X-RAY MAMMOGRAPHY GENERAL ULTRASOUND CARDIOLOGY BMD VASCULAR ULTRASOUND FLUOROSCOPY

Call at least 24 hours before to Cancel/Reschedule appointment

OID - Compu Sound Vascular Lab OID - Danfo		h & Main	OID - M	arkham	OID - Markham & Ellesemere
Ph: 416-431-5885	Ph: 416-69	1-5071	Ph: 905-2	94-4880	Ph: 416-439-4866
3000 Lawrence Ave. E, Suite C-02, Building C Scarborough, M1P 2V1 Fax No.: 416-438-6008	2494 Danforth Ave, Suite 3A, Toronto, ON M4C 1K9 Fax: 416-691-3349 • X-RAY•ULTRASOUND • MAMMOGRAM		6633 Highway 7 East, Suite 005, Markham, ON L3P 7P2 Fax: 905-472-6629 • X-RAY • ULTRASOUND		1200 Markham Road, Suite 112, Scarborough ON M1H 3C3 Fax: 416-439-5776 • X-RAY • ULTRASOUND
• CARDIOLOGY *				RASOUND • BMD	• BMD • FLUOROSCOPY
OID - VPM		OID - W	/ynford	OID - 3000	Lawrence
Ph: 416-7	59-3462	Ph: 416-4	43-2626	Ph: 416-43	38-6636
520 Ellesmere Road, Suite B15, Lower Level Scarborough, ON M1R 4E6 Fax: 416-759-9237		20 Wynford Drive, Suite 312, North York ON, M3C 1J4 Fax: 416-443-2611		3000 Lawrence Ave. E, Suite C-02, Building C Scarborough, M1P 2V1 Fax: 416-438-6008	
• X-RAY • ULTRASOUND • BMD • MAMMOGRAM		• X-RAY • UI	LTRASOUND		LTRASOUND Mammogram

MAMMOGRAPHY PREPARATIONS

No deodorant, powder, lotion, or perfume on the upper part of the body

ULTRASOUND PREPARATIONS

ARDOMEN ULTRASOUND

- EAT A FAT FREE DINNER THE NIGHT BEFORE YOUR APPOINTMENT
- NO DAIRY PRODUCTS OR FRIED FOODS
- NO CARBONATED DRINKS 12 HOURS BEFORE YOUR APPOINTMENT
- NOTHING TO EAT OR DRINK AFTER MIDNIGHT THE NIGHT BEFORE
- DO NOT EAT BREAKFAST

PELVIS ULTRASOUND (ALL TYPES)

- DRINK 4-5 GLASSES OF WATER OR CLEAR FLUID (WATER, JUICE, BLACK COFFEE OR BLACK TEA) TO BE FINISHED ONE HOUR BEFORE YOUR APPOINTMENT TIME
- DO NOT VOID A FULL BLADDER IS NECESSARY FOR THE EXAMINATION
- NO FASTING NECESSARY

ABDOMEN AND PELVIS ULTRASOUND TOGETHER

- EAT A FAT FREE DINNER THE NIGHT BEFORE YOUR APPOINTMENT
- NO DAIRY PRODUCTS OR FRIED FOODS
- NOTHING TO EAT AFTER MIDNIGHT THE NIGHT BEFORE
- DRINK 4-5 GLASSES OF WATER TO BE FINISHED ONE HOUR BEFORE YOUR APPOINTMENT TIME
- DO NOT VOID A FULL BLADDER IS NECESSARY FOR THE EXAMINATION

NO PREPARATION IS REQUIRED FOR FOLLOWING

- SCROTAL/TESTICULAR ULTRASOUND
- · THYROID ULTRASOUND
- MUSCULOSKELETAL ULTRASOUND (ANY TYPE)

OBSTETRICAL ULTRASOUND

- FOR LESS THAN 12 WEEKS DRINK 4-5 GLASSES OF WATER OR CLEAR FLUID. (WATER, IUICE, BLACK COFFFF OR BLACK TEA) TO BE FINISHED ONE HOUR BEFORE YOUR APPOINTMENT TIME, YOU MUST EAT BREAKFAST/ LUNCH.
- FOR 12-18 WEEKS/ FOR OVER 18 WEEKS DRINK 2 GLASSES (OR 1 SMALL BOTTLE) OF CLEAR FLUID (WATER, JUICE, BLACK COFFEE OR BLACK TEA) TO BE FINISHED ONE HOUR BEFORE YOUR APPOINTMENT TIME. YOU MUST EAT BREAKFAST/ LUNCH.

NUCHAL TRANSLUCENCY - IPS

- DRINK 3 GLASSES OF WATER OR CLEAR FLUID (WATER, JUICE, BLACK COFFEE OR BLACK TEA) TO BE FINISHED ONE HOUR BEFORE YOUR APPOINTMENT
- YOU MUST BRING ALL THE PAPERS FROM YOUR DOCTOR (BLOOD WORK REQUISITION, I.P.S. SCREENING PAPER, ETC.) WITH YOU FOR YOUR APPOINTMENT

PROSTATE-TRANSRECTAL ULTRASOUND

- PURCHASE A **FLEET ENEMA** FROM THE PHARMACY AND FOLLOW THE INSTRUCTIONS IN THE PACKAGE
- SELF ADMINISTER THE ENEMA 2 HOURS BEFORE YOUR APPOINTMENT
- DRINK 4-5 GLASSES OF WATER OR CLEAR FLUID (WATER, JUICE, BLACK COFFEE OR BLACK TEA) TO BE FINISHED ONE HOUR BEFORE YOUR APPOINTMENT TIME.
- DO NOT VOID A FULL BLADDER IS NECESSARY FOR THE EXAMINATION

ALL BARIUM STUDIES

NOTHING TO EAT OR DRINK 12 HOURS PRIOR TO THE TEST

GENERAL INSTRUCTIONS

- Please advise us if you are diabetic
 Come to your appointment with an interpreter, if required
- Young children must be accompanied by an adult Visit our web site - www.ontid.ca - for more information

OHIP REQUIRES THAT YOU BRING YOUR CURRENT HEALTH CARD AND THIS REQUISITION, SIGNED BY YOUR PHYSICIAN



