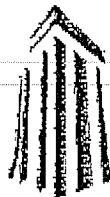


## TRANSMISSION VERIFICATION REPORT

TIME : 07/24/2017 07:09  
NAME : AU STUDENT HEALTH  
FAX : 3342443396  
TEL : 3342443281  
SER.# : BROB1J254642

DATE, TIME  
FAX NO./NAME  
DURATION  
PAGE(S)  
RESULT  
MODE

07/24 07:07  
92771454  
00:02:26  
02  
OK  
STANDARD



AUBURN

MONTGOMERY

Auburn University Student Health Services

TO: East Montgomery Imaging FROM: AUM Student Health Center  
COMPANY: EMIC DATE: 07-21-2017  
FAX NUMBER: 334-277-1781 TOTAL PAGES, INCLUDING COVER: 2  
PHONE NUMBER: 334-277-1210 SENDER'S REFERENCE NUMBER: 334-2910 244-5081  
RE: Savoying Park CC:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

NOTES/COMMENTS



East Montgomery Imaging Center  
6880 Winton Blount Blvd  
Montgomery, AL 36117  
PHONE: 334-277-1210  
FAX: 334-277-1781  
FAX: 334-277-1454

for EMIC use only

### PATIENT INFORMATION

Patient's Full Name Soyung Park DOB 4/23/66 Patient Phone: \_\_\_\_\_  
Ordering Physician Carol Stewart, MD Office Phone 244-3381 Office Fax 244-3396  
Physician Signature/Date/Time [Signature] Cell Phone Number \_\_\_\_\_  
Reason for Exam (DIAGNOSIS) Abdominal CXR

### SPECIAL INSTRUCTIONS

- ☐ STAT call # \_\_\_\_\_ ☐ STAT fax # \_\_\_\_\_ ☐ Send CD ☐ Send patient back to office  
☐ EMIC to schedule ☐ EMIC to precertify exam ☐ Appt Date / Time \_\_\_\_\_  
☐ Obtain i-Stat Creatinine prior to intravenous contrast administration (criteria on reverse side)

### CT (Computerized Tomography)

- ☐ Brain W/O Contrast ☐ IAC's (Temporal Bone)  
☐ Brain W/O & W Contrast ☐ Orbits  
☐ Sinus W/O ☐ Soft Tissue Neck W  
☒ Chest W/O ☐ Chest W  
☐ Abdomen W and Pelvis W (Routine)  
☐ Abdomen/Pelvis W/O (Stone Hunt)  
☐ Abdomen/Pelvis W/O & W (Hematuria Protocol)  
☐ Abdomen W/O ☐ Abdomen W/O & W  
☐ Pelvis W/O ☐ Pelvis W  
☐ Cervical Spine ☐ W/O ☐ W ☐ Bony Pelvis  
☐ Lumbar Spine ☐ W/O ☐ W ☐ Other \_\_\_\_\_  
☐ Thoracic Spine ☐ W/O ☐ W ☐ 3-D Reconstruction

### CTA (CT Angiography)

- ☐ CTA Brain (COW) ☐ CTA Neck  
☐ CTA Abdominal Aorta ☐ CTA Renals  
☐ CTA Pelvis ☐ CTA Runoff-Bil Lwr Ext  
☐ CTA Chest (PE) ☐ CTA Thoracic Aorta

### MRI (Magnetic Resonance Imaging)

#### CONTRAST W/O \_\_\_\_\_ W&W/O \_\_\_\_\_

- ☐ Brain ☐ MRCP (NPO 6hrs)  
☐ IAC's ☐ Kidney  
☐ Pituitary ☐ Liver  
☐ Orbits ☐ Adrenals  
☐ Chest Wall ☐ Hip ☐ R ☐ L ☐ Bilat  
☐ Brachial Plexus ☐ R ☐ L ☐ Bilat ☐ Foot ☐ R ☐ L ☐ Bilat  
☐ Pelvis ☐ Knee ☐ R ☐ L ☐ Bilat  
☐ Cervical Spine ☐ Ankle ☐ R ☐ L ☐ Bilat  
☐ Lumbar Spine ☐ Wrist ☐ R ☐ L ☐ Bilat  
☐ Thoracic Spine ☐ Other \_\_\_\_\_  
☐ Shoulder ☐ with arthrogram ☐ R ☐ L ☐ Bilat

