



Radiology Imaging Associates

It's Time to Re-Order!

_____ Radiology Referral Pads

Patient Handouts:

_____ RIA Tri-fold Brochures

_____ Patient MRI Handouts

_____ Patient Mammogram Handouts

_____ Patient Breast Self Exam Cards

_____ Patient Cardiac CTA Handouts

_____ Patient CT Lung Screening Handouts

_____ Patient DEXA Bone Densitometry Handouts

Physician Referral Guides:

_____ CT/MRI Ordering Guidance Chart

_____ CT Lung Screening Guidance Chart

_____ Breast MRI Ordering Guidance Chart

_____ Preauthorization Service Insurance Chart

Physician's name: _____

Office Address: _____

Telephone: _____

Please FAX this request to 301-856-6722 - Attention: Marketing