



**CORPORATE OFFICE: 688 ALLIANCE PARKWAY, HEWITT, TX 76643
PHONE: 1-866-783-7801 FAX: 1-866-783-7802**

TO FACILITY SLP/THERAPIST/NURSE

**TO ENABLE QUEST TO EVALUATE YOU PATIENT PLEASE SUPPLY
INFORMATION INDICATED IN EACH SECTION**

PLEASE INDICATE THE LOCATION/ROOM NUMBER OF EACH PATIENT

**FAX TO OFFICE - QUEST REQUEST FORM
PATIENT FACE SHEET
COPY OF DOCTOR'S ORDER
SIGNATURE OF PATIENT OR RESPONSIBLE PARTY**

THE QUEST SLP WILL CALL ABOUT 15 MINUTES BEFORE WE ARRIVE

THE QUEST PHYSICIAN WILL REQUIRE THE PATIENT

**CHART
CURRENT VITAL SIGNS**

IT IS BEST FOR THE PATIENT TO BE IN A WHEELCHAIR.

THANK YOU,

**ROD RYAN, MD
MEDICAL DIRECTOR
QUEST IMAGING**



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**TOLL FREE: 1-866-783-7801
TOLL FREE FAX: 1-866-783-7802**

ALTERNATE FAX: 254-751-9746

**MODIFIED BARIUM SWALLOW STUDY
FACILITY CHECK LIST**

1. Please submit all required information listed below and fax:

- MBSS/DYSPHAGIA CONSULT REQUEST FORM**
- PATIENT AUTHORIZATION FORM SIGNED**
- COPY OF PHYSICIAN'S ORDER WRITTEN FOR:
DYSPHAGIA CONSULT INCLUDING MBSS**
- COPY OF PATIENT'S FACE SHEET**
- IF POSSIBLE COPY OF PATIENT'S MEDICARE, MEDICAID &
OTHER INSURANCE CARDS (ASSISTS IN BILLING PROCESS)**

**2. FACILITY STAFF IS RESPONSIBLE FOR HAVING THE PATIENT(S)
UP IN A REGULAR WHEELCHAIR WITH THEIR VITAL SIGNS,
READY FOR THE STUDY BEFORE THE ESTIMATED TIME OF
ARRIVAL.**

WE APPRECIATE YOUR REFERRAL – THANK YOU!