

Pediatric Diagnostic Imaging | REQUISITION

Date of Issue	te of Issue DD/MM/YY Appointment Date		DD/MM/YY	Booking (403) 541-1200 Fax (403) 210-8377		
Patient Infor	mation Place	e patient label here		Fax (403) 210-8377 Appointment Required		
Name			Parent c	Parent or Guardian		
DOB DD/MM/YY Ale Female Weight			Phone (F	Phone (Res)		
Address			Work	Work Cell		
City/Province		Postal Code				
AHC#						
Physician Referring Physician				ULTRASOUND — check all that apply		
Address				— ☐ Abdomen ☐ Pelvis		
Tel		Fax		Renal (Kidneys/Bladder)		
Additional report to:				□ Bilateral Hips (up to 6 months)		
Call/Fax emergency report to:				 Cranial (Fontanelle must be open) Thyroid Spine (under 3 months) Neck Scrotum /Testicles Pylorus Hernia 		
CD Copy			Spin Scro Pylo			
Physician Signature				Other:		

PHYSICIAN STAMP

RELEVANT HISTORY



Please see reverse for patient instructions





SOUTHWEST CALGARY Southport Atrium Clinic

EFW Radiology Airdrie Clinic

Bone Mineral Densitometry

PATIENT INSTRUCTIONS

• Please arrive 10 minutes in advance of your appointment time.

. If you do not have your card you may be asked to return for your

- · Confirming your identification is essential to ensure accurate medical records and for your protection and security.
- You will be asked at EACH VISIT to provide a VALID HEALTH CARE CARE and PICTURE ID.



- · Please bring your requisition with you.
- Phone to cancel if unable to keep booked appointment.
- · Please notify reception if you are diabetic.
- · Patients suspecting pregnancy should consult their physician before exam date.

• 0-35 Months - No preparation is required. Be prepared to spend some time at the clinic, as the sonographer may have to wait until the bladder fills.

• 36 Months - 9 Years - Full bladder is required. Empty bladder one hour prior to

• 10 Years and older - Full bladder is required. Empty bladder one hour prior to

exam, then drink three eight ounce glasses (750 ml) of water. Do not empty

• (Includes kidneys, liver, bile ducts, gallbladder, spleen, pancreas, abdominal

• 0-35 Months - Do not eat three hours prior to exam time. Be prepared to

vessels, urinary bladder; also includes uterus and ovaries for female patients)

spend some time at the clinic, as the sonographer may have to wait until the

36 Months - 9 Years – Do not eat for six hours prior to exam time. Full bladder

is required. Empty bladder one hour prior to the exam, then drink two eight ounce glasses (500 ml) of water. Do not empty bladder until the exam is

 10 Years and older – Do not eat for six hours prior to exam time. Full bladder is required. Empty bladder one hour prior to exam, then drink three eight ounce glasses (750 ml) of water. Do not empty bladder until the exam is completed.

the exam, then drink two eight ounce glasses (500 ml) of water.

Do not empty bladder until the exam is completed.

ULTRASOUND

Abdominal Exam

Pelvic/Renal Exam

are allowed - no milk or cream.

Includes kidneys and urinary bladder.

bladder until the exam is completed. Combined Exam (Abdomen and Pelvis)

vessels)

examination.

An appointment is required for ALL ultrasound exams.

• 0-35 Months - Do not eat three hours prior to exam time.



Official diagnostic imaging provider for:

A8, 10333 Southport Road SW, Calgary, AB T2W 3X6

Phone: (403) 541-1200 Fax: (403) 210-9081

Phone: (403) 541-1200 Fax: (403) 210-9052

General X-ray
 Ultrasound
 Mammography

General X-ray
 Ultrasound
 Mammography

Bone Mineral Densitometry
 Nuclear medicine

Suite 204, 836 - 1st Avenue NW, Airdrie, AB T4B 0V2









EFW is a proud partner of:









SEPARATE REQUISITIONS FOR:

General Diagnostic, MRI, or Pain Management & Spine Interventional Available as PDF downloads on our website, efwrad.com, or call (403) 717-1816



Neck, Thyroid, Spine, Hips, Cranial and Testicles Require no preparation.

Pediatric Pylorus

bladder fills.

completed.

· Nothing to eat or drink for 3 hours prior to your exam. Please bring a bottle of formula/breast milk or sterile water which will be required during exam.

Notice: The personal health information that you provide to EFW is collected, used and disclosed in accordance with the provisions of the Health Information Act (HIA), and is used to provide diagnostic, treatment and care services to you, and to bill Alberta Health Care for services provided. For more information, please contact the EFW Privacy Officer at (587) 470-6449.



















