**DEPARTMENT OF MEDICAL IMAGING**

**GENERAL INQUIRIES:** 416-323-6080

ULTRASOUND: 2nd Floor Fax: 416.323.6311 Tel: 416.323.6400 ext.4829

BREAST IMAGING: 5th Floor Fax: 416.323.6316 Tel: 416.323.6400 ext. 3080

GENERAL RADIOLOGY: 2nd Floor Fax: 416.323.6316 Tel: 416.323.6400 ext. 3220

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**ULTRASOUND**

**GENERAL ULTRASOUND**
- Abdomen (gallbladder, pancreas, spleen, liver, kidneys, aorta)
- Abdomen/pelvis complete
- KUB (kidneys, ureters, urinary bladder)
- Hernia only

**FEMALE PELVIS**
- Pelvis
- Transvaginal
- Sonohysterogram

**MALE PELVIS**
- Pelvis (transabdominal, includes bladder, prostate seminal vesicles)

**OBSTETRICAL**
- Dating
- NT
- Anatomic
- NT (11+3-13+3 weeks) + Anatomic (19-20 weeks)
- Biophysical Profile
- Assessment of fetal growth
- Other:

**SMALL PARTS**

- Face
- Thyroid
- Neck
- Chest
- Groin
- Scrotum
- Soft tissue/lump

**VASCULAR**
- Leg Doppler (Venous only) Bil R L
- Arm Doppler (Venous only) Bil R L

**BREAST IMAGING - By appointment only**

**X-RAY**

**ABDOMEN:**
- Cervical Spine
- Thoracic Spine
- Lumbar Spine
- Sacrum
- Coccyx
- SI Joint
- Pelvis
- Pelvis & Hips
- 3 Foot Spine
- Skeletal Survey
- Other:

**HEAD & NECK:**
- Single
- 2 Views
- Neck or Soft Tissues
- Orbits pre MRI
- Other:

**CHEST:**
- Chest PA & LAT
- Chest PA-Immigration
- Ribs R L Bil
- Sterno-Clavicular JTS.
- Sternum
- Other:

**SPINE & PELVIC:**
- Upper Extremities:
  - R L
  - Clavicle
  - A.C. Joints
  - Shoulder
  - Scapula
  - Humerus
  - Elbow
  - Forearm
  - Wrist
  - Scaphoid
  - Hand
  - Digit 1 2 3 4 5

- Lower Extremities:
  - R L
  - Hip
  - Femur
  - Knee
  - Tib, & Fib
  - Ankle
  - Foot
  - Toe 1 2 3 4 5
  - Calcaneus
  - 3 feet or 4 feet leg
  - Other:

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**PHYSICIAN’S SIGNATURE:**

**BILLING NUMBER:**

**PLEASE SEE PREPARATION ON REVERSE SIDE**

**INCOMPLETE REQUISITIONS WILL CAUSE A DELAY IN SERVICE**

Form number F-5035 (2-2021)
ULTRASOUND-PATIENT PREPARATION GUIDELINES

Abdomen
• Morning appointments: fast from midnight
• Afternoon appointments: fast following a light fat free breakfast at 0700 hours (e.g. dry toast and juice).

Combined abdomen and pelvis or abdomen for blood in urine
• Fast (as described above) AND refrain from voiding for 2 hours prior to the examination.

Pelvis (non-pregnant female or male)
• Follow a normal diet and refrain from voiding for 2 hours prior to the examination.
• Females declining Transvaginal (TV) examination may have to drink fluids in order to sufficiently distend their bladders for a trans-abdominal pelvic examination.

Pregnancy (Obstetrical)
• Eat and drink normally. You are not required to drink extra fluids before your ultrasound. Do not empty your bladder for one hour before your exam.

Hysterosonogram: please inform booking person of the first day of your last period
• If no previous WCH/MSH/UHN pelvic imaging refrain from voiding two hours prior to examination.
• If premenopausal (having periods) or postmenopausal on sequential hormone replacement (you have regular period-like bleeding), your exam should be done between day 6 and day 10 of your menstrual cycle.
• If postmenopausal and do not have periods, your test can be done at anytime.
• Take manufacturers recommended dose of ibuprofen (Advil or Motrin) or any other pain medication you normally take for menstrual pain 30 minutes prior to the scheduled examination time.

No special preparations are required for the following examinations:
• Leg and arm Doppler
• Thyroid
• Testicular (scrotal)