



Same day appointments available



Email: mri@cflcare.com
Site: mricfl.com
Cell: (844) 867-4235
Fax: (407) 749-6118

Hours:
Mo, Th 9 AM - 6 PM
Tu, We, Fr 8 AM - 5 PM
Sa-Su Closed

Location: 1405 W. Colonial Dr., Suite B-2, Orlando FL 32804



Auto Other

Patient Name, Date of Birth, Date of Accident, Patient Tel, Insurance, Policy Number, Claim Number, Diagnosis, Practice Name, Practice Address, Physician Tel, Physician Fax, Physician Email, Attorney Name, Attorney Tel

Physician Name, Physician Signature, Date

Notes

Schedule patient for an EMC Evaluation, as defined by Florida statutes sections 627.730-627.7405.

MRI Without Contrast With & Without Contrast

- Brain, W/SWI, Pituitary, IAC'S, Orbits, Soft Tissue Neck, Brachial Plexus, C-Spine, ALAR Ligament, T-Spine, L-Spine, Chest, Abdomen, Pelvis, Shoulder, Elbow, Wrist, Hip, Hand, Long bone upper extremity, Long bone lower extremity, Finger L/R, Knee L/R, Ankle L/R, Foot L/R, Other

X-RAY

- Skull, Orbits, C-Spine, T-Spine, L-Spine, Scoliosis, Shoulder L/R, Chest, Abdomen, Pelvis, Elbow L/R, Wrist L/R, Hip L/R, Hand L/R, Long bone upper extremity L/R, Long bone lower extremity L/R, Finger L/R, Knee L/R, Ankle L/R, Foot L/R, Other