### MRA ANGIOGRAPHY

- ☐ Intracranial - Circle of Willis ☐ Renal Arteries  
☐ Carotids and Vertebrales ☐ Other \_\_\_\_\_

### FLUOROSCOPY

- ☐ GI Series ☐ BE  
☐ GI and Small Bowel ☐ BE Air Contrast  
☐ Small Bowel ☐ IVP  
☐ Esophagram ☐ Other \_\_\_\_\_

### NUCLEAR MEDICINE

- ☐ Bone Scan Whole Body ☐ Renal  
☐ Three Phase Bone Scan ☐ MUGA  
☐ Thyroid (uptake and scan) ☐ Liver/Spleen  
☐ Hepatobiliary Scan (HIDA) ☐ Parathyroid  
☐ Gastric Emptying ☐ Other \_\_\_\_\_

### ULTRASOUND

- ☐ Obstetrical ☐ Pelvic  
☐ Pelvic/Transvaginal ☐ Scrotum  
☐ Abdomen Complete ☐ Abdomen (RUQ)  
☐ Thyroid ☐ Hysterosonogram  
☐ Renal arteries ☐ Renal / Kidney  
☐ Carotid ☐ Aorta  
☐ Venous Doppler lower extremity ☐ R ☐ L ☐ Bilat  
☐ Venous Doppler upper extremity ☐ R ☐ L ☐ Bilat  
☐ Arterial Doppler lower extremity w/ segmental pressures  
☐ Infant Spine  
☐ Other \_\_\_\_\_

### ROUTINE X-RAYS

- ☐ Chest ☐ Cervical Spine  
☐ Abdomen Series ☐ Thoracic Spine  
☐ Ribs ☐ LT ☐ RT ☐ Lumbar Spine  
☐ KUB ☐ Sinuses  
☐ Skull ☐ Pelvis  
☐ Thoracolumbar (Scoliosis) ☐ Other \_\_\_\_\_  
☐ Extremity (specify) \_\_\_\_\_ ☐ LT ☐ RT

### BONE DENSITY

- ☐ Bone Dexa Axial Skeleton

### ADDITIONAL INFORMATION

## Amy Morris

---

**From:** Amy Morris  
**Sent:** Thursday, July 27, 2017 8:14 AM  
**To:** '박소영'  
**Subject:** RE: Re:RE: Re:RE: Re:RE: Re:Test

Soyoung,

I just got in touch with the Imaging Center and they were able to get you in today at 3:45. If this does not work for you, you will need to call them and reschedule.

Thank you

Amy Morris RN-BC  
Auburn Montgomery-Student Health Center  
P.O. Box 244023  
Montgomery, AL 36124  
Phone (334)244-3281 Fax (334) 244-3396

---

**From:** 박소영 [mailto:[sstiger0821@nate.com](mailto:sstiger0821@nate.com)]  
**Sent:** Wednesday, July 26, 2017 10:56 AM  
**To:** Amy Morris  
**Subject:** Re:RE: Re:RE: Re:RE: Re:Test

Thank you very much. I will wait my appointment, and follow its instructions.

Thank you again.

Soyoung Park

----- Original Message -----

**Date:** Thursday, Jul 27, 2017 12:01:56 AM  
**From:** "Amy Morris" <[amorris2@aum.edu](mailto:amorris2@aum.edu)>  
**To:** "박소영" <[sstiger0821@nate.com](mailto:sstiger0821@nate.com)>  
**Subject:** RE: Re:RE: Re:RE: Re:Test

Soyoung,

I will make an appointment for you and send the information as soon as I get it. The cost of the test is \$175.00.

