WELL Health | DIAGNOSTIC CENTRES

ACCREDITED WITH EXEMPLARY STANDING — ACCREDITATION AGREMENT CANADA

CANADA'S BEST MANAGED COMPANIES

Great Place To Work.

Canada's Top Growing Companies — REPORT ON BUSINESS

CONSUMER CHOICE AWARD — BUSINESS EXCELLENCE

REQUEST FOR EXAMINATION (GREATER TORONTO AREA)

☐ Ajax ☐ Brampton ☐ Lindsay ☐ Markham ☐ Milton ☐ Mississauga ☐ Newmarket ☐ North York
☐ Orangeville ☐ Oshawa ☐ Pickering ☐ Port Perry ☐ Scarborough ☐ Thornhill ☐ Toronto ☐ Whitby

PATIENT INFORMATION (AFFIX LABEL IF AVAILABLE)

Check if Applicable: ☐ URGENT

Full Name (Printed On Health Card): _____

Preferred Full Name (If Different Than Above): _____

Date of Birth: _____ Health Card #: _____ Version: _____

Gender (Birth): _____ Preferred Gender (If Different from Birth): _____

Height (cm): _____ Weight (kg): _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Cell Phone: _____ Alt. Phone: _____

Reason for Referral:

REFERRING HEALTHCARE PROVIDER (STAMP LABEL IF AVAILABLE)

Referring Provider: _____ (Print Name) _____ (Signature)

Billing Provider #: _____ CPSO #: _____

Tel #: _____ Fax #: _____

Date: _____ Copy To: _____

Report Delivery Preference: ☐ Fax ☐ HRM ☐ Other: _____

Access your patient radiology reports at **WELLdiagnostics.ca/Access**

SPECIALIST SERVICES

CONSULTATIONS

☐ First Available:
- ○ Cardiologist ○ Internist
- ○ Respirologist ○ Sleep Medicine

☐ Dr. _____

☐ Consult if Test Result is Positive/ Abnormal

RESPIROLOGY

☐ Full Pulmonary Function Test

☐ Pre & Post Spirometry
- ○ Include Respirology Consult

SLEEP DISORDERS

☐ Sleep Study:
- ○ Include Sleep Medicine Consult

Please Attach: Medications, Previous Tests, Family & Social History

CARDIOLOGY

☐ 12-Lead Electrocardiogram (Rest ECG)

☐ Exercise Stress Test (GXT)

☐ Holter Monitoring:
- ○ 24 hrs ○ 48 hrs ○ 72 hrs
- ○ Other: _____

☐ 24hr BP Monitor (Not OHIP-covered)

☐ Echocardiogram (Colour Doppler):

☐ Contrast Echocardiogram:

☐ Stress Echocardiogram:
- ○ Chest pain suspicious of CAD
- ○ CHF ○ Palpitations/Arrhythmias
- ○ Hypertension ○ Syncope ○ Murmur
- ○ Other: _____

NUCLEAR STRESS TEST (MYOCARDIAL PERFUSION IMAGING)

☐ Exercise ☐ Persantine ☐ Dobutamine

X-RAY (WALK-IN SERVICE)

ABDOMINAL

☐ Single/KUB

☐ Acute (Incl. PA chest)

CHEST

☐ Chest PA & LAT

☐ Ribs: ○R ○L

☐ Sternum

☐ Immigration Chest (Not OHIP-covered)

HEAD & NECK

☐ Soft Tissue Neck

☐ Skull

☐ Sinuses (Not OHIP-covered)

☐ Facial Bones

☐ Nose

☐ Mandible

☐ Orbits

☐ T.M. Joints

☐ Adenoids

LOWER EXTREMITIES

R L

☐ ☐ Hip

☐ ☐ Femur

☐ ☐ Knee

☐ ☐ Tib. & Fib.

☐ ☐ Ankle

☐ ☐ Foot

☐ ☐ Calcaneus

☐ ☐ Toe: 1 2 3 4 5

SPINE & PELVIS

☐ Cervical Spine

☐ Thoracic Spine

☐ Lumbar (L/S) Spine

☐ Sacrum/Coccyx

☐ S.I. Joints

☐ Pelvis

☐ Scoliosis Series

UPPER EXTREMITIES

R L

☐ ☐ Shoulder

☐ ☐ Clavicle

☐ ☐ Sternoclavicular Joints

☐ ☐ A.C. Joint

☐ ☐ Scapula

☐ ☐ Humerus

☐ ☐ Elbow

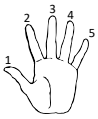
☐ ☐ Forearm

☐ ☐ Wrist

☐ ☐ Scaphoid

☐ ☐ Hand

☐ ☐ Finger: 1 2 3 4 5



OTHER

☐ Skeletal Survey

☐ Bone Age

☐ Indicate: _____

ULTRASOUND

GENERAL ULTRASOUND

☐ Abdomen (Incl. limited bladder + lower quadrants, no reproductive organs)

