	REQUEST FOR EXAMINATION – LINDSAY			
MyHealth I CENTRE is now WELL Health DIAGNOSTIC CENTRES	Ross Memorial Hospital 10 Angeline Street North, 3 rd Floor (Yellow Elevator) Lindsay, ON K9V 4M8 T: 705-328-6171 F: 705-328-6172 E: lindsay@myhealthcentre.ca			
PAT	TIENT INFORMATION (AF	FIX LABEL IF AVAILABLE)		
Check if Applicable: URGENT Full Name (Birth): Preferred Full Name (If Different from Birth): Address: City: Prov.: Post Cell Phone: Alt. Phone: Date of Birth: Health Card #:	al Code:	Reason for Referral:		
Gender (Birth): Preferred Gender (If Differen	nt from Birth):	ISOLATION PRECAUT	IONS – FOR RMH PATIENTS	
Height (cm): Weight (kg):	—	□ Not Required □ Airborne	Droplet Contact C Difficile	
CARDIOLOGY		NUCLEAF	CARDIOLOGY	
 Exercise Stress Test (GXT) only Exercise Stress Test (GXT) with Cardiac Consult (no caffeine morning of test) Holter Monitor (please bring list of current medications) O 24 hrs O 48 hrs O 72 hrs O Other: RMH Patients: Holter monitors worn by RMH patients are the responsibility of the medical floor. A late fee of \$20 or a replacement fee of \$1,000 will apply if the monitor is not returned at the scheduled time. 		MYOCARDIAL PERFUSION (no caffeine for 12hrs + fasting for 4hrs before test) Exercise Persantine VENTRICULAR FUNCTION Rest MUGA		
BONE MINERAL DENSITY		NUCLEAR MEDICINE		
 Baseline Follow Up Please bring a list of medications & supplements]]]]]]]]]]]]]]]]]]]	BONE SCAN Total Body Specific Site: ENDOCRINE Thyroid Uptake & Scan Parathyroid GALLIUM Total Body Specific Site: PET/CT – Mississauga Visit WELLdiagnostics.ca/Refer for PET/CT requisition	GASTROINTESTINAL Hepatobiliary Scan (HIDA) Solid Gastric Emptying Scan GI Bleeding Scan Meckel's Scan RENAL Renal Scan with Differential Function Lasix Renal Captopril Renal MISCELLANEOUS V/Q Lung Scan Sentinal Node Salivary Scan	
REFERRIN	G HEALTHCARE PROVIDE	ER (STAMP LABEL IF AVAILABLE)		
Referring Provider:	(f (CPSO #: Fax #: Copy To:	(Signature)	

For location details, visit **WELLdiagnostics.ca/Locations**. For test preparation, see the back of this form or visit **WELLdiagnostics.ca/Test-Prep**.









MyHealth is now WELL Health Diagnostic Centres. We're the same team with a new name, providing the highest standard of accredited patient care! All our services require a scheduled appointment.

Please provide 24 hours' notice if you need to reschedule your appointment to avoid a no-show fee.

For the latest clinic information, or to chat live and book your appointment online, please visit WELLdiagnostics.ca/Locations

SCAN	TEST PREPARATION	YOUR TIME
Bone Mineral Density	Wear pants without metal zippers or snaps; Bring list of current medications	20 minutes
Bone Scan	No restrictions	1 st Visit – 15 minutes Return in 2.5 hours 2 nd Visit – 1 hour
Gallium Scan	No restrictions	Day 1 – 10 minutes Day 2 – 1-2 hours
Gastric Emptying	Nothing by mouth overnight; Off opiates, prokinetics and antispasmodics for 48 hours (only if instructed by doctor)	4 hours
GI Bleed	Nothing by mouth for 6 hours	2-3 hours
Hepatobiliary Scan (HIDA)	Clear liquids only from midnight on; No pain medications for 4 hours	2.5 hours
Holter Monitor	Bring list of current medications	Day 1 – 20 minutes Day 2 – 5 minutes
Lung Scan	No restrictions	1 hour
Meckel's Scan	Nothing by mouth overnight	1 hour
MUGA Scan	No caffeine for 4 hours	45 minutes
Myocardial Perfusion	No caffeine or decaf. for 12 hours; Clear fluids only for 4 hours Day $1 - 2$ hours prior to test on both days; Diabetic patients may have a light meal Day $2 - 1$ hour 2 hours prior to test; No powder or cream on skin; Off erectile dysfunction medications for 48 hours Exercise: Off Beta-Blockers for 48 hours (only if instructed by doctor) Persantine: Off Theodur/Theophylline for 48 hours (only if instructed by doctor)	
Parathyroid Scan	No restrictions	1 st Visit – 1 hour Return in 3 hours 2 nd Visit – 1 hour
Renal Scan	Well hydrated (You may empty bladder); Bring list of current medications	1 hour
Renal Scan with Lasix	Well hydrated (You may empty bladder); Bring list of current medications	1.5 hours
Renal Scan with Captopril	Well hydrated (You may empty bladder); Off ACEIs & ARBs for 72 hours (only if instructed by doctor); Nothing by mouth for 4 hours; Bring list of current medications	2 hours
Salivary Gland Scan	No restrictions	1 hour
Thyroid Uptake & Scan	Off thyroid replacement medications for 4 weeks; Off anti-thyroid medications for 4 days (only if instructed by doctor); Nothing by mouth for 2 hours on Day 2	Day 1 – 10 minutes Day 2 – 1 hour

Visit **WELLdiagnostics.ca** or scan this QR code:



- ✓ Location services, hours and directions
- ✓ Chat live and book appointment online
- ✓ Test preparation in 20+ languages
- ✓ Reqs for sleep disorders, PET/CT and more
- $\checkmark\,$ Screening precautions and infection prevention
- ✓ Access your radiology images and results
- ✓ Satisfaction survey
- $\checkmark\,$ Join our team

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