Thank you

Amy Morris RN-BC  
Auburn Montgomery-Student Health Center  
P.O. Box 244023  
Montgomery, AL 36124  
Phone (334)244-3281 Fax (334) 244-3396

---

**From:** 박소영 [mailto:[sstiger0821@nate.com](mailto:sstiger0821@nate.com)]  
**Sent:** Wednesday, July 26, 2017 9:53 AM  
**To:** Amy Morris  
**Subject:** Re:RE: Re:RE: Re:Test

Good morning.

Thank you for your explanation. I think test is important to me, so I will test and send receipt to insurance company. I understand. Do you know how much the exam cost? And also could you appointment for me? My English is not good. Please help me.

Thank you

Soyoung Park

----- Original Message -----

**Date:** Wednesday, Jul 26, 2017 11:44:09 PM

**From:** "Amy Morris" <[amorris2@aum.edu](mailto:amorris2@aum.edu)>

**To:** "박소영" <[sstiger0821@nate.com](mailto:sstiger0821@nate.com)>

**Subject:** RE: Re:RE: Re:Test

Soyoung,

I checked with your insurance company this morning and if you want to use your insurance, your cost will be higher than if you pay for it yourself. We have had this problem in the past with insurance companies sending a big bill to a patient after having the test. What you may be able to do, is pay for the test and send your receipt to the insurance company for reimbursement. There is no guarantee that they will give you some of your money back but it would be less expensive.

Thank you

Amy Morris RN-BC

Auburn Montgomery-Student Health Center

P.O. Box 244023

Montgomery, AL 36124

Phone (334)244-3281 Fax (334) 244-3396

**From:** 박소영 [<mailto:sstiger0821@nate.com>]

**Sent:** Tuesday, July 25, 2017 3:38 PM

**To:** Amy Morris

**Subject:** Re:RE: Re:Test

Hello again.

Can I go your office now? Maybe, I can arrive before 3:50pm. Because my print machine is not working.

Soyoung Park

----- Original Message -----

**Date:** Wednesday, Jul 26, 2017 05:26:36 AM

**From:** "Amy Morris" <[amorris2@aum.edu](mailto:amorris2@aum.edu)>

**To:** "박소영" <[sstiger0821@nate.com](mailto:sstiger0821@nate.com)>

**Subject:** RE: Re:Test

We need a copy of your insurance card. Could you please scan and email it to me? Then we can get started on the process of approval. It shouldn't take more than a couple of days.

Thank you

Amy Morris, RN-BC, BSN  
AUM-Student Health Center  
P.O. 2244023  
Montgomery, AL 36124  
Office 334-244-3281 Fax 334-244-3396

**From:** 박소영 [<mailto:sstiger0821@nate.com>]

**Sent:** Tuesday, July 25, 2017 3:07 PM

**To:** Amy Morris

**Subject:** Re:Test

Hello

Thank you for your kind answers, and I clearly understand. Then what should I do? Of course, I want to know the results quickly, so how much time do I wait for insurance company's answering? I think treatment is first. Could you recommend for me?  
Thank you

Soyoung Park

----- **Original Message** -----

---

**Date:** Wednesday, Jul 26, 2017 04:09:13 AM

**From:** "Amy Morris" <[amorris2@aum.edu](mailto:amorris2@aum.edu)>

**To:** "[sstiger0821@nate.com](mailto:sstiger0821@nate.com)" <[sstiger0821@nate.com](mailto:sstiger0821@nate.com)>

**Subject:** Test

Suyoung,

I understand that you did not receive your test today and that you had a question about this. The reason you did not receive your test is because you wanted to use your insurance to pay for the test. We have to get special authorization from your insurance company, Aetna, in order for the company to pay for the test. They may decide not to pay for the test. We will have to call the company first. If you want the test done quickly, you will need to pay for the test yourself.

Thank you,

Amy

Amy Morris, RN-BC, BSN  
AUM-Student Health Center  
P.O. 2244023  
Montgomery, AL 36124  
Office 334-244-3281 Fax 334-244-3396

▪

▪