

(Lindsay Professional Building - Beside Giant Tiger)
 65 Angeline St. N., Unit 11, Lindsay, ON., K9V 5N7
 Main Line: 705-324-0101 - Line 2: 705-324-3164
 Fax: 705-324-0105 - We accept walk-ins

X - RAY

Ultrasound

Abdomen

- Single View (K.U.B.)
- Acute (3 Views)

Head & Neck

- Skull
- Sinuses
- Adenoids
- Soft Tissues of neck
- Pit. Fossa
- Mastoids
- I.A. Meat
- Facial Bones
- Nasal Bones
- Orbits
- Mandible
- T.M. Joints

Chest

- Chest
- Ribs
- Sternum
- Sterno-Clavicular Joints
- Thoracic Inlet

Spine & Pelvis

- Cervical Spine
- Dorsal Spine
- Lumbar (L/S) Spine
- Sacrum-Coccyx
- S.I. Joints
- Pelvis
- Scoliosis Series

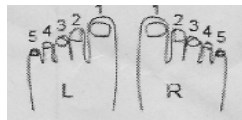
Skeletal Survey

- Metastatic Series
- Arthritic Series
- Metabolic Series

Lower Extremities

- Hip
- Femur
- Knee
- Tib & Fib
- Ankle
- Foot
- Calcaneus

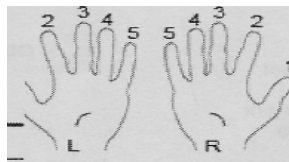
Toes 1 2 3 4 5



Upper Extremities

- Shoulder
- Clavicle
- A.C. Joint
- Scapula
- Humerus
- Elbow
- Forearm
- Wrist
- Hand
- Scaphoid

Fingers 1 2 3 4 5



GENERAL

- Abdomen
- Pelvis: Pre-Post Void
- Female Pelvis
- Transvaginal
- Male Pelvis
- Prostate-Transrectal
- Breasts
- Testicular/Scrotal
- Thyroid
- Neck

OBSTETRICAL

- Obstetrical - Dating
- Nuchal Translucency (IPS)
- Obstetrical - High Risk
- Obstetrical - Anatomy Scan
- Obstetrical + Biophysical Profile

Musculoskeletal

- Hip
- Hamstring
- Knee
- Achilles Tendons
- Ankle
- Foot
- Vascular
- Carotid
- Arterial Upper Ext.
- Arterial Lower Ext.
- Venous Upper Ext.
- Venous Lower Ext.
- Echocardiogram
- Shoulder
- Elbow
- Wrist
- Hand
- Hernia
- Other Muscle
- Other SoftTissue

I Verify to the best of my knowledge
that I am not pregnant

Other Views or -----

Other Examinations: -----

Clinical Information: -----

Referred By

MD

CC

signature

OHIP Number

Patient's Last Name (please print)

Patient's First Name

Appointment Time

Patient's Birth Date

Sex

Patient's Phone No.

DD

MM

YY

M

F

Patient's Address

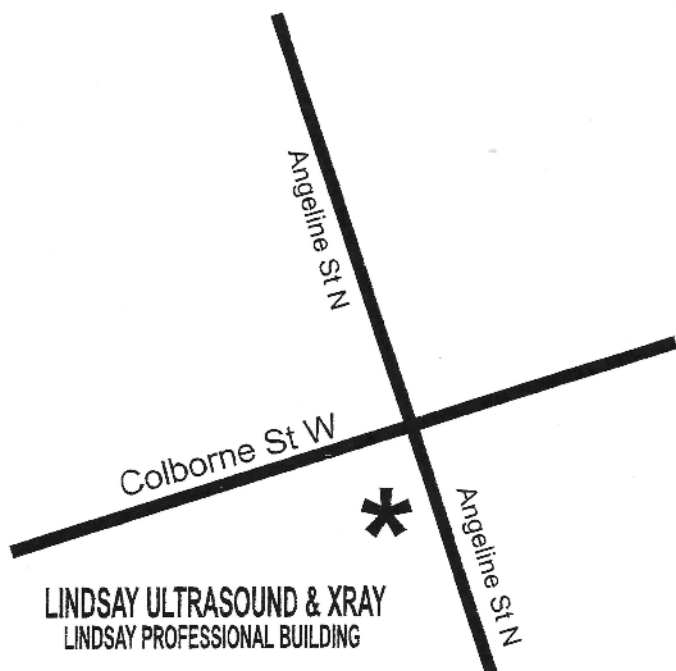
DATE:

Please bring this requisition
form to your appointment

PLEASE BRING YOUR HEALTH CARD
FOR PREPARATION AND DIRECTIONS PLEASE TURN OVER

Please bring this requisition
form to your appointment

Office Hours:
Mon - Fri9am to 5pm



X-RAY PREPARATIONS

CARDIOVASCULAR PREPARATIONS

GENERAL X-RAY

- No preparation required

VASCULAR ULTRASOUND (ALL TYPES)

- No preparation required

ECHOCARDIOGRAM:

- No caffeinated drinks the morning of your appointment
- Bring all the medications you are currently taking

ULTRASOUND PREPARATIONS

ABDOMEN ULTRASOUND

- Eat a fat free dinner the night before your appointment
- No dairy products or fried foods
- No carbonated drinks 12 hours before your appointment
- Nothing to eat or drink after midnight the night before
- Do not eat breakfast

PELVIS ULTRASOUND (ALL TYPES)

- Drink 4-5 glasses (or 2 small bottles) of clear fluids one hour before your appointment time (water, juice, black coffee or black tea)
- DO NOT VOID — a full bladder is necessary for the examination
- No fasting necessary

ABDOMEN AND PELVIS ULTRASOUND TOGETHER:

- Eat a fat free dinner the night before your appointment
- No dairy products or fried foods
- Nothing to eat after midnight the night before
- Drink 4-5 glasses (or 2 small bottles) of clear fluids one hour before your appointment time (water, juice, black coffee or black tea)
- DO NOT VOID — a full bladder is necessary for the examination

NO PREPARATION IS REQUIRED FOR THE FOLLOWING:

- Scrotal/testicular ultrasound
- Thyroid ultrasound
- Musculoskeletal ultrasound (any type)

OBSTETRICAL ULTRASOUND

- For less than 12 weeks: drink 4-5 glasses— (or 2 small bottles) of clear fluids one hour before your appointment time (water, juice, black coffee or black tea). You must eat breakfast/lunch
- For 12-18 weeks: drink 2 glasses (or 1 small bottle) of clear fluids one hour before your appointment time (water, juice, black coffee or black tea) You must eat breakfast/lunch
- For over 18 weeks: no preparation is required. You must eat breakfast/lunch

NUCHAL TRANSLUCENCY:

- Drink 3 glasses (or 1.5 small bottles) of clear fluids one hour before your appointment time (water, juice, black coffee or black tea)
- You must bring all the papers from your doctor (bloodwork requisition, I.P.S. screening paper, etc) with you for your appointment

PROSTATE-TRANSRECTAL ULTRASOUND:

- Purchase a FLEET ENEMA from the pharmacy and follow the instructions in the package
- Self-administer the enema 2 hours before your appointment time.
- Drink 4-5 glasses (or 2 small bottles) of clear fluids one hour before your examination (water, juice, black coffee or black tea)
- DO NOT VOID — a full bladder is necessary for the examination