☐ Abdomen + Pelvis (Incl. reproductive organs)

☐ Female Pelvis (Incl. Transvaginal)

☐ Male Pelvis (Incl. Transrectal)

☐ Male Pelvis (Excl. Transrectal)

☐ Screening Abdominal Aortic Aneurysm

☐ Renal*

☐ Bladder*

☐ Hernia: ○ Inguinal ○ Abdominal

☐ Other: _____

*Baseline abdominal ultrasound may be performed

OBSTETRICAL

EDC (Required): _____

☐ OB Series (Dating, Prenatal Screening, Anatomy)

☐ Dating (< 16 weeks)

☐ Prenatal Screening (IPS/eFTS 11-13 weeks)

☐ Anatomy (18-20 weeks)

☐ Fetal Growth (30+ weeks):
- ○ BPP ○ UA Doppler ○ MCA Doppler

☐ Follicle Monitoring

☐ Twin Series (Site Specific)

US GUIDED PROCEDURES

☐ Biopsy – Thyroid FNA (Mississauga)

☐ Sonohysterogram (Newmarket)

☐ **OTHER:** _____

MUSCULOSKELETAL

R L

☐ ☐ Shoulder

☐ ☐ Elbow

☐ ☐ Wrist

☐ ☐ Hip

☐ ☐ Hamstring

☐ ☐ Knee

☐ ☐ Ankle

☐ ☐ Achilles Tendon

☐ ☐ Plantar Fascia

☐ ☐ Other: _____

SMALL PARTS

☐ Salivary Glands

☐ Thyroid

☐ Chest

☐ Groin: ○ R ○ L

☐ Inguinal Canal: ○ R ○ L

☐ Testes/Scrotum

☐ Soft Tissue/Lump (specify site): _____

VASCULAR

R L

☐ ☐ Venous - Lower Extremity (DVT)

☐ ☐ Venous - Upper Extremity (DVT)

☐ ☐ Venous - Lower Extremity (Reflux)

☐ ☐ Arterial - Lower Extremity (ABI)

☐ ☐ Arterial - Upper Extremity

☐ Carotid ☐ Portal Venous Doppler

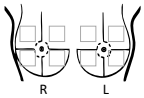
☐ Renal Arteries ☐ Aorta: _____

MAMMOGRAPHY & BREAST IMAGING

☐ Targeted Breast Ultrasound (Indicate Quadrant on Diagram): ○ R ○ L

☐ Mammogram: ○ R ○ L ○ Implants

☐ 3D-Automated Breast Ultrasound (Toronto York – Not OHIP-covered)



BONE MINERAL DENSITY

☐ Baseline

☐ Follow Up: ○ High Risk/Medically Necessary ○ Low/Medium Risk

NUCLEAR MEDICINE

☐ Bone: _____

☐ Gallium: _____

☐ GI Bleed

☐ Gastric Empyting

☐ Hepatobiliary (HIDA)

☐ Lung

☐ Meckel's

☐ Parathyroid

☐ Renal:
- ○ Differential Function
- ○ Lasix
- ○ Captopril

☐ Salivary

☐ Sentinel Node

☐ Thyroid

VENTRICULAR FUNCTION

☐ Rest MUGA

PET/CT

☐ PET/CT (Mississauga – Visit **WELLdiagnostics.ca/Refer** for PET/CT requisition)

Important Information for Patients:

- All our services require a scheduled appointment, except X-ray, which is provided on a walk-in basis at select locations.
- Minimum 24 hours' notice is required for all appointment changes to avoid a cancellation fee.
- To schedule your appointment, call your nearest location below or chat live at **WELLdiagnostics.ca**.
- If possible, e-mail your signed requisition to **appt_req@welldiagnostics.ca** and bring the original signed copy with your Ontario health card to your appointment.
- Ensure you are properly prepared for your appointment by reviewing our instructions at **WELLdiagnostics.ca/test-prep**.
- We will send the report to your referring healthcare provider who will contact you to review your results. We can send it to additional healthcare providers upon your request.

