



CT Requisition

CT Booking Clerk: 613-623-7962 x240
FAX: 613-623-9878

PATIENT STICKER

INCOMPLETE OR ILLEGIBLE REQUISITIONS WILL BE RETURNED AND MAY DELAY STUDY

Health Card # _____ Location: Outpatient Emergency Inpatient: _____

Surname: _____ Date of Birth: _____ Female Male

First Name: _____ Address: _____

Phone Number - Preferred: _____ Cell# _____

Ambulation: Ambulatory Wheelchair Stretcher Bed

Precautions: None Contact Droplet Airborne

Allergies: _____

LMP: _____

CT Examination Requested: (500lbs CT patient weight limit)

Abdomen Head C-Spine Extremity/MSK

Pelvis Neck T-Spine Other _____

Chest/Thorax Facial Bones/Sinus L-Spine

Clinical Information/Reason for Exam:

Blood work requirements:

Does your patient have any history of renal disease? YES NO

If the patient meets the above criteria, **bloodwork is REQUIRED** within 6 months for outpatients, within 7 days for inpatients, or within 24 hours for acutely ill patients.

eGFR: _____ (mL/min) Date Drawn: _____

Health Care Provider: _____ Signature: _____

Provider Billing Number: _____ Date Requisition Completed: _____

Copy Report to: _____

CT Protocol: **FOR IMAGING USE ONLY**

IV: C- C+ **Clinical Indicator:** SD OT

Oral: Water-Soluble Contrast Lactulose

Signature of Radiologist/Technologist: _____ Pre-Medication if allergic to iodine/contrast

Priority: 1 2 3 4 4N

Same Day < 48hrs < 10 Days < 28 Days Next Available Slot

Verified 2 patient ID's by: [] DOB or [] Armband or [] Name or [] Other



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CT Hours of Operation: Monday to Friday 7:30 am to 3:30 pm

**We need 24 hours' notice to cancel or re-book your appointment.
Arrive 15 minutes early to allow for registration and bring your Health card.
No scented products.**

CT SCAN PATIENT PREPARATION

General Instructions:

If you are diabetic, take your insulin as normally directed.
If you are allergic to contrast media x-ray dye, please inform the Technologist
If you are pregnant or think you may be, please inform the Technologist.
Please arrive 15 minutes before your appointment time and bring your health card.
If you wear an insulin pump or monitor, you may have to remove the device during the test.
If you wear clothes without zippers and metal this could prevent you from having to change into a hospital gown.
If the examination will be performed using contrast media, you may be asked to go for blood work and obtain an eGFR result.

Abdomen and Pelvic Exams: CT of the Abdomen and or Pelvis

Nothing to eat 4 hours prior to the scan, but you can drink clear fluids and take your medications. Some tests may require you to drink several cups of oral contrast for approximately 60 minutes prior to the CT scan. If required, the CT booking clerk will advise you at the time of your booking.

All Other CT Examinations:

No special preparation is required.

INTERNAL USE ONLY

Start Drinking at _____

Finish Drinking at _____