MEDICAL IMAGING		<b>NERAL REQUISITION</b>		on	Scan for a list of locations
		Fax	Toll Free Fax	Online	
780-669-2222	1-866-771-9446 k your appointment, plea	780-930-1593		, ,	ok-an-appointment
Name:				ppointment Detail	
Address:					
Phone:	DOB:	Male Female	] Non-Binary 🗌 🛛 T	ime:	
Insurance:		Other:		ocation:	
X-Ray • All Sites	ECG	Fluoro	Pain Management		
X-ray requested:	ECG	□E,S&D	Injection Site		
		Small Bowel FT	Repeat Number of Injections		
* No appointment needed for gene	ral x-ray or ECG		Signature		
<ul> <li>Abdomen + Bladder</li> <li>Abdomen + Pelvis</li> <li>Abdomen (no bladder)</li> <li>Elastography</li> <li>Abdomen + Appendix</li> <li>Abdomen + E,S&amp;D</li> </ul> Obstetrics - may include pelvis <ul> <li>Complete Series (early, nt, anatomy)</li> <li>Nuchal Translucency (11-14 wks)</li> </ul>	<ul> <li>HCC Screening</li> <li>Liver Elastography</li> <li>Pelvis + Appendix</li> <li>Renal</li> <li>Bladder</li> <li>Pelvis</li> </ul> Routine Pregnancy <ul> <li>BPP (&gt;28 wks)</li> </ul>	Abdominal Wall     Scrotum     Thyroid     Neck (Salivary Gland     Lump site:	ds)	+ AC Joint       L       R         L       R       L       R         nd       L       R       L       R         only)       L       R       L       R         L       R       L       R       L       R         L       R       L       R       L       R	Vascular Carotid (incl. verteb & subclavian arteries Peripheral Arterial Arms Legs Peripheral Venous (for DVT, leg include pop. fossa) Arm Leg L R
Nuclear Medicine         Bone Scan (15 min-return 2-4 hou         Cardiac Resting Gated Blood P         Gallium Scan (2 separate days)         HIDA (Hepatobiliary) + GBEF (2)	Pool Study (90 min) Liver R Lung V	Myocardial Perfusion Scan ( BC Scan for hemangioma ( /Q Scan (to rule out PE - 90 m I Scan (45 min)	40 min-return in 2 hrs for 1 hou	r) Renal Study:	n (30 min-return in 2 hrs for 30 r Standard (1 hour) Hypertension □Obstructior
Breast Imaging Screening Mammography Screening Mammography plus Diagnostic mammography (spe Ultrasound OL OR OBIAte ABUS	ecify):eral		R o o	L Thora (x-ray Body	Densitometry acic & Lumbar Spine s for correlation) Composition
	e see our dedicated Cardiac requisiti	ion for other exams All i	<b>RI &amp; CT</b> maging available including corr ase refer to our dedicated requi		reast and Prostate
Cardiac Diagnostics	n (Meadowlark, Millwoods, Unity Squ				
Exercise Stress Test Please					
Exercise Stress Test Please     MIBI-Myocardial Perfusion Sca					
Exercise Stress Test Please     MIBI-Myocardial Perfusion Sca	Findings, and Provisiona		Time:	h	mages:
Exercise Stress Test Please MIBI-Myocardial Perfusion Sca Relevant History, Physical	Findings, and Provisiona	al Diagnosis	Time:		mages:
Exercise Stress Test Please     MIBI-Myocardial Perfusion Sca      Relevant History, Physical      Pregnant? YES NO LMF	Findings, and Provisiona	al Diagnosis	Time: Physician's Stamp		X REPORT (until 4 pm, M-I
Exercise Stress Test Please     MIBI-Myocardial Perfusion Sca  Relevant History, Physical  Pregnant? YES NO LMF  Referring Physician's  Name: Address:	Findings, and Provisiona	Al Diagnosis			X REPORT (until 4 pm, M-I
Exercise Stress Test Please MIBI-Myocardial Perfusion Sca Relevant History, Physical Pregnant? YES NO LMF Referring Physician's Name:	Findings, and Provisiona	al Diagnosis Tech:	Physician's Stamp	URGENT FA Send Images Copy To:	X REPORT (until 4 pm, M-I

## ALL REQUISITIONS ACCEPTED

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

Remember to bring the Imaging Requisition plus your Health Care Card and photo ID. 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.
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:	No caffeine for 24 hours prior to injection (chocolate, pop, regular or decaf coffee).
	Nothing to eat or drink for 4 hours before the exam (early morning appointments may have a slice of toast or a granola bar 2 hours before the exam).
	Diabetics - Fasting for 2 hours before the exam.
	Please continue to drink water or caffeine free beverag- es prior to exam.
	Wear comfortable clothing and please no cologne or perfumes.
Renal Scan / Renogram:	Fast from midnight and drink 3 cups of water 30 minutes prior to the exam.
Other Scans:	Need no preparation unless informed at time of booking.
*If you are breast fooding places talk	to the technologist prior to the injection

## \*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** Control

Central					
Unity Square 11560 - 104 Avenue T5K 2S5 Ph: 780-486-8102   F: 780-638-6241	$\bigcirc$				
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	$\bigcirc$				
South					
Lendrum Women's Imaging 10381 - 51 Avenue T6H 0K4 Ph: 780-434-9171   F: 780-436-5211	$\bigcirc$				
Heritage 2049 - 111 Street NW T6J 4V9 Ph: 780-438-0547   F: 780-438-9211	$\bigcirc$				
Millwoods Main Street Mall 6466 - 28 Avenue T6L 6N3 Ph: 780-486-8103   F: 780-638-6532	$\bigcirc$				
North					
Castledowns 15309 Castle Downs Road T5X 6C3 Ph: 780-457-4070   F: 780-456-1250	$\bigcirc$				
Hermitage 12779 - 50 Street T5A 4L8 Ph: 780-475-1866   F: 780-478-0858	$\bigcirc$				
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	$\heartsuit$				
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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

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

>> ECG Available

(<sup>1</sup>) Extended hours of operation or x-ray & ECG only