

**Anforderung von Röntgenkontrastmitteln
für den Ordinationsbedarf**

- ☐ 1. Quartal
☐ 2. Quartal
☐ 3. Quartal
☐ 4. Quartal

Name: _____

VPNR: _____

PZN	Artikelname	Stück
2453131	Accupaque PLFL 300MG J/ML 50 10St	
2436138	Accupaque PLFL 300MG J/ML 100 10St	
2436144	Accupaque PLFL 300MG J/ML200 10St	
2436150	Accupaque PLFL 300MG J/ML500 6St	
2458358	Accupaque PLFL 350MG J/ML 200 10St	
2458364	Accupaque PLFL 350MG J/ML 100 10St	
2458364	Accupaque PLFL 350MG J/ML 500 6St	
795175	Darmrohr BRAC BAL+LI 8825	
857025	Darmrohr BRAC FLEX+BAL 8816	
795152	Darmrohr BRAC LI 9508	
6004626	Darmrohr GER 9518/811	
6004120	Darmrohr GER 9522/820 KIND	
102752	Gastrografin Röntgenkontrastmittel 100ML	
1199452	Gastromiro Röntgenmtl 100ML 10St	
1199423	Gastromiro Röntgenmtl 50ML 10St	
103668	Glucagen Hypokit 1MG/ML DFL	
1305405	Iomeron IFL 150MG J/ML 250ML	
1305517	Iomeron IFL 300MG J/ML 100ML 10St	
3512522	Iomeron IFL 300MG J/ML 500ML 6St	
1305463	Iomeron IFL 300MG J/ML 50ML	
1305492	Iomeron IFL 300MG J/ML 70ML 10St	
3512539	Iomeron 350MG J/ML 500ML 6St	
1305670	Iomeron IFL 400MG J/ML 100ML 10St	
2441352	Iomeron IFL 400MG J/ML 200ML 10St	
3512545	Iomeron IFL 400MG J/ML 500ML	
1305658	Iomeron IFL 400MG J/ML 50ML 10St	
4985731	Jopamiro 200MG J/ML IFL 10ML 10St	
722041	Jopamiro 300MG J/ML IFL 10ML 10St	
760900	Jopamiro 300MG J/ML DFL 100ML 10St	
722064	Jopamiro 300MG J/ML STAMP 50 10St	
4223234	Jopamiro 300MG J/ML STAMP 75 10St	
1358502	Jopamiro 300MG J/ML STAMP 200 10St	
760917	Jopamiro 370MG J/ML AMP 20ML	

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UID-Nr.: ATU74552637



PZN	Artikelname	Stück
722087	Jopamiro 370MG J/ML STAMP 50 10St	
760923	Jopamiro 370MG J/ML STAMP 100 10St	
1358519	Jopamiro 370MG J/ML STAMP 200 10St	
1573620	Optiray 300MG JML IFL 100ML 10St	
3128172	Optiray 350MG JML IFL 500ML	
1651366	Optiray 350MG J/ML INJ FS 100 10St	
706160	Prontobario Colon 397G 1St	
1307083	Prontobario HD 340G 24St	
1304185	Scannotrast KONZ OR/REK SUS 24St	
1111173	Ultravist 240MG J/ML FL 50ML 10St	
1111210	Ultravist 300MG J/ML FL 50ML 10St	
1111256	Ultravist 300MG J/ML FL 100ML 10St	
1281136	Ultravist 300MG J/ML FL 200ML 10St	
1281159	Ultravist 300MG J/ML FL 500ML 8St	
1111262	Ultravist 370MG J/ML FL 50ML 10St	
1111279	Ultravist 370MG J/ML FL 100ML 10St	
1111285	Ultravist 370MG J/ML FL 200ML 10St	
1281171	Ultravist 370MG J/ML FL 500ML 8St	
3911802	Unilux IJLSG 300MG J/ML 50ML 10St	
3911825	Unilux IJLSG 300MG J/ML 100ML 10St	
3911831	Unilux IJLSG 300MG J/ML 200ML 10St	
3911848	Unilux IJLSG 300MG J/ML 500ML 5St	
3911854	Unilux IJLSG 370MG J/ML 50ML 10St	
3911877	Unilux IJLSG 370MG J/ML 100ML 10St	
3911883	Unilux IJLSG 370MG J/ML 200ML 10St	
3911908	Unilux IJLSG 370MG J/ML 500ML 5St	
2453088	Visipaque 270MG J/ML PLFL 50ML 10St	
2434731	Visipaque 270MG J/ML PLFL 100ML 10St	
2434748	Visipaque 270MG J/ML PLFL 200 10St	
2435357	Visipaque 270MG J/ML PLFL 500 6St	
2434760	Visipaque 320MG J/ML PLFL 200ML 10St	
2453125	Visipaque 320MG J/ML PLFL 50ML 10St	
2435363	Visipaque 320MG J/ML PLFL 500ML 6St	
2434754	Visipaque 320MG J/ML PLFL 100ML 10St	
1312977	Xenetix 300MG J/ML IFL 100ML 10St	
1312983	Xenetix 300MG J/ML IFL 200ML 10St	
1313020	Xenetix 350MG J/ML IFL 100ML 10St	

Datum

Stempel und Unterschrift Ärztin/Arzt