



**X-RAY, ULTRASOUND, BMD,
MAMMOGRAPHY, CT SCAN**
(For CT, Please use CT Requisition)

Mon to Sat: 8:30 am – 5:00 pm
Sunday, Statutory holidays: Closed

58-1700, King Road
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ULTRASOUND

ABDOMEN PELVIS

- ☐ Complete Abdomen
☐ Female Pelvis (Incl. Transvaginal unless contraind.)
☐ Male pelvis ☐ KUB
☐ TRP (Transrectal Prostate) + Male Pelvis

OBSTETRICS

- ☐ Early Dating Exam
☐ FTS (First Trimester Screening) – (eFTS / NT / IPS)
☐ 18-20 Week Anatomical Assessment Exam
☐ OB-BPP: Biophysical Profile, Fetal Dopplers

SUPERFICIAL STRUCTURES

- ☐ Neck ☐ Thyroid / Parathyroid ☐ Submand. G
☐ Face ☐ Parotids
☐ Scrotum ☐ Inguinal Hernia

MSK

- Shoulder ☐ Rt ☐ Lt Knee ☐ Rt ☐ Lt
Elbow ☐ Rt ☐ Lt Ankle ☐ Rt ☐ Lt
Wrist ☐ Rt ☐ Lt Foot ☐ Rt ☐ Lt
Hip ☐ Rt ☐ Lt Soft Tissue ☐ Rt ☐ Lt

VASCULAR

- ☐ Carotids ☐ Aorta, AAA screening
☐ Vascular Screening (Carotids, Aorta, Iliacs, Legs, ABI/TBI)
☐ Legs Arterial Doppler (Aorta, Iliacs, Legs, ABI/TBI)
☐ Legs Venous Doppler (IVC, Iliacs, Legs)
☐ Arms Arterial Doppler
☐ Arms Venous Doppler

BREAST US

AXILLA ☐ Rt ☐ Lt



☐ MAMMOGRAPHY ☐ 3-D, Dense Breast Exam

BMD

- ☐ Baseline
☐ First follow up (3 years)
☐ Low Risk (5 years)

CARDIOLOGY

- ☐ Echocardiogram ☐ ECG
☐ 72-hr Holter ☐ 14-day Holter

LABEL

Patient Name: _____

Health Card No.: _____

Telephone #: _____

X-RAYS

1. ABDOMEN

- ☐ Single View (KUB) ☐ Acute (Includes PA, Chest)

2. HEAD & NECK

- ☐ Skull ☐ Sinuses (\$ charge) ☐ Orbits
☐ Facial Bones ☐ Nasal Bones ☐ Sella Turcica
☐ Mandible ☐ Adenoids ☐ Mastoids
☐ Soft Tissues Neck ☐ T. M. Joints

3. CHEST

- ☐ Chest (PA & Lateral)
☐ Ribs _____ (Includes PA, Lateral)
☐ SC Joints

4. SKELETAL SURVEY

- ☐ Metastatic Series
☐ Metabolic Series
☐ Arthritic Series

5. SPINE & PELVIS

- Spine:** ☐ Cervical ☐ Thoracic ☐ Lumbo-Sacral
☐ L-S Spine, Pelvis & S.I. Joints
☐ Sacrum & Coccyx ☐ S. I. Joints
☐ AP Pelvis
☐ Pelvis & Hip

6. UPPER LIMBS

- Shoulder ☐ Rt ☐ Lt Clavicle ☐ Rt ☐ Lt
A.C. Joints ☐ Rt ☐ Lt Scapula ☐ Rt ☐ Lt
Humerus ☐ Rt ☐ Lt Elbow ☐ Rt ☐ Lt
Forearm ☐ Rt ☐ Lt Wrist ☐ Rt ☐ Lt
Scaphoid ☐ Rt ☐ Lt Hand ☐ Rt ☐ Lt

