



**PROGRAM FOR IMAGING & COGNITIVE SCIENCES (PICS)  
COLUMBIA UNIVERSITY MEDICAL CENTER**

**Requisition for Clinical Functional Neuroimaging**

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212-342-0299*

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Please complete this requisition and **fax to 212 342 0855**. Patients should arrive 30 minutes prior to the scheduled appointment time. We are located in the basement of the Neurological Institute at the end of the long hallway. Enter through the double glass doors labeled *Columbia Functional MRI Research Center*.

***INSURANCE INFORMATION***

NAME OF INSURED: \_\_\_\_\_ PATIENT SSN: \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_ INSURED SSN: \_\_\_\_\_

INSURANCE COMPANY

CONTACT: \_\_\_\_\_

Name

phone

fax

e-mail

INSURANCE COMPANY ADDRESS: \_\_\_\_\_

INSURANCE COMPANY PATIENT ID: \_\_\_\_\_

INSURANCE COMPANY GROUP ID: \_\_\_\_\_

PRE-CERT #: \_\_\_\_\_

*PLEASE ATTACH COPY OF  
INSURANCE CARD/PRE-CERT  
PAPERWORK IF APPLICABLE*