

The Los Angeles Radiological Society
 Is compiling a list of
SOUTHERN CALIFORNIA RADIOLOGY AND RADIATION ONCOLOGY GROUPS
 for inclusion on our website.

The list will benefit the public and act as a resource for professionals
 looking for or trying to fill a position, or making referrals.

Complete the form providing the information that you wish to appear on our website.
 Or, go to www.larad.org and click on the link on our home page to complete the form online. We will
 begin building our imaging resources website immediately.

Group Name Required _____
Website _____

Practice Profile	Practice Type	Services	Modalities
	<input type="checkbox"/> Imaging Center(s)	<input type="checkbox"/> Pediatric Imaging	<input type="checkbox"/> PET / CT
	<input type="checkbox"/> No. of Centers <input style="width: 50px;" type="text"/>	<input type="checkbox"/> Womens Imaging	<input type="checkbox"/> MRI
	<input type="checkbox"/> Physician's Office	<input type="checkbox"/> Body Imaging	<input type="checkbox"/> Digital MRI
	<input type="checkbox"/> Teleradiology	<input type="checkbox"/> Interventional Treatment	<input type="checkbox"/> US
	<input type="checkbox"/> Hospital Based	<input type="checkbox"/> Neuroradiology	<input type="checkbox"/> Digital US
Hospitals Served	<input type="checkbox"/> Cardiac Imaging	<input type="checkbox"/> Fluoroscopy	
1 _____	<input type="checkbox"/> MSK	<input type="checkbox"/> X-Ray	
2 _____	<input type="checkbox"/> Head and Neck	<input type="checkbox"/> CT	
3 _____	<input type="checkbox"/> Nuclear Medicine	<input type="checkbox"/> Multi-Slice CT	
4 _____	<input type="checkbox"/> Diagnostic Imaging		
5 _____	<input type="checkbox"/> Bone Density		

Contact Information Required-

Name *Include in website profile* _____

Include Street Address _____

Include Street Address _____

Include City _____ State _____ Zip _____

Include Phone _____ Email _____

Group Members

	Name	Email	Phone
Principal	_____	_____	_____
Business Manager	_____	_____	_____
Appointments/Referrals /Scheduling	_____	_____	_____
Public Contact	_____	_____	_____
Number of Partners <input style="width: 50px;" type="text"/>	Number of Associates <input style="width: 50px;" type="text"/>		

Would you like us to place a link to your website on the LARS site? Yes No

Do you use the LARS Classified Listings to post position openings? Yes No

What other websites do you post openings on? _____

Any group choosing to be listed on our imaging resource webpage will receive complimentary position postings (of 100 words or less) on the LARS Classified Ad web page. LARS members always receive complimentary postings on our site.