

## Patient & Appointment Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

DOB   Male  Female Weight

AHC# \_\_\_\_\_ WCB#/Accident Date

Appt. Date	Time	CDC Site

### STEP 1 Clinical History

### STEP 2 Allergies

Latex  X-ray Contrast / Dye  Other

### Medication

Anticoagulation  ASA  Other

### STEP 3 Assessment

Further assess patient clinically to develop treatment plan

### Rehabilitation

Arrange post-procedure physical rehabilitation



### STEP 4 Repeat

Repeat all Instructions No. of Times  MD Initials

## STEP 5 Peripheral Procedures

### Therapy Choice

All can be supplied by CDC

Steroid  Monovisc\*\*/Orthovisc\*\*  
 Platelet Rich Plasma (PRP)\*   
 Cingal\*\* (Monovisc® with 18mg triamcinalone) 

### 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 Epicondylitis R  L

Medial Epicondylitis R  L

Olecranon Bursa R  L

### Wrist & Hand

Radiocarpal Joint R  L

1<sup>st</sup> CMC Joint R  L

Carpal Tunnel R  L

DeQuervain'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

Pes Anserine Bursa R  L

### Ankle & Foot

Ankle Joint R  L

1<sup>st</sup> MTP Joint R  L

Plantar Fascia R  L

Achilles Tendon (PRP) R  L

Retrocalcaneal Bursa R  L

Ganglion Cyst R  L

Morton's Neuroma R  L

### Other Joint / Tendon / Bursa

## Physician

Referring Physician \_\_\_\_\_

Clinic \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Copy to Dr. \_\_\_\_\_

Fax Copy to Dr. \_\_\_\_\_

PRAC ID \_\_\_\_\_ Signature \_\_\_\_\_

## Locations

<b>Mira</b>	103-11910 111 Ave NW Phone: 780.452.9711	Edmonton, AB Fax: 780.452.3451
<b>North Town</b>	134-9450 137 Ave NW Phone: 780.478.7221	Edmonton, AB Fax: 780.475.1860
<b>Sherwood Park</b>	114-80 Chippewa Rd Phone: 780.467.2773	Sherwood Park, AB Fax: 780.467.2982
<b>Westgate</b>	172-17010 90 Ave NW Phone: 780.484.1672	Edmonton, AB Fax: 780.484.2982
<b>Ellerslie</b> 	632 91 St SW Phone: 780.341.6020	Edmonton, AB Fax: 587.458.5581
<b>109 Street</b> 	7121 109 St NW Phone: 780.434.9147	Edmonton, AB Fax: 780.436.7650

## STEP 5 Spinal Procedures

### Lumbar Facets

Stage 1:  
Facet Joint 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 Injection R  L

Pars Interarticularis \_\_\_\_\_ R  L

Coccyx

Lumbar Epidural Steroid Injection L1/L2 R  L  L1 Lumbar

L2/L3 R  L  L2 Selective

L3/L4 R  L  L3 Nerve

L4/L5 R  L  L4 Root

L5/S1 R  L  L5 Block

S1 R  L  S1

Caudal ESI

**NOTE:** \*Cost to patient for special materials used.  
Procedure availability & hours of operation vary by CDC location.

## Please bring this requisition form & Health Care Card to your exam

- Arrive 15 minutes prior to your exam unless notified otherwise
- Our clinics are scent free - Please refrain from wearing scented products
- Please bring an adult to supervise children under the age of 12

## Locations

To book an appointment, please call **780.341.6000** toll free **1.877.420.4CDC (4232)**  
 Fax this form to **1.877.919.3291**, email this form to **appointments@CanadaDiagnostics.ca**,  
 or request an appointment at **CanadaDiagnostics.ca**

### Mira

103-11910 111 Ave NW  
 Phone: 780.452.7211  
 Fax: 780.452.3451

Pain Management  
 Walk in X-ray  
 Ultrasound  
 Mammography  
 GI Studies  
 Bone Mineral Densitometry

### North Town

134-9450 137 Ave NW  
 Phone: 780.478.7221  
 Fax: 780.475.1860

Pain Management  
 Walk in X-ray  
 Ultrasound  
 Mammography  
 GI Studies  
 Bone Mineral Densitometry

