



Liver; Special Studies

SUBMIT BY EMAIL HERE

Ph CGY: 403.212.5855, Ph EDM: 780.341.6000
Toll-Free Ph: 1.877.420.4CDC (4232)
CGY Fax: 403.253.4669
Toll-Free Fax: 1.877.919.3291
Email: appointments@CanadaDiagnostics.ca
Online Requests: CanadaDiagnostics.ca

REQUEST AN APPOINTMENT BY SCANNING QR CODE ON BACK

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 Other _____ Weight lbs kg

AHC# _____

Find your location at: canadadiagnostics.ca/locations/

Physician

Referring Physician _____

Clinic _____

Phone _____

Fax _____

Copy to Dr. Fax Copy to Dr.

PRAC ID _____

Signature _____

Clinical History

N. A. F. L. D (Non-Alcoholic Fatty Liver Disease)

Risk factor for NAFLD present:

- Obesity, hyperlipidemia, metabolic syndrome and/or type 2 diabetes
- Ultrasound has confirmed fatty liver (steatosis)

Medication and lifestyle factors that may be the cause or contribute to fatty liver and/or abnormal liver tests:

Alcohol consumption

- 2+ drinks per day for males
- 1+ drink per day for females

Medications

- Corticosteroids Tamoxifen Methotrexate Amiodarone

Abnormal Liver Test

- Elevated ALT and/or AST (for > 6 months)

Virology Performed

- Hep B (+) (-)
- Hep C (+) (-)

Required Information

Height (cm) _____ Weight (kg) _____ BMI _____

H. C. C. Screening (Hepatocellular Carcinoma)

- Book patient for serial follow up exam

Ethnicity: Asian Caucasian African descent Other

Eligible Patients:

- Hepatitis B carriers (HBsAg +) who are:
 - Asian males > 40 years old
 - Asian females > 50 years old
 - African > 20 years old
 - Patients with a family history of HCC
 - HIV co-infected

OR

- Cirrhosis
 - Fibroscan Score Biopsy Diagnosis Clinical Diagnosis
 - Other _____

Cause of Cirrhosis: (Check all that apply)

- Hep B Hep C ETCH PBC PSC NAFLD
- Alpha 1 anti-trypsin deficiency Hemachromatosis
- Wilson's Disease AIH (auto immune) Other

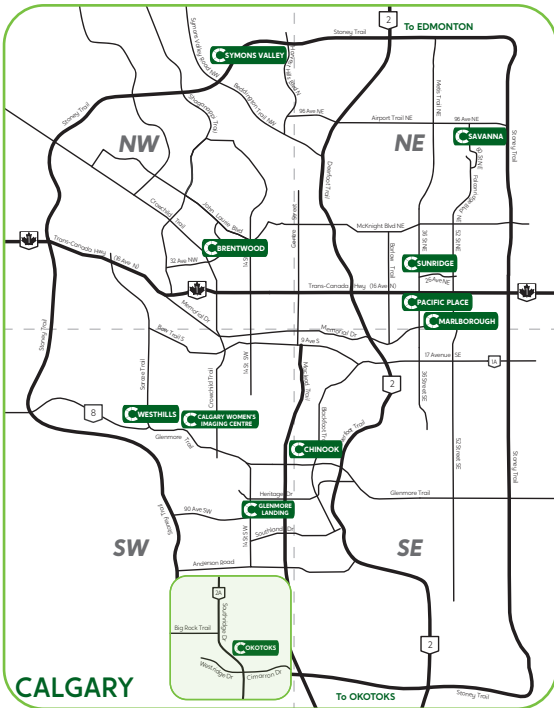
Prior Imaging _____

- Known Benign Liver Lesion: Yes No
- Known Malignant Liver Lesion: Yes No

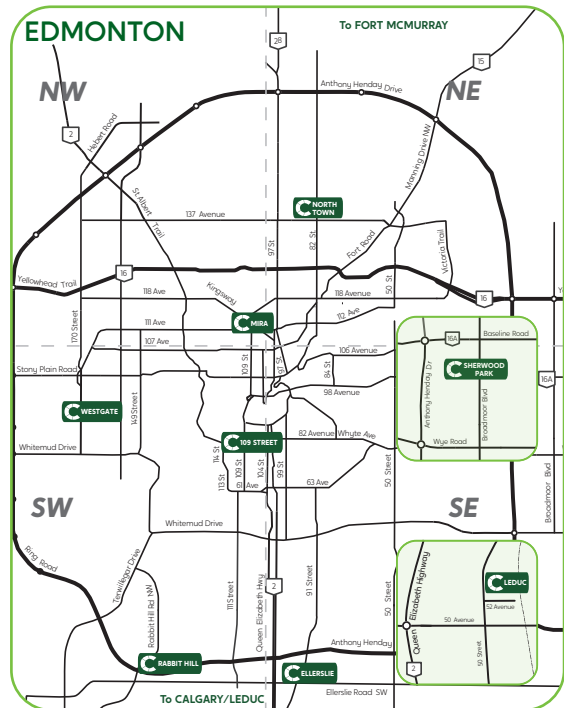
PLEASE BRING THIS REQUISITION FORM AND HEALTHCARE CARD TO YOUR EXAM

- 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

Ph CGY: 403.212.5855, Ph EDM: 780.341.6000
 Toll-Free Ph: 1.877.420.4CDC (4232)
 CGY Fax: 403.253.4669
 Toll-Free Fax: 1.877.919.3291
 Email: appointments@CanadaDiagnostics.ca
 Online Requests: CanadaDiagnostics.ca



Scan QR Code to book an appointment. Services vary by location.



SERVICES

- General Imaging
- Ultrasound
- Mammography
- Bone Mineral Densitometry
- X-Ray
- Gastrointestinal Studies
- Private MRI & CT

- Image Guided Pain Management
- Women's Imaging (*Breast Imaging*)
- Pediatric Imaging
- Nuclear Medicine
- Maternal-Fetal Medicine
- Cardiac Services

Exam Preparation

You may also visit prepare.CanadaDiagnostics.ca

GENERAL

- Please arrive 15 minutes in advance of your appointment time.
- 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 CARD** and **PICTURE ID**.
- If you do not have your card you may be asked to return for your examination.
- 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.

LIVER ULTRASOUND PATIENT PREPARATION

- **DO NOT** eat for 6 hours prior to exam.
- Clear fluids allowed. No milk or cream.

NAFLD ENHANCED PRIMARY CARE PATHWAY

For more information the clinical care of these patients, please see:
https://www.specialistlink.ca/files/Enhanced_Primary_Care_Pathway_NAFLD_10January2018.pdf

HCC SCREENING

- The HCCRAADS read as follows:
- 0 - Exam limited or non-diagnostic.
Liver evaluation or follow up with alternate modality recommended.
 - 1 - No mass or suspicious findings.
No sonographic evidence or worrisome mass or nodule. Patient rebooked for surveillance scan in 6 months time.
 - 2 - Lesion is 10 mm or less in size.
This finding warrants close follow up and this patient will have this examination repeated in 3 months time.
 - 3 - Hepatic nodule greater than 10 mm in size detected.
This finding warrants diagnostic testing to assess for features of HCC. Referral to hepatologist for definitive work-up suggested.