

☐ Brantford  
☐ London Southdale

☐ Delhi  
☐ London Wharncliffe

☐ London Arva  
☐ Sarnia

☐ London Fanshawe  
☐ Simcoe

## PATIENT INFORMATION (AFFIX LABEL IF AVAILABLE)

Check if Applicable: ☐ **URGENT**

Full Name (Birth): \_\_\_\_\_

Preferred Full Name (If Different from Birth): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Health Card #: \_\_\_\_\_ Version: \_\_\_\_\_

Gender (Birth): \_\_\_\_\_ Preferred Gender (If Different from Birth): \_\_\_\_\_

Height (cm): \_\_\_\_\_ Weight (kg): \_\_\_\_\_

Reason for Referral: \_\_\_\_\_

## SPECIALIST CONSULTATIONS

☐ First Available: ☐ Cardiologist ☐ Respiriologist☐ Dr. \_\_\_\_\_☐ Consult if Test Result is Positive/Abnormal**Please Attach:** Medications, Previous Tests, Family & Social History

## CARDIOLOGY

☐ 12-Lead Electrocardiogram (Rest ECG)☐ Exercise Stress Test (GXT)☐ Holter Monitoring☐ 24 hrs ☐ 48 hrs ☐ 72 hrs☐ Other: \_\_\_\_\_☐ 24hr BP Monitor (Not insured by OHIP)☐ Pulmonary Function Testing - **Simcoe**☐ Pre & Post Spirometry☐ Full Pulmonary Function Test☐ Include Respiriologist Consult☐ Echocardiogram (Colour Doppler)☐ Contrast Echocardiogram☐ Chest pain suspicious of CAD☐ Congestive heart failure☐ Hypertension☐ Murmur☐ Palpitations/arrhythmias☐ Syncope☐ Other: \_\_\_\_\_

## NUCLEAR CARDIOLOGY

## MYOCARDIAL PERFUSION

☐ Exercise ☐ Persantine☐ Dobutamine

## VENTRICULAR FUNCTION

☐ Rest MUGA - **Simcoe**

## X-RAY (WALK-IN SERVICE)

## ABDOMINAL

☐ Single/KUB☐ Acute (Incl. PA chest)

## CHEST

☐ Chest PA & LAT☐ Screening Chest X-ray  
(Not insured by OHIP)☐ Ribs ☐ OR ☐ OL☐ Sternum☐ Chest Visa

## HEAD &amp; NECK

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

## LOWER EXTREMITIES

**R L**☐ Hip☐ Femur☐ Arthritic Knee  
(Incl. contra-lateral)☐ Knee☐ Tib. & Fib.☐ Ankle☐ Foot☐ Calcaneus☐ Toe: 1 2 3 4 5

## SPINE &amp; PELVIS

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

## UPPER EXTREMITIES

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

## OTHER

☐ Skeletal Survey☐ Bone Age☐ Indicate: \_\_\_\_\_

## ULTRASOUND

## GENERAL ULTRASOUND

☐ Abdomen + Pelvis

(Incl. reproductive organs)

☐ Abdomen (Incl. limited bladder  
+ lower quadrants, no reproductive organs)☐ Kidneys\*☐ Bladder☐ Hernia (specify site): \_\_\_\_\_☐ Other: \_\_\_\_\_

\*Baseline abdominal ultrasound may be performed

## MUSCULOSKELETAL

**R L**☐ Shoulder☐ Elbow☐ Wrist☐ Hip☐ Hamstring☐ Knee☐ Ankle/Achilles Tendon/Plantar Fascia  
(circle one above)☐ Other: \_\_\_\_\_

## SMALL PARTS

☐ Salivary Glands☐ Thyroid☐ Chest☐ Groin ☐ R ☐ L☐ Inguinal Canal ☐ R ☐ L☐ Testes/Scrotum☐ Soft Tissue/Lump

