


NUCLEAR MEDICINE – BELLEVILLE SITE ONLY

 QHC Quinte Health Care	Exceptional Care Inspired by You	<u>Ordering Physician Name</u> <small>(Please Print)</small>	OUTPATIENT SERVICES
	<u>Ordering Physician Signature</u>	Name: _____ DOB: _____ HCN: _____ Address: _____	
QHC-BG 265 Dundas St. E Belleville, ON K8N 5A9	QHC-TM 242 King St Trenton, ON K8V 5S6	DATE: _____	
QHC-PECM 403 Main St. E Picton, ON K0K 2T0	QHC-NH 1-H Manor Lane Bancroft, ON K0L 1C0	Copy to: _____	

PLEASE BRING THIS REQUISITION AND YOUR HEALTHCARD
PATIENTS PRESENTING UNSIGNED/INCOMPLETE REQUISITIONS WILL BE RE-BOOKED
APPOINTMENTS MAY BE MADE THROUGH CENTRAL BOOKING AT 613-969-7400 EXT. 2494 OR EXT. 2949

Appointment Date & Time:		PERFORMED AT BG SITE ONLY
Allergies: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list: _____	Pregnant: <input type="checkbox"/> Yes <input type="checkbox"/> No Breast Feeding: <input type="checkbox"/> Yes <input type="checkbox"/> No	Height: _____ Weight: _____
Clinical Indications/History: _____ _____ _____		
NUCLEAR MEDICINE – To Cancel an appointment call Ext. 2417		
CARDIOVASCULAR		GASTROINTESTINAL
1 Myocardial Perfusion Study * Please complete a Nuclear Cardiology Requisition		12 Liver/Spleen Study 13 Labelled RBC Liver 14 GI Bleed 15 Cholescintigram 16 Meckel's Search 17 Salivary Study 18 Gastric Emptying 19 Schillings Test 20 C14 Breath Test
2 Ventricular Function (MUGA)		
GENITOURINARY		RESPIRATORY
3 Renal Study <input type="radio"/> Routine <input type="radio"/> Diuretic Renogram <input type="radio"/> Hypertension (Captopril) <input type="radio"/> DMSA (based on availability)		21 Lung Vent & Perf (VQ) 22 Lung Quantification
SKELETAL		ENDOCRINE
4 Bone Scan <input type="radio"/> Whole Body <input type="radio"/> Specific Site: _____		23 Thyroid Scan (+/- Thyroid Uptake) 24 Parathyroid
5 Bone Mineral Density <input type="radio"/> Routine Pt Weight: _____ <input type="radio"/> High Risk		
MISCELLANEOUS		OTHERS
6 Gallium Study <input type="radio"/> WB <input type="radio"/> Specific Site: _____		
7 Labelled WBC Study 8 Mammoscintigraphy 9 Sentinel Node Localization 10 Endocrine Tumor Localization 11 Chromium Blood Volume		
TECHNOLOGIST NOTES: _____ _____		



Bring your requisition & Health Card to your appointment.
Arrive 20 minutes prior to appointment for registration.
If unable to keep appointment, please give 24 hours notification.
All QHC hospitals are designated as a reduced scent environment.
We do not provide child care, please leave young children at home

CARDIOVASCULAR

Myocardial Perfusion Study

- You will receive a phone call and a prep sheet to explain the requirements of the procedure. Your test may take 2 consecutive days.
- Ventricular Function (MUGA)**-No preparation required. Patient must be off chemotherapy for 1 week before the procedure.

GENITOURINARY

Renal Study

- **Routine** – No preparation required. Patient must not have had IV contrast the last 24 hours.
- **Diuretic Renogram** – Patient must not have had IV contrast in the last 24 hours. Inform the technologist if you have allergies to furosemide
- **Hypertension (Captopril)** - Patient must fast for a minimum of 4 hours. Patient must be off ACE inhibitors and diuretics for 2-5 days. Patient must bring their medications with them the day of the test. **Note:** This test may require 2 days of pictures.
- **DMSA** –No preparation. Images are taken 3 hours post injection

SKELETAL

Bone Scan

- No prep. This is a two-part test with a 2-3 hour break, depending on the study. This break is required for the tracer to reach the proper distribution in the body. The second part of the test takes approximately 1 ½ hrs. Please inform the technologist if you have had contrast media in the last 24 hours.

Bone Mineral Density

- No Calcium supplements or Tums 24 hours before the test. No x-ray procedures with contrast in the 5 days preceding the test.

GASTRO INTESTINAL

Liver/Spleen Study - No preparation required. Please inform the technologist if you have had contrast media in the last week

Labelled RBC Liver

- No prep. This is a two-part test with a 1 ½ hr break in between. The first part of the test takes 1 hr and the second part of the test takes about 1 hour.

GI Bleed

- Please inform the technologist if you have had received blood products (transfusions) in the last week. You must not have had barium contrast in the 48 hours prior to the test

Cholescintigram

- You must be fasting for 4 hours before the test, but should have eaten in the past 24 hours. Please inform the technologist if you have had surgery to your gallbladder, or if you have had morphine in the last 12 hours. Notify the technologist if you have an allergy to morphine.

Meckel's Search

- Patients must be fasting for 12 hours before the test. 1 hour before the test, the patient will be given cimetidine or ranitidine to increase test sensitivity. No laxatives or enemas for 2 weeks before the test.

Salivary Study

- No thyroid blocking agents, ie. Perchlorate or iodine 48 hours prior to the test the scan

Gastric Emptying

- NPO for a minimum of 8 hrs. Diabetics should bring their insulin with them the day of the test

Schillings Test

- Patients must be fasting a minimum of 8 hours before the test. No laxatives, B12 injections, or multivitamins for 5 days before the test. The patient will have to bring a small urine sample on the morning of the test. If the patient has had a previous Nuclear Medicine test, they may be required to provide a 24 hr urine sample before the test can begin.

C14 Breath Test

- Patients must be fasting for 12 hours before the test. Patient must be off all antibiotics (for any reason) and Bismuth products (Pepto-Bismol) for at least 4 weeks before the test. Please discontinue all stomach medication for 48 hours. (Please consult your Pharmacist to go over your medications, both prescription and non-prescription medications). Patients must be off Sulcrate (sulcralfate) for 7 days before test. Antacids must be stopped 12 hours (as long as they do not contain Bismuth). All non-essential medications should be discontinued for 12 hours prior to the test. No barium swallow the week prior to the test.

RESPIRATORY

Lung Vent & Perf (VQ)/ Lung Quantification

- No prep required. You will be required to have a chest x-ray within the past 24 hours.

ENDOCRINE

Thyroid Scan (+/- Thyroid Uptake)-No preparation required. This may be a 2 day test.

Parathyroid - No prep. Please inform the technologist if have taken thyroid medication or have had contrast media in the last week.

MISCELLANEOUS

Gallium Scan

- The technologists will review the dietary restrictions when you come for your injection. Images are taken 2 to 3 days after the injection.

Labeled WBC Study

- No prep required. This is a 2 day test. The first day, the patient will have blood taken and re-injected 2-3 hours later. The patient will return for images the next day.

Mammoscintigraphy

- Please obtain recent mammograms (< 3 months) and have films available. Procedure may not be done until 2 weeks after fine needle aspiration and 4-6 weeks after core or excisional biopsy

Sentinel Node Localization –No preparation required

Endocrine Tumor Localization - Your doctor will discuss the test preparation with you

Chromium Blood Volume – No preparation required