### Sherwood Park

114-80 Chippewa Rd  
 Phone: 780.467.2773  
 Fax: 780.467.2982

Pain Management  
 Walk in X-ray  
 Ultrasound  
 Mammography  
 GI Studies  
 Bone Mineral Densitometry

### Westgate

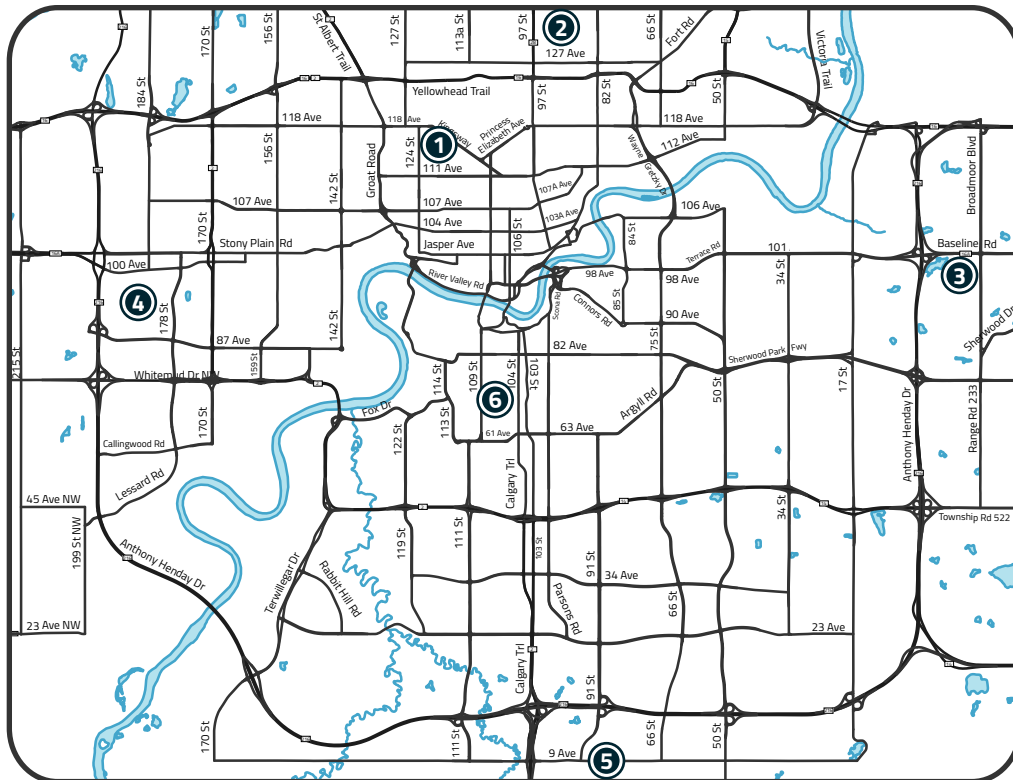
172-17010 90 Ave NW  
 Phone: 780.484.1672  
 Fax: 780.484.2982

Pain Management  
 Walk in X-ray  
 Ultrasound  
 Mammography  
 GI Studies  
 Bone Mineral Densitometry

### NEW Ellerslie

632 91 St SW  
 Phone: 780.341.6020  
 Fax: 587.458.5581

Pain Management  
 Walk in X-ray  
 Ultrasound  
 Mammography  
 GI Studies  
 Bone Mineral Densitometry



### NEW 109 Street

7121 109 St NW  
 Phone: 780.434.9147  
 Fax: 780.436.7650

Breast Centre Radiology  
 Pain Management  
 Ultrasound  
 Mammography  
 Bone Mineral Densitometry

## Exam Preparation

You may also visit [prepare.CanadaDiagnostics.ca](http://prepare.CanadaDiagnostics.ca)

- Continue to take all regular medications as prescribed by your doctor.
- **Please 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 your doctor has prescribed a medication for us to inject, please call us as we can likely provide it to you directly.
- Gowns 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.
- 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.
- 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 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 unavailable, proceed directly to the nearest hospital Emergency Department. Failure to do so may result in permanent disability.
- 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.