

ROCKY MOUNTAIN CHIROPRACTIC RADIOLOGICAL CENTER, LLC

Dr. Terry R. Yochum-Director Dr. Alicia M. Yochum

PO Box 745040 • Arvada, CO 80006

7500 Wadsworth Blvd • Arvada, CO 80003

dcrad099@rmcrc.com • 303-940-9400 • 303-940-9600 fax

PATIENT NAME _____ **DOB** _____

REFERRING DOCTOR _____

PHONE _____ **FAX** _____

X-RAYS REQUESTED ALL THAT APPLY

	CERVICAL SERIES – LIMITED		LUMBAR SPINE W/ OBLIQUES
	CERVICAL SERIES W/ OBLIQUES		PELVIS & HIP(S)
	CERVICAL SERIES W/ FLEX/EXT		OTHER – LIST BELOW
	CERVICAL SERIES – DAVIS SERIES		
	THORACIC SPINE – AP/LATERAL		
	LUMBAR SPINE – LIMITED		

CHIEF COMPLAINT _____

COMMENTS _____