(specify site): \_\_\_\_\_

## PELVIS

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

## OBSTETRICAL

**EDC (Required):** \_\_\_\_\_☐ Dating (< 16 weeks)☐ Prenatal Screening (IPS/eFTS 11-14 weeks)☐ Anatomy (18-20 weeks)☐ Dual Scan Series (NT scan 11-14 weeks  
+ Anatomical 18-20 weeks)☐ Fetal Growth (30+ weeks)  
☐ BPP ☐ UA Doppler ☐ MCA Doppler☐ Biophysical Profile (BPP)☐ Follicular Study

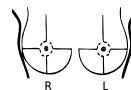
## NEONATAL

☐ Hip (6 weeks-6 months)☐ Pyloric Stenosis (Birth-6 months)☐ Spine (Birth-4 months)

## VASCULAR

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

## MAMMOGRAPHY &amp; WOMEN'S IMAGING

☐ Targeted Breast Ultrasound\* (indicate quadrant on diagram) ☐ R ☐ L☐ Mammogram ☐ R ☐ L ☐ Implants☐ Mammogram & Bone Mineral Density  
☐ R ☐ L ☐ Implants | ☐ Baseline ☐ Follow Up

\*Breast ultrasound is not used for screening purposes. Mammogram/OBSP is recommended.

## BONE MINERAL DENSITY

☐ Baseline ☐ Follow Up

## NUCLEAR MEDICINE (SIMCOE)

## BONE SCAN

☐ Total Body ☐ Specific Site: \_\_\_\_\_

## ENDOCRINE

☐ Thyroid Uptake & Scan☐ Parathyroid

## GALLIUM

☐ Total Body ☐ Specific Site: \_\_\_\_\_

## GASTROINTESTINAL

☐ Hepatobiliary Scan (HIDA)☐ Solid Gastric Emptying Scan☐ GI Bleeding Scan

## RENAL

☐ Renal Scan with Differential Function☐ Lasix Renal☐ Captopril Renal

## MISCELLANEOUS

☐ V/Q Lung Scan☐ Salivary Scan☐ Sentinel Node

## PET/CT – Mississauga

☐ Visit **WELLdiagnostics.ca/Refer**  
for PET/CT requisition

## REFERRING HEALTHCARE PROVIDER (STAMP LABEL IF AVAILABLE)

Referring Provider: \_\_\_\_\_ (Print Name) \_\_\_\_\_ (Signature)

Billing Provider #: \_\_\_\_\_ CPSO #: \_\_\_\_\_

Tel #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Date: \_\_\_\_\_ Copy To: \_\_\_\_\_

Report Delivery Preference: ☐ Fax ☐ HRM ☐ Other: \_\_\_\_\_Access your patient radiology reports at **WELLdiagnostics.ca/Access**

