTO METAL BAR
6-29-11 - PAIN & SLIGHT
SWELLING TO RT KNEE

PATIENT SIGNATURE [Signature] CONFIRMED BY _____
HISTORY TAKEN BY BECKY VIGNOLI DATE 8/9/11