

Calcium Scoring Scan

DEAR _____

This is a letter to remind you of your scheduled appointment for:

Date _____

Time _____

This will be performed at **MN Heart Clinic (Suite W300)**

Please complete the attached medication form and bring with you to your appointment.

INSTRUCTIONS FOR CALCIUM SCORING SCAN:

1. Please arrive 15 minutes prior to your scheduled appointment time.
2. Wear a comfortable two-piece outfit.
3. No caffeine the day to the exam.

This imaging test is billed as an outpatient hospital procedure. For Fairview pricing, please call 612-672-1048 or contact your insurance company for further information. You will be responsible for charges not covered by your insurance.

If you have no insurance and are self-paying, please call 952-924-8440.
If you have questions about your appointment, please call us at 952-836-3770.