

# **General Requisition**

Scan for a list of locations



Central Booking 780-669-2222

Signature:

**Toll Free** 1-866-771-9446

**Fax** 780-930-1593

Toll Free Fax 1-855-930-1593 Online x-ray.ca/book-an-appointment

To cancel or rebook your appointment, please call Central Booking: Mon-Fri: 8AM-7PM, Sat: 9AM-4PM, Sun: Closed Name: **Appointment Details:** Address: \_\_\_ Date: \_\_\_ \_\_\_\_\_ DOB:\_\_ Male Female Non-Binary MM/DD/YYYY W.C.B. ( ) Other: Location: \_\_\_ Insurance: \_ X-Ray • All Sites **ECG Fluoro Pain Management** X-ray requested: ☐ ECG E.S&D ☐ Injection Site \_ Small Bowel Repeat Number of Injections \* No appointment needed for general x-ray or ECG Signature **Ultrasound** General **Small Parts** MSK - may include x-ray Vascular Abdomen Renal □ Neck (lump, salivary glands) ☐ Shoulder + AC Joint ☐ L ☐ R Echocardiogram ☐ Abdomen + Elastography Bladder Thyroid Elbow  $\Box$ L  $\Box$ R Carotid (incl. vertebral Abdomen + Pelvis Pelvis Scrotum & subclavian arteries) Wrist  $\Box$ L  $\Box$ R Peripheral Arterial Abdominal Wall ☐ Abdomen + E,S&D Lump site: \_\_\_ Fingers  $\Box$ L  $\Box$ R ☐ Liver Elastography ☐ Arm ☐ Leg Other: \_\_ ☐ Hip (adult only)  $\Box$ L  $\Box$ R ☐ HCC Screening Program Peripheral Venous Knee  $\Box$ L  $\Box$ R (for DVT) Ankle  $\Box$ L  $\Box$ R **Obstetrics Breast** Arm Leg Foot  $\Box$ L  $\Box$ R  $\Box$ L  $\Box$ R Complete Series ☐ Routine Pregnancy L R Bilateral Other:  $\Box$ L  $\Box$ R (early, nt, anatomy) ☐ Popliteal Fossa/ BPP (>28 wks) ABUS Soft Tissue ☐ Nuchal Translucency (11-14 wks) ☐ Twins ☐ Axilla ☐ L ☐R **Nuclear Medicine** ☐ Bone Scan (15 min-return 2-4 hours later for 30-60 min) ☐ MIBI - Myocardial Perfusion Scan (Meadowlark, Millwoods) Parathyroid Scan (30 min-return in 2 hrs for 30 min) ☐ Renal Study: ☐ Standard (1 hour) ☐ Cardiac Resting Gated Blood Pool Study (90 min) ☐ Liver RBC Scan for hemangioma (40 min-return in 2 hrs for 1 hour) Lung V/Q Scan (to rule out PE - 90 min) Gallium Scan (2 separate days) ☐ Hypertension ☐ Obstruction ☐ HIDA (Hepatobiliary) + GBEF (2-4 hours) ☐ Thyroid Scan (45 min) Other: **Breast Imaging Densitometry** ☐ Screening mammography + ABUS/US Bone Densitometry ☐ Screening mammography (may include supplementary ultrasound for dense breasts) Lumbar Spine (x-rays for correlation) □ Body Composition ☐ Diagnostic mammography (specify): \_\_\_ ☐ Ultrasound ☐L ☐R ☐ Bilateral ☐ ABUS Please see our dedicated Breast Procedure requisition for further breast workup **Cardiac Diagnostics** MRI & CT Exercise Stress Test All imaging available including comprehensive Neuro, MSK, Breast and Prostate Please see our dedicated Cardiac requisition for other exams Please refer to our dedicated requisition Relevant History, Physical Findings, and Provisional Diagnosis Pregnant? YES NO LMP: \_\_\_\_ Tech: \_\_\_ Time: \_\_ Images: \_\_\_\_ Referring Physician's Information URGENT FAX REPORT (until 4 pm, M-F) ☐ Send Images With Patient Address: \_\_\_ ☐ Copy To: Name Date: Phone

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Fax\_\_\_

## \*\* ALL EXAMINATIONS \*\*

Remember to bring the <u>Imaging Requisition</u> plus your <u>Health Care Card</u> and <u>photo ID</u>. If you are unable to keep your appointment, and need to reschedule, please phone the clinic directly. (There is no facility to look after small children). The following examinations are by appointment only. When making an appointment, please notify if patient is diabetic or pregnant.

## Stomach and Duodenum (S&D), Esophagus (E), Upper GI (UGI), or Small Bowel (SB FT)

Morning Appointment - Nothing to eat or drink after midnight the night before the examination. Small Bowel exams may take up to three hours to complete.