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BRANTFORD	DELHI	LONDON ARVA
<p>Brantford Medical Centre 40 Shellington Place, Suite 201 Brantford, ON N3S 0C5</p> <p><b>T: 519-805-3560   F: 519-805-3561</b> <b>E: <a href="mailto:brantford@welldiagnostics.ca">brantford@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Specialist Consultations, Blood Pressure Monitoring, Contrast Echo, Echocardiogram, Electrocardiogram, Exercise Stress Test, Holter Monitoring</p>	<p>105 Main Street Delhi, ON N4B 2L8 Delhi Community Health Centre on Main Street, north of King Street</p> <p><b>T: 519-428-1243   F: 519-428-2445</b> <b>E: <a href="mailto:delhi@welldiagnostics.ca">delhi@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Prenatal Screening, Ultrasound, Vascular Ultrasound</p>	<p>21589 Richmond Street Arva, ON N0M 1C0 Richmond Street, north of the London Masonville Mall</p> <p><b>T: 519-672-0070   F: 519-266-6739</b> <b>E: <a href="mailto:london_arva@welldiagnostics.ca">london_arva@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Specialist Consultations, Blood Pressure Monitoring, Contrast Echo, Echocardiogram, Electrocardiogram, Exercise Stress Test, Holter Monitoring, Prenatal Screening, Ultrasound</p>
LONDON FANSHAWE	LONDON SOUTHDAL	LONDON WHARNCLIFFE (CARDIOLOGY)
<p>1055 Fanshawe Park Road West, Suite 301 London, ON N6G 5B4 North London Medical Centre on Fanshawe just east of Hyde Park Road</p> <p><b>T: 519-439-5555   F: 519-266-2206</b> <b>E: <a href="mailto:london_fanshawe@welldiagnostics.ca">london_fanshawe@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Specialist Consultations, Bone Mineral Density, Mammography &amp; OBSP, Nuclear Cardiology, Pain Injection, Prenatal Screening, Ultrasound, Vascular Ultrasound, X-ray (Walk-in Service)</p>	<p>510 Southdale Road East, Suite 103 London, ON N6E 0B2 Nixon Medical Centre at the corner of Nixon and Southdale Road</p> <p><b>T: 226-663-2933   F: 226-663-4561</b> <b>E: <a href="mailto:london_southdale@welldiagnostics.ca">london_southdale@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Prenatal Screening, Ultrasound, Vascular Ultrasound, X-ray (Walk-in Service)</p>	<p>279 Wharncliffe Road North, Suite 209 London, ON N6H 2C2 Wharncliffe Health Centre, north of Oxford Street</p> <p><b>T: 519-858-7476   F: 519-266-6739</b> <b>E: <a href="mailto:london_wharncliffe_cardiology@welldiagnostics.ca">london_wharncliffe_cardiology@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Specialist Consultations, Blood Pressure Monitoring, Contrast Echo, Echocardiogram, Electrocardiogram, Exercise Stress Test, Holter Monitoring</p>
LONDON WHARNCLIFFE (RADIOLOGY)	SARNIA	SIMCOE
<p>279 Wharncliffe Road North, Suite 111 London, ON N6H 2C2 Wharncliffe Health Centre, north of Oxford Street</p> <p><b>T: 519-661-0275   F: 519-661-0616</b> <b>E: <a href="mailto:london_wharncliffe_radiology@welldiagnostics.ca">london_wharncliffe_radiology@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Bone Mineral Density, Mammography &amp; OBSP, Prenatal Screening, Ultrasound, Vascular Ultrasound, X-ray (Walk-in Service), <b>Immigration X-ray</b></p>	<p>481 London Road, Suite B-101 Sarnia, ON N7T 4X3 Bluewater Medical Clinic beside the hospital</p> <p><b>T: 519-336-8110   F: 1-800-507-3880</b> <b>E: <a href="mailto:sarnia@welldiagnostics.ca">sarnia@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Specialist Consultations, Blood Pressure Monitoring, Bone Mineral Density, Mammography &amp; OBSP, Contrast Echo, Echocardiogram, Electrocardiogram, Exercise Stress Test, Holter Monitoring, Nuclear Cardiology, Prenatal Screening, Ultrasound, Vascular Ultrasound, X-ray (Walk-in Service)</p>	<p>216 West Street, Suite 304 Simcoe, ON N3Y 1S8 West Street Health Centre at the corner of Queen and West Street</p> <p><b>T: 519-428-1243   F: 519-428-2445</b> <b>E: <a href="mailto:simcoe@welldiagnostics.ca">simcoe@welldiagnostics.ca</a></b></p> <p><b>SERVICES:</b> Specialist Consultations, Blood Pressure Monitoring, Bone Mineral Density, Contrast Echo, Echocardiogram, Electrocardiogram, Exercise Stress Test, Holter Monitoring, Nuclear Cardiology, Nuclear Medicine, Prenatal Screening, Pulmonary Function Test, Ultrasound, Vascular Ultrasound, X-ray (Walk-in Service)</p>



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