

Patient & Appointment Information

Date of Requisition: DD/MM/YY

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

Physician

Referring Physician _____
Clinic _____
Phone _____
Fax _____
Copy to Dr. _____
Fax Copy to Dr. _____
PRAC ID _____
Signature _____

Appt. Date _____ **Time** _____ **CDC Site** _____

1 Clinical History

Allergies Latex X-ray Contrast / Dye Other

2 Medication

Anticoagulation ASA Other

3 Assessment

Further assess patient to develop treatment plan

4 Rehabilitation

Facilitate post-procedure physical rehabilitation

4 Repeat

Repeat all instructions No. of Times MD Initials

5 Peripheral Procedures

Therapy Choice Steroid Botox®* Platelet Rich Plasma (PRP)*
All can be supplied by CDC Monovisc®* Cingal® Durolane®

Shoulder

Shoulder (not specified) R L
 Subacromial Bursa R L
 Glenohumeral Joint R L
 Hydrodilatation for adhesive capsule R L
 AC Joint R L
 Biceps Tendon (long head) R L
 Tendon Calcification (>5 mm) R L

Elbow

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

Wrist and Hand

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

Other Joint/Tendon/Bursa

Knee

Knee Joint R L
 Baker's Cyst R L
 Pes Anserine Bursa R L

Hip and Pelvis

Hip Joint R L
 Greater Trochanteric Bursa R L
 Gluteus Tendon (PRP) R L
 Iliopsoas Bursa R L
 Ischial Bursa R L
 Piriformis Syndrome R L
 Symphysis Pubis R L

Ankle and Foot

Ankle Joint (Tibiotalar) R L
 Subtalar Joint R L
 1st MTP Joint R L
 Achilles Tendon (PRP) R L
 Retrocalcaneal Bursa R L
 Plantar Fascia R L
 Ganglion Cyst R L
 Morton's Neuroma R L

5 Spinal Procedures

Lumbar Facets

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

Cervical Facet _____ R L
 Thoracic Facet _____ R L

SI Joint Injection R L
 Pars Interarticularis _____ R L
 Coccyx

Lumbar 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

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

Caudal ESI

Headache

Greater and Lesser Occipital Nerves R L
 TMJ Joint Injection R L

Booking An Appointment

Appointments may be booked by either the practitioner or the patient, please have healthcare card and requisition form available.

Ph EDM: 780.341.6000

Toll-Free Ph: 1.877.420.4CDC (4232)

Toll-Free Fax: 1.877.919.3291

Email: appointments@CanadaDiagnostics.ca

Online Requests: CanadaDiagnostics.ca

PLEASE BRING THIS REQUISITION FORM AND HEALTHCARE CARD TO YOUR EXAM

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

Locations

North

- Mira**
103-11910 111 Ave NW, T5G 0E5
Ph: 780.452.9711
Fax: 780.452.3451
Pain Management | Walk in X-Ray | Ultrasound
Mammography | GI Studies
Bone Mineral Densitometry
- North Town**
134-9450 137 Ave NW, T5E 6C2
Ph: 780.478.7221
Fax: 780.475.1860
Pain Management | Walk in X-Ray | Ultrasound
Mammography | GI Studies
Bone Mineral Densitometry

South

- 109 Street***
7121 109 St NW, T6G 1B9
Ph: 780.434.9147
Fax: 780.436.7650
Pain Management | Women's Imaging | Ultrasound
Mammography | Bone Mineral Densitometry
- Ellerslie**
632 91 St SW, T6X 0E4
Ph: 780.341.6020
Fax: 587.458.5581
Pain Management | Walk in X-Ray | Ultrasound
Mammography | GI Studies
Bone Mineral Densitometry

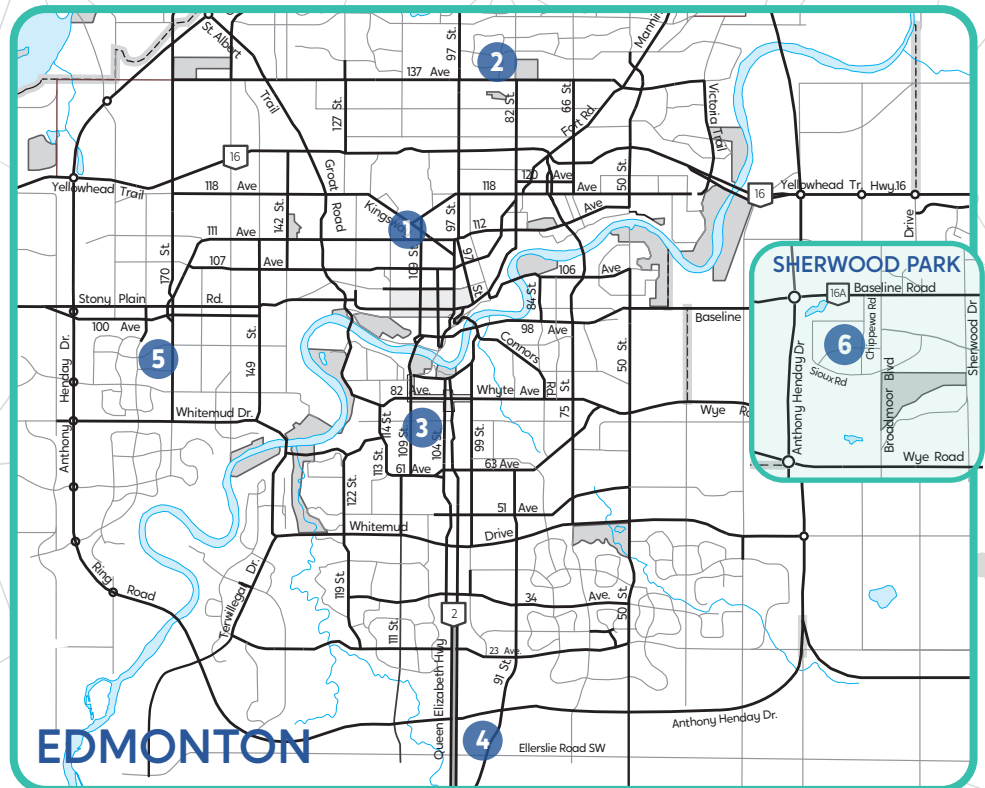
*X-ray not available at this location

West

- Westgate**
172-17010 90 Ave NW, T5T 1L6
Ph: 780.484.1672
Fax: 780.484.2982
Pain Management | Walk in X-Ray | Ultrasound
Mammography | Bone Mineral Densitometry

East of Edmonton

- Sherwood Park**
114-80 Chippewa Rd, T8A 4W6
Ph: 780.467.2773
Fax: 780.467.2982
Pain Management | Walk in X-Ray | Ultrasound
Mammography | GI Studies
Bone Mineral Densitometry



Exam Preparation

You may also visit 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 cervical procedure, nerve root block, epidural or radiofrequency neurotomy

You must always be accompanied by an adult to and from 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.