## **Diagnostic Ultrasound Examinations**

## **Abdominal Or Liver Elastography**

For morning appointment: nothing to eat or drink after midnight or the morning of the examination. For afternoon appointment: a light breakfast of toast, coffee or tea (no dairy products) 6 hours prior to the examination

## Abdomen & Pelvic

Nothing to eat for 6 hours prior to the examination, but 1 1/2 hours prior to the examination drink FOUR 8 oz glasses of water and refrain from urinating. Finish all glasses of water 1 hour before time of examination.

## Obstetrical Or Pelvic / Kidneys (Renal) & Bladder

## IMPORTANT: THE BLADDER MUST BE FULL.

1 1/2 hours prior to the examination drink FOUR 8 oz glasses of water and refrain from urinating. Finish all glasses of water 1 hour before time of examination

## **Nuclear Medicine Examinations**

HIDA (Hepatobiliary) Scan: Nothing to eat or drink after midnight the night before the

examination. Stop narcotic pain medication 6 hours prior to scan.

Liver RBC Scan: No Barium intestinal tests for one week prior to scan.

**Thyroid Scan:** Do not take thyroid medication 4 weeks before the exam.

Need results of thyroid blood test at time of scan.

**Myocardial Perfusion Scan:** Nothing to eat of drink for 4 hours before the exam (2

hours if diabetic).

No caffeine for 24 hours prior to injection (chocolate, pop,

decaf coffee).

No food 4 hours prior to exam (early morning exams may have a slice of toast or a granola bar 2 hours before

injection time).

Diabetics - No food for 2 hours prior to exam.

Please continue to drink water or caffeine free beverages

prior to exam.

Wear comfortable clothing and please no cologne or

perfume.

Renal Scan / Renogram: Drink 3 cups of water 30 minutes prior to examination.

Other Scans: Need no preparation unless informed at time of booking.

## \*If you are breast feeding, please talk to the technologist prior to the injection.

## Mammography

Do not use deodorant, antiperspirant or talcum before the examination. Stay on a caffeine free diet to minimize discomfort of compression required for optimal examination. Premenstrual breast tenderness - you may delay booking until tenderness has subsided. Wear a two-piece outfit. At time of booking advise where previous mammogram was done and if possible allow appropriate time for films to arrive before appointment date.

## **Pain Management Injections**

Continue all medications and your usual diet both before and after the procedure. If you have an active infection your procedure will have to be rescheduled and you must notify Central Booking (780-669-2222). Please be advised, depending on your procedure, you may require a driver. When scheduling your appointment our Patient Care Coordinators will provide you with further instructions. You will be required to stay in the clinic for 15 minutes after the procedure to monitor your response to the injection. You should refrain from strenuous activity for at least a day after the injection. Also avoid hot tubs, swimming pools or prolonged bathing for the next 24 hours.

#### FREE PARKING AT ALL SITES

#### Central

**Unity Square** 

11560 - 104 Avenue T5K 2S5 Ph: 780-486-8102 | F: 780-638-6241

## West

Callingwood X-Ray

224B, 6655 - 178 Street T5T 4J5 Ph: 780-487-9363 | F: 780-481-2383

#### Meadowlark

200 Meadowlark Shopping Centre 156 Street - 89 Avenue T5R 5W9 Ph: 780-489-8430 | F: 780-481-6630 Includes: CARDIAC LAB SUITE #234, MRI & CT SUITE #200, PAIN MANAGEMENT SUITE #216

## West End

B1, 9509 - 156 Street T5P 4J5 Ph: 780-483-3422 | F: 780-484-0500

## South

## Lendrum Women's Imaging

10381 - 51 Avenue T6H 0K4 Ph: 780-434-9171 | F: 780-436-5211

## **Calgary Trail X-Ray**

10411 - 51 Avenue T6H 0K4 Ph: 780-438-3802 | F: 780-438-3794

#### Heritage

2049 - 111 Street NW T6J 4V9 Ph: 780-438-0547 | F: 780-438-9211

#### Millwoods

Main Street Mall 6466 - 28 Avenue T6L 6N3

Ph: 780-486-8103 | F: 780-638-6532

## North

## Castledowns

15309 Castle Downs Road T5X 6C3 Ph: 780-457-4070 | F: 780-456-1250

## Hermitage

12779 - 50 Street T5A 4L8 Ph: 780-475-1866 | F: 780-478-0858

## East

## Capilano X-Ray

10147 - 50 Street T6A 2C1 Ph: 780-469-5506 | F: 780-463-2508

#### Leduc

#### Leduc

5307 - 50 Avenue T9E 6T2

Ph: 780-486-8104 | F: 780-638-6533

## **Spruce Grove**

#### Queen Street Place

107, 505 Queen Street T7X 2V2 Ph: 780-962-0297 | F: 780-962-8084

## **Sherwood Park**

#### **Sherwood Park**

136 Athabascan Avenue T8A 4E3 corner of Athabascan and Chippewa Ph: 780-464-1515 | F: 780-464-1216

# Fort McMurray

## Fort McMurray

1, 606 Signal Road T9H 4Z4 Ph: 780-791-1992 | F: 780-791-1994

**ECG** Available

(1) Extended hours of operation for x-ray & ECG only