

Patient & Appointment Information

Name _____
Address _____
City _____ Province _____ Postal Code _____
Home Phone _____ Other Phone _____
DOB Male Female Weight _____ [lbs / kg]
AHC# _____ WCB#/Accident Date _____ DD/MM/YY

Clinical History

Medication

- Anticoagulation (Warfarin, Plavix®, Heparin)
- ASA
- Other

Allergies

- Latex
- X-ray Contrast / Dye
- Other

Peripheral Procedures

Shoulder

- Shoulder (not specified) R L
- Subacromial Bursa R L
- Glenohumeral Joint R L
- AC Joint R L
- Biceps Tendon (long head) R L
- Tendon Calcification R L

Elbow

- Elbow Joint R L
- Lateral Epicondyle R L
- Medial Epicondylitis R L
- Olecranon Bursa R L

Wrist & Hand

- Radiocarpal Joint R L
- 1st CMC Joint R L
- Carpal Tunnel R L
- DeQuervan's Tenosynovitis R L
- Trigger Finger R L
- Ganglion Cyst R L

Hip & Pelvis

- Hip Joint R L
- Greater Trochanteric Bursa R L
- Iliopsoas Bursa R L
- Ischial Bursa R L
- Piriformis Syndrome R L
- Symphysis Pubis

Knee

- Knee Joint R L
- Baker's Cyst R L

Ankle & Foot

- Ankle Joint R L
- Subtalar Joint R L
- 1st MTP Joint R L
- Plantar Fascia R L
- Ganglion Cyst R L
- Morton's Neuroma R L

Other Joint / Tendon / Bursa

Physician

Referring Physician _____
Phone _____
Fax _____
Copy to Dr. _____
Fax Copy to Dr. _____

Spinal Procedures

Facet Joint

- Stage 1: Facet Injection L1 / L2 R L
- Stage 2a: Medial Branch Block L2 / L3 R L
- Stage 2b: Radiofrequency Neurotomy L3 / L4 R L
- L4 / L5 R L
- L5 / S1 R L

- SI Joint R L

- Epidural Steroid Injection L1 / L2 R L
- L2 / L3 R L
- L3 / L4 R L
- L4 / L5 R L
- L5 / S1 R L
- S1 R L

- Selective Nerve Root Block L1 R L
- L2 R L
- L3 R L
- L4 R L
- L5 R L
- S1 R L

- Spondylolysis / pars defect R L

- Cervical / Thoracic Facet Joint R L

- Coccyx

Repeats for Procedure(s)

Repeat all Instructions
No. of Times MD Initials

Please ensure that you bring this requisition form to your exam

- Please arrive 15 minutes prior to your exam unless notified otherwise
- Please bring your Alberta Health Care Card
- Please bring an adult to supervise children under the age of 12

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- Continue to take all regular medications as prescribed by your doctor.
- **However, be aware that your doctor may need to prescribe medication changes prior to your procedure if you are on blood thinners. You must inform us of any blood thinner medications you are taking at the time of booking.**
- **DO NOT** chew gum or drink carbonated beverages on the day of your spine or lower back procedure as this may interfere with image quality due to excess bowel gas.
- If possible, do not take any extra pain medications on the day of your exam. This allows us to better assess your response to our treatment.
- If applicable, bring any steroid or joint medication (eg. Synvisc, Durolane) prescribed by your doctor for the procedure.
- Once treatment is complete, a technologist will ask that you remain in the waiting area for 10 minutes and will re-evaluate your pain level. Please refrain from any heavy lifting or strenuous activities for at least 24 hours following your treatment, or as prescribed by your doctor.
- All procedures have the potential to affect your ability to operate a motor vehicle. Canada Diagnostic Centres recommends that you arrange transportation to and from the exam.

Special instructions for your nerve root block, epidural or radiofrequency neurotomy:

- You must always be accompanied by an adult throughout your appointment.
 - You must arrange for transportation to and from your appointment.
- Failure to comply with the instructions above will result in your appointment being rescheduled.

- Serious complications are extremely rare but can happen. It may be normal to experience some mildly increased pain and discomfort the day after your procedure. However, if you suffer steadily worsening pain, experience fever/chills or any other sign of infection, develop new numbness or weakening in your limbs, or lose normal bladder/bowel control contact your doctor immediately. If your doctor is not available, please proceed directly to the nearest hospital Emergency Department. Failure to do so may result in permanent disability.
- Cloth gowns and scrubs are provided for your comfort. If you prefer to wear your own clothing and full undergarments, be advised that your clothing could be accidentally stained by disinfectant.

Locations

Calgary NW

Brentwood
Tel: 403.338.4000
Fax: 403.253.4669
830-3630 Brentwood Road NW
Calgary AB T2L 1K8

Calgary NE

Pacific Place
Tel: 403.215.2900
Fax: 403.253.4669
959-999 36 Street NE
Calgary AB T2A 7X6

Calgary SW

Chinook
Tel: 403.253.4666
Fax: 403.253.4669
1-6020 1A Street SW
Calgary AB T2H 0G3

Westhills

Tel: 403.685.6175
Fax: 403.253.4669
200A Stewart Green SW
Calgary AB T3H 3C8

Okotoks

Tel: 403.995.2727
Fax: 403.253.4669
141-31 Southridge Drive
Okotoks AB T1S 2N3

