

PA Ortho Society 2010 Defensive Imaging Study

What zip code do you practice in? _____

How long have you been in practice? _____

What is your subspecialty (ie spine, sports, hand, etc), if any? _____

Do you practice in an academic setting? _____

How many times have you been litigated against? _____

When was the last litigation brought against you? _____

Instructions: In the tables below, please mark down for each image ordered: the type of imaging ordered, the body part imaged, and check the column next to each order that applies. Please record data for consecutive patients. Xerox the opposite side of this sheet to include more data points. The first two entries are examples.

Imaging Modality Ordered (please circle)	Body Part Imaged (ie knee, femur, L-spine)	Required for clinical care	Ordered for defensive reasons	Imaging Modality Ordered (please circle)	Body Part Imaged (ie knee, femur, L-spine)	Required for clinical care	Ordered for defensive Reasons
Xray MRI CT U/S Bone Scan	forearm	X		Xray MRI CT U/S Bone Scan			
Xray MRI CT U/S Bone Scan	L-spine		X	Xray MRI CT U/S Bone Scan			
Xray MRI CT U/S Bone Scan				Xray MRI CT U/S Bone Scan			
Xray MRI CT U/S Bone Scan				Xray MRI CT U/S Bone Scan			
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Xray MRI CT U/S Bone Scan				Xray MRI CT U/S Bone Scan			

(Over for more)

