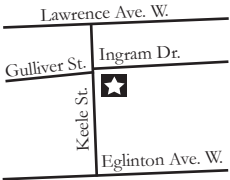


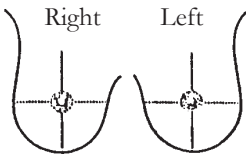
Appointment:	D	D	M	M	Time	:
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Patient's Name (Last, First)		F <input type="checkbox"/> M <input type="checkbox"/>	Birth Date	
Street			Home Telephone #	
City	Province	Postal Code		Work Telephone #
Health Card #		Version Code		
Referring Doctor		Copy To		
Telephone #		Fax #		
Address				
<input type="checkbox"/> 2221 Keele St., Suite 106 Tel #: 416-235-1249 Fax #: 416-235-1563 X-Ray / Ultrasound				<input type="checkbox"/> 960 Lawrence Ave W. Suite 203 Tel #: 416-256-7678 Fax #: 416-256-3907 X-Ray / Ultrasound Mammo / DEXA

BREAST IMAGING (Lawrence Location Only)

We are an accredited mammography facility (Canadian Association of Radiologists)

MAMMOGRAPHY
 BREAST ULTRASOUND



BONE MINERAL DENSITOMETRY (Lawrence Location Only)

Bone Density

X-RAY

BARIUM STUDIES (By Appointment Only)

BA Swallow
 Upper G.I. Series
 G.I. Small Bowel
 BA Enema (Colon)

ABDOMEN

Plain Film (K.U.B.)
 Acute (2 Views)

SPINE & PELVIS

Cervical Spine
 Thoracic Spine
 Lumbo-Sacral Spine
 Sacrum & Coccyx
 S.I. Joints
 Pelvis
 Pelvis & Hips

UPPER EXTREMITIES

R L Shoulder
 R L Clavicle
 R L A.C. Joints
 R L Scapula
 R L Humerus
 R L Elbow
 R L Forearm
 R L Wrist
 R L Hand
 R L Digits 1 2 3 4 5
 R L Other

LOWER EXTREMITIES

R L Hip
 R L Femur
 R L Knee
 R L Tibia & Fibula
 R L Ankle
 R L Foot
 R L Os Calcis
 R L Toes 1 2 3 4 5

HEAD & NECK

Skull
 Sinuses
 Mastoids
 Facial Bones
 Nasal Bones
 Mandible
 Soft Tissue of Neck
 T.M. Joints
 Orbit for FB

CHEST

Chest P.A. & Lat.
 Ribs R L
 Chest P.A.
 Sternum

ULTRASOUND

(Vascular Disease)

Venous Leg Doppler (Keele Only)

ABDOMEN

Complete Abdomen
 Both Abdomen & Pelvic
 Other

NECK/THYROID

JOINT

Shoulder
 Knee - Bakers cyst only

PELVIC FEMALE

Pelvic Only
 Transvaginal
 Obstetrical
 Biophysical
 NT (Keele Only)

PELVIC MALE

Prostate & Bladder
 Scrotal

Clinical Data:

Patient Instructions

- Bring your health card and this requisition
- Please arrive 15 minutes prior to your appointment to register
- Please be on time for your appointment. The mammogram suite and ultrasound rooms are very busy. Patients who arrive late may have to be re-booked for another day.
- Please advise the clinic 24-48 hours before your appointment if you are unable to keep your appointment.
- If you are diabetic, discuss the pre-test instructions with your doctor.

Pre-Test Preparation

ULTRASOUND

- **Abdominal Ultrasound:**

Morning appointments: no solid food after midnight, the night before. No dairy products. No gas producing food or drinks.

Afternoon appointment (after 3pm): You may eat a light breakfast (dry toast, black coffee or tea, juice). No meat, eggs or dairy products. Do not eat lunch.

- **Obstetric & Pelvic Ultrasound:** This test can only be done with the urinary bladder very full. To fill your bladder, you must have finished drinking 32 oz. (or 1 litre) of liquids (no carbonated drinks), 60 minutes before the appointment time. Do not empty your bladder after drinking until the test is finished. If your bladder gets too uncomfortable, you may pass a small amount of urine to ease the pressure. You must have a full bladder for this exam. We will try to examine you as soon as possible so that you will not feel uncomfortable for too long. You may eat prior to your examination time if you are not having any other imaging tests that day (if so, please refer to the specific instructions for that test).
- **Abdomen and Pelvis Examinations Combined**
Follow the above instructions for abdomen, but 1 hour before your appointment, you must have finished drinking 32 oz of WATER ONLY (four 8-oz glasses). Do not go to the washroom.
- **All other ultrasound procedures:** No specific preparation necessary.

MAMMOGRAPHY

On day of examination, after showering, do not use deodorant, anti-perspirant, or talcum powder under arms or on chest. The particles in these products may show up on the mammogram causing false findings. Please wear a 2-piece outfit for your comfort.

BREAST ULTRASOUND

Do not wear underarm deodorant or talcum powder the day of the exam.

BONE MINERAL DENSITOMETRY

No specific preparation necessary. Weight restriction of 260 lbs. No metal in lower back or hip areas.

X-RAY

Note: Women who may be pregnant should not be x-rayed during the last 2 weeks of their menstrual cycle. Please notify the technologist before your exam if you think you may be pregnant.

- **Stomach, Esophogram, Small Bowel Follow Through:** Nothing to eat or drink after midnight.
- **Barium Enema:**
You will need to purchase Pico-Salax from the pharmacy and follow the detailed instructions inside.
8:00am day before exam: Take one package
Between 2:00pm and 4:00pm day before exam: Take the 2nd package
Drink at least 6-8 glasses of clear fluid during the evening. Nothing to eat or drink after midnight until the Barium Enema is completed.
You may take your regular medication if necessary with a minimal amount of water.

**Please fax this sheet to 416-256-3907
to order another requisition pad.**

Your name & address

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