

✓ Sudbury Larch
65 Larch Street, Suite 103
T: 705-673-2565 | F: 705-673-4482

✓ Sudbury Lasalle
1122 Lasalle Boulevard, Suite 107
T: 705-560-1114 | F: 705-560-7191

✓ Sudbury Long Lake
2009 Long Lake Road, Suite B3
T: 705-523-1295 | F: 705-523-2012

PATIENT INFORMATION (AFFIX LABEL IF AVAILABLE)

Check if Applicable: ☐ **URGENT** ☐ WSIB

Patient Full Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Cell Phone: _____ Alt. Phone: _____

Date of Birth: _____ Health Card #: _____

Gender: _____ Height (cm): _____ Weight (kg): _____

Reason for Referral: _____

ULTRASOUND
GENERAL ULTRASOUND

- ☐ Abdomen + Pelvis
(Incl. reproductive organs)
- ☐ Abdomen (Incl. limited bladder
+ lower quadrants, no reproductive organs)
- ☐ Kidneys
- ☐ Bladder
- ☐ Other: _____

PELVIS

- ☐ Female Pelvis (Incl. Transvaginal)
- ☐ Male Pelvis (Excl. Transrectal)
- ☐ Prostate (Incl. Transrectal)

OBSTETRICAL

- ☐ Dating (< 16 wks)
- ☐ Prenatal Screening (IPS/eFTS) 11-14 wks
- ☐ Anatomic 18-20 wks
- ☐ Dual Scan Series (NT scan 11-14 wks
+ Anatomical 18-20 wks)
- ☐ 3rd Trimester Scan
- ☐ With Biophysical Profile (BPP)
- ☐ Twin Series (> 18 wks) - Sudbury Larch
- ☐ Follicular Studies

SMALL PARTS

- ☐ Face
- ☐ Thyroid and Neck
- ☐ Neck
- ☐ Female Breast ☐ R ☐ L
- ☐ Male Breast - Bilateral
- ☐ Chest
- ☐ Groin ☐ R ☐ L
- ☐ Inguinal Canal ☐ R ☐ L
- ☐ Testes/Scrotum
- ☐ Soft Tissue/Lump

MUSCULOSKELETAL

- R L**
- ☐ Rotator Cuff
- ☐ Elbow
- ☐ Wrist
- ☐ Hip
- ☐ Hamstring
- ☐ Knee
- ☐ Popliteal Fossa
- ☐ Ankle
- ☐ Achilles Tendon
- ☐ Plantar Fascia
- ☐ Other: _____

US GUIDED PROCEDURES

- ☐ Biopsy - Thyroid FNA - Sudbury Larch

VASCULAR

- R L**
- ☐ Venous - Lower Extremity (DVT)
- ☐ Venous - Upper Extremity (DVT)
- ☐ Arterial - Lower Extremity (ABI)
- ☐ Arterial - Upper Extremity
- ☐ Carotid
- ☐ Renal Arteries
- ☐ Portal Venous Doppler
- ☐ Aorta: _____
- ☐ OTHER: _____

NUCLEAR CARDIOLOGY (SUDBURY LARCH)
MYOCARDIAL PERFUSION

- ☐ Exercise
- ☐ Persantine

VENTRICULAR FUNCTION

- ☐ Resting (MUGA)

NUCLEAR MEDICINE (SUDBURY LARCH)
BONE SCAN

- ☐ Total Body
- ☐ Specific Site: _____
- ☐ SPECT

ENDOCRINE

- ☐ Thyroid Scan Only
- ☐ Thyroid Uptake & Scan
- ☐ Parathyroid
- ☐ Hyperthyroidism
- ☐ Other: _____

GASTROINTESTINAL

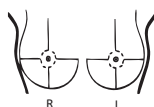
- ☐ Gallbladder/Biliary Scan
- ☐ Gastric Emptying Scan

MAMMOGRAPHY & BONE MINERAL DENSITY

- ☐ Mammogram ☐ R ☐ L ☐ Implants
- ☐ Ontario Breast Screening Program (OBSP) 50-74 yrs of age

