

## LAKE DISTRICT HOSPITAL

DIAGNOSTIC IMAGING
700 S. J Street
Lakeview, OR 97630
Ph: (541) 947-2114 ext. 233 Fax: (541) 947-5575

## CT SCAN HEAD, NECK, AND CHEST PATIENT INSTRUCTIONS

PATIENT NAME:

EFERRING/ORDERING PROVIDER:
our healthcare provider has requested you have a CT scan. Please check in at the Lake District Hospital atpatient admitting office 15 minutes prior to your appointment time. You will then be directed to the adiology department.
HAT TO EXPECT:
fter you enter the scan room, you will be positioned on a special table by the technologist. The chnologist will explain the procedure, control the scanner, and monitor the progress of your exam.
might be necessary to give you an injection of contrast medium, into your vein, to highlight the vascular ructures.
he scan itself will take between 30 and 45 minutes. It is important to remember every patient and exam re different, so some scans may take longer and involve more than other scans.
radiologist will interpret the scan and a report will be sent to your healthcare provider.
you have any questions, or are unable to make your appointment, please call the adiology department at 541-947-2114 ext. 233.
EXAM DATE CHECK-IN TIME APPOINTMENT TIME