



CARDIOLOGY CHECKLIST For Geisinger Health Plan¹

Please be prepared to provide the following information when requesting prior authorization for a cardiology imaging test:

- 1. Member height, weight, and BMI**
- 2. Family history of heart problems**
 - Relationship to member
 - Age at diagnosis
 - Event - MI (myocardial infarction), CABG (coronary artery bypass graft), stent, other
- 3. Medical history**
 - Diabetes
 - Hypertension
 - Stroke
 - Arrhythmia
 - Other
- 4. Cardiac risk factors**
- 5. Previous cardiac surgery**
 - CABG (coronary artery bypass graft), PTCA (percutaneous transluminal coronary angioplasty), stent
 - Heart valve surgery
 - Other
- 6. Physical examination results related to cardiac conditions**
- 7. Medications**
- 8. ECG results**
- 9. Pacemaker – if yes, paced rhythm?**
- 10. Previous cardiac testing and findings**
 - Exercise stress test
 - Echo – transthoracic or transesophageal
 - Stress echo
 - Stress MPI
 - Coronary angiography and left ventriculogram
- 11. Problems with Exercise capacity?**
 - Orthopedic, pulmonary, or peripheral vascular disease
 - Distance, heart rate

**To initiate an authorization request,
visit www.RadMD.com
or call: 1-866-305-9729**

¹ Geisinger Health Plan, Geisinger Indemnity Insurance Company, and Geisinger Quality Options, Inc. shall be collectively referred to herein as “the Health Plan.”