BONE MINERAL DENSITY

- ☐ Baseline Study ☐ Follow Up ☐ High Risk ☐ Routine


X-RAY (WALK-IN SERVICE)
ABDOMINAL

- ☐ Single/KUB
- ☐ Acute (includes PA chest)

CHEST

- ☐ Chest PA & LAT
- ☐ Ribs ☐ R ☐ L
- ☐ Sternum
- ☐ Chest Visa

HEAD & NECK

- ☐ Soft Tissue Neck
- ☐ Skull
- ☐ Sinuses (Not insured by OHIP)
- ☐ Facial Bones
- ☐ Nose
- ☐ Mandible
- ☐ Orbits
- ☐ T.M. Joints
- ☐ Adenoids
- ☐ Mastoids

NEJAC PROTOCOL
LOWER EXTREMITIES

- R L**
- ☐ Hip
- ☐ Femur
- ☐ Knee
- ☐ Tib. & Fib.
- ☐ Ankle
- ☐ Foot
- ☐ Heel
- ☐ Toe: 1 2 3 4 5

SPINE & PELVIS

- ☐ Cervical Spine
- ☐ Thoracic Spine
- ☐ Lumbar (L/S) Spine
- ☐ Sacrum/Coccyx
- ☐ S.I. Joints
- ☐ Pelvis
- ☐ Scoliosis Series

OTHER: _____

UPPER EXTREMITIES

- R L**
- ☐ Shoulder
- ☐ Clavicle
- ☐ Sternoclavicular joints
- ☐ A.C. Joint
- ☐ Scapula
- ☐ Humerus
- ☐ Elbow
- ☐ Forearm
- ☐ Wrist
- ☐ Scaphoid
- ☐ Hand
- ☐ Finger: 1 2 3 4 5

LEG LENGTHS
- Sudbury Larch

SKELETAL SURVEY
☐ Bone Age

REFERRING PHYSICIAN INFORMATION (STAMP LABEL IF AVAILABLE)

Referring Physician: _____ (Print Name) _____ (Signature)

Billing Provider #: _____ CPSO #: _____

Tel #: _____ Fax #: _____

Date: _____ Copy To: _____

Report Delivery Preference: ☐ Fax ☐ HRM ☐ Other: _____

All our services require a scheduled appointment, except X-ray, which is provided on a walk-in basis.
For the latest clinic information, or to chat live and book your appointment online, please visit **MyHealthCentre.ca**.

SUDBURY LARCH	SUDBURY LASALLE
<p>65 Larch Street, Suite 103 Sudbury, ON P3E 1B8 Larch Medical Building at Larch Street, just east of Durham</p> <p>T: 705-673-2565 F: 705-673-4482 E: sudbury_larch_radiology@myhealthcentre.ca</p> <p>SERVICES: Biopsy (Thyroid), Bone Mineral Density, Mammography & OBSP, Myocardial Perfusion Imaging, Nuclear Medicine, Prenatal Screening, Twin Series, Ultrasound, Vascular Ultrasound, X-ray (Walk-in Service)</p>	<p>1122 Lasalle Boulevard, Suite 107 Sudbury, ON P3A 1Y4 Balmoral Walk-in Clinic on Lasalle between Carmen and Attlee</p> <p>T: 705-560-1114 F: 705-560-7191 E: sudbury_lasalle@myhealthcentre.ca</p> <p>SERVICES: Prenatal Screening, Ultrasound, X-ray (Walk-in Service)</p>
SUDBURY LONG LAKE	
<p>2009 Long Lake Road, Suite B3 Sudbury, ON P3E 6C3 Four Corners Medical Arts Centre next to Shoppers Drug Mart.</p> <p>T: 705-523-1295 F: 705-523-2012 E: sudbury_longlake@myhealthcentre.ca</p> <p>SERVICES: Prenatal Screening, Ultrasound, X-ray (Walk-in Service)</p>	



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