Digits ☐ RT 1 2 3 4 5 ☐ LT 1 2 3 4 5

7. LOWER LIMBS

- Hip ☐ Rt ☐ Lt **Femur** ☐ Rt ☐ Lt
Knee ☐ Rt ☐ Lt Knee Standing ☐ Rt ☐ Lt
Tib & Fib ☐ Rt ☐ Lt Ankle ☐ Rt ☐ Lt
Foot ☐ Rt ☐ Lt Heel ☐ Rt ☐ Lt

Toes ☐ RT 1 2 3 4 5 ☐ LT 1 2 3 4 5

8. OTHER VIEWS _____

Clinical Data: _____

Physician Name : _____ Billing / Provider # _____

Physician Signature: _____ Telephone: _____

Clinic Name / Address _____ Fax no. _____

Copies to (Physician Name): _____ Fax no. _____



ULTRASOUND PREPARATIONS:

ABDOMEN ULTRASOUND

- Fat free food & no carbonated drinks the day before
- Nothing to eat or drink 7-8 hours before the exam
- Morning time is best time for appointment.

MALE OR FEMALE PELVIS, AND EARLY PREGNANCY UPTO 12 WEEKS:

- Drink 1 Litre (Two 500 ml bottles) of clear fluids (Water, Juice, Tea or Coffee), 2 hours before exam, to have a Full Bladder at the time of the exam.
- Can eat normal food before exam.
- DO NOT VOID before the exam.

PREGNANCY AFTER 12 WEEKS:

- Can eat and drink normal diet.
- Moderately full bladder is preferred before the exam.

eFTS / IPS (12 WEEK) ULTRASOUND:

- Please bring all the paperwork from your Doctor at the time of the exam:
 - Requisition Form
 - eFTS / IPS Form
 - Blood work paperwork.

ABDOMEN & PELVIS EXAM:

Requires both fasting and a full bladder.

- Fat free Dinner the night before.
- No carbonated drinks the day before.
- Nothing to eat 7-8 hours before the exam.
- Drink 1 Litre (Two 500 ml bottles) of clear fluids (Water, Juice, Tea or Coffee), 2 hours before exam, to have a Full Bladder at the time of the exam.
- DO NOT VOID before the exam.

THYROID / NECK ULTRASOUND:

TESTICLES / SCROTUM, ULTRASOUND:

SHOULDER, KNEE, MSK ULTRASOUND:

HERNIA, ABDOM. WALL HERNIA ULTRASOUND:

- No Prep is required.

PROSTATE/ TRANS-RECTAL ULTRASOUND (TRP):

- Please purchase a Fleet Enema from the pharmacy. Please follow all instructions. Take the fleet enema 3 hours prior to the exam.
- Do not eat after midnight prior to the day of your examination.
- Finish drinking two 500 ml water bottles (1 Liter) 1-2 hour before the exam.
- Do not empty the bladder before the exam.
- Please note laxative (fleet enema) is only needed for prostate with transrectal ultrasound.
- For trans-abdominal prostate ultrasound, only full bladder is required. Fleet Enema is not required.

X-RAY PREPARATIONS:

Before Your Test:

- You don't need to prepare for an X-Ray. X-Rays are walk-in. No appointment is required.
- However, please do not wear any metallic items such as jewelry on the day of your test.
- If you are pregnant or think you might be pregnant, please let your technologist know prior to the X-ray.

BMD EXAM:

- If you are or could be pregnant, tell your provider before this test is done.
- DO NOT take calcium supplements 24 hours before the test.
- You should remove all metal items from your body, such as jewelry and buckles.

MAMMOGRAPHY EXAM:

- Do not use any deodorant, powder, lotion or perfume under your arms or on your breasts• It is best to wear a 2-piece outfit.
- Try to book the exam the week after you have your period as this is usually the time that they are least tender.
- Avoid caffeine for 2-3 days prior to the test.

Main Level premises

Handicap and wheelchair accessible

Free Plaza parking

Easy online booking

Fast & on-time service, no waiting.

- Please note: All faxes are sent automatically by **Auto-fax**. At times, due to factors beyond our control, they are not received by referring doctor offices. Please contact your doctor to make sure they have received the results. In case they have not, please contact the clinic and we will manually fax them over, immediately

