

PATIENT QUESTIONNAIRE FOR MRI/CT - MSK

Patient Name: _____ Date: _____

Why is your doctor ordering this exam? _____

What are your symptoms, and where are they located? _____

Do you have a mass or lump? Y N If yes, where? _____

Have you had an injury? Y N If yes, what type of injury, and when did it happen? _____

Do you have arthritis? Y N If yes, what type of arthritis? _____

Do you have joint pain elsewhere? Y N If yes, where? _____

Does your joint lock or have decreased range of motion? Y N

Do you have diabetes? Y N Have you ever been on steroids? Y N

Have you ever had surgery in this joint? Y N If yes, where? _____

What was done? _____

Have you had prior studies of this area? Y N If yes, write below when and where these studies were done.

X-Rays: _____

CT Scans: _____ Bone Scans: _____

MRI Scans: _____

YOUR AREA OF CONCERN

Shoulder

My doctor thinks I have a:

- Dislocation/Subluxation Y N I don't know
- Labral Tear or Instability Y N I don't know
- Rotator Cuff Tear Y N I don't know
- Impingement Y N I don't know

Elbow

My doctor thinks I have a:

- "Tennis Elbow" Y N I don't know
- Ulnar Nerve Problem Y N I don't know
- Biceps Tendon Problem Y N I don't know
- Are you a pitcher or throwing athlete? Y N

Wrist

My doctor thinks I have a:

- Carpal Tunnel Syndrome ... Y N I don't know
- Ligament or Tendon Tear ... Y N I don't know
- Ganglion Cyst Y N I don't know

Hip

My doctor thinks I have a:

- Avascular Necrosis Y N I don't know
- Labral Tear Y N I don't know

Knee

My doctor thinks I have a:

- Meniscal Tear Y N I don't know
- Ligament Tear Y N I don't know

Foot/Ankle

My doctor thinks I have a:

- Poor Circulation Y N I don't know
- Achilles Problem Y N I don't know
- Plantar Fasciitis Y N I don't know
- Skin Ulcers Y N I don't know

Mark location of skin ulcers on drawing:

