**EXAMINATION STATUS:**

- [ ] COMPLETED
- [ ] NOT COMPLETED because *(check reason below)*
  - [ ] Barium in Colon
  - [ ] Patient Not Prepped
  - [ ] Patient Refused
  - [ ] Patient Unable to Cooperate

**PATIENT TRANSPORTATION INFORMATION**

**RADIOLOGY DEPARTMENT**

<table>
<thead>
<tr>
<th>EXAMINATION STATUS:</th>
<th></th>
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</thead>
<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>

**PATIENT DIET:**

- [ ] NPO
- [ ] CLEAR LIQUIDS ONLY
- [ ] RESUME ORDERED DIET

**PATIENT RETURNING**

(please answer the following questions)

- [ ] PATIENT RETURNING

**Patient RETURN DATE:**

**Patient RETURN TIME:**

(Military Time)

**PATIENT NOT RETURNING**

**DATE:**

**PATIENT NAME:**

**ROOM #:**

**PATIENT TRANSPORTATION INFORMATION**

**RADIOLOGY DEPARTMENT**

8850201 Rev. 07/01

Patient Transportation Information_RADIOLOGY

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