

# University Medical Center Brackenridge

Seton Healthcare Family  
CARDIOPULMONARY & NEURODIAGNOSTIC  
SERVICES ORDER FORM

**APPOINTMENT REQUIRED CALL (512)-324-1375**

**SCHEDULING FAX No. (512)-380-4263**

This request form and insurance information are required at the time of your appointment. Please arrive 30 minutes prior to your appointment.

Today's Date:		Appt. Date:		Appt. Time:		Arrival Time:	
Patient's Name:				Date of Birth:		Daytime Phone No.	
SSN:				Interpreter Services needed <input type="checkbox"/> Sign Language <input type="checkbox"/> Non-English Speaking If Non-English speaking, what language will need to be interpreted:			
Diagnosis or Symptoms/Reason for exam:						ICD-10 code:	
Pre-Authorization:*				Referring Physician (please print):			
Physician Office No.			Critical Contact No.			Physician Fax No.	
Medicare Number:						<input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Suffix	
Medicaid Number:						State:	
Insured Name:				Relationship to Insured: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent			
Insurance Co. Name:				Member/Insured ID #		Group #	
Insurance Co. Address:				City:		State: Zip:	
Insurance Co. Phone No.				Insured SSN (if NOT patient):			
Employer Name:				Employer Phone No.			

\*Required before Scheduling

## SETON LOCATION OF SERVICE

<input type="checkbox"/> University Medical Center Brackenridge, 601 E. 15 <sup>th</sup> St., Austin	<input type="checkbox"/> Seton Northwest Hospital, 11113 Research Blvd., Austin
<input type="checkbox"/> Dell Children's Medical Center, 4900 Mueller Blvd., Austin	<input type="checkbox"/> Seton Pflugerville, 200 N. Heatherwilde, Pflugerville
<input type="checkbox"/> Seton Medical Center Williamson, University Blvd. and FM 1460, Round Rock	<input type="checkbox"/> Seton Southwest Hospital, 7900 FM 1826, Austin
<input type="checkbox"/> Seton Medical Center Austin, 1201 W. 38 <sup>th</sup> St., Austin	<input type="checkbox"/> Seton Medical Center Hays, 6001 Kyle Parkway., Kyle

<input type="checkbox"/> STAT: Call Report to Phone No.	<input type="checkbox"/> Patient to return to Doctor's Office
<input type="checkbox"/> ASAP: Results within 24 hours	Patient may leave after Exam <input type="checkbox"/> With Exam on CD <input type="checkbox"/> Without CD
<input type="checkbox"/> Routine	
<input type="checkbox"/> Sedation	



Physician's Orders

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