This requisition form can be submitted to any licensed Ontario imaging facility, including hospitals and Integrated Community Health Services Centres.

AJAX	BRAMPTON CENTRE	BRAMPTON CHRYSLER	BRAMPTON (SLEEP)	LINDSAY HOSPITAL
CorCare Specialists in Cardiac Care 95 Bayly Street West, Suite 305 Ajax, ON L1S 7K8 **T: 416-284-4744** **F: 416-284-0141** **SERVICES:** Specialist Consultations, Cardiology	31 Centre Street South Brampton, ON L6W 2X7 **T: 905-455-3010** **F: 1-800-352-2050** **SERVICES:** Specialist Consultations, Cardiology, Pulmonary Function Test, Vascular Ultrasound	470 Chrysler Drive, Unit 28 Brampton, ON L6S 0C1 **T: 905-791-3458** **F: 905-791-3460** **SERVICES:** Nuclear Cardiology	480 Chrysler Drive, Unit 34 Brampton, ON L6S 0C1 **T: 905-790-8800** **F: 905-790-6008** **SERVICES:** Sleep Consultations, Sleep Studies	10 Angeline Street North, 3rd Floor Lindsay, ON K9V 4M8 **T: 705-328-6171** **F: 705-328-6172** **SERVICES:** Bone Mineral Density, Cardiology, Nuclear Cardiology, Nuclear Medicine
LINDSAY KENT	**MARKHAM**	**MILTON (CARDIOLOGY)**	**MILTON (RADIOLOGY)**	**MISSISSAUGA (CARDIOLOGY)**
189 Kent Street West, Suite 215 Lindsay, ON K9V 5G6 **T: 705-320-9998** **F: 705-320-7778** **SERVICES:** Cardiology	6633 Highway 7 East, Suite 005 Markham, ON L3P 7P2 **T: 905-294-4880** **F: 905-472-6629** **SERVICES:** Bone Mineral Density, Ultrasound, Vascular Ultrasound, X-ray	480 Bronte Street South, Suite 218 Milton, ON L9T 9A9 **T: 905-878-8831** **F: 1-800-249-6284** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology	480 Bronte Street South, Suite 212 Milton, ON L9T 9A9 **T: 905-878-8831** **F: 1-800-249-6284** **SERVICES:** Bone Mineral Density, Mammography & OBSP, Ultrasound, Vascular Ultrasound, X-ray	2300 Eglinton Avenue W., Suite G01 Mississauga, ON L5M 2V8 **T: 905-828-0653** **F: 1-800-249-6284** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology
MISSISSAUGA (RADIOLOGY)	**MISSISSAUGA (PET/CT)**	**NEWMARKET (CARDIOLOGY)**	**NEWMARKET (RADIOLOGY)**	**NORTH YORK BATHURST**
2300 Eglinton Avenue W., Suite G02 Mississauga, ON L5M 2V8 **T: 905-828-0653** **F: 1-800-249-6284** **SERVICES:** Biopsy (Thyroid), Bone Mineral Density, Mammography & OBSP, Ultrasound, Vascular Ultrasound, X-ray, Immigration X-ray	2300 Eglinton Avenue W., Suite G02 Mississauga, ON L5M 2V8 **T: 416-572-1725** **F: 1-800-416-9840** **SERVICES:** PET/CT Cancer Screening	17730 Leslie Street, Suite 106 Newmarket, ON L3Y 3E4 **T: 905-952-3112** **F: 289-319-0415** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology, Pulmonary Function Test	17730 Leslie Street, Suite 106 Newmarket, ON L3Y 3E4 **T: 905-836-2626** **F: 905-836-5043** **SERVICES:** Mammography & OBSP, Sonohysterogram, Ultrasound, Vascular Ultrasound, X-ray	4949 Bathurst Street, Suite 100 North York, ON M2R 1Y1 **T: 416-223-5460** **F: 416-223-8335** **SERVICES:** Specialist Consultations, Cardiology, Bone Mineral Density, Mammography & OBSP, Ultrasound, X-ray, Immigration X-ray
NORTH YORK SHEPPARD	**NORTH YORK WYNFORD**	**ORANGEVILLE**	**OSHAWA**	**PICKERING (CARDIOLOGY)**
1333 Sheppard Avenue E., Suite 125 North York, ON M2J 1V1 **T: 416-494-0030** **F: 416-494-8611** **SERVICES:** Cardiology, Nuclear Cardiology	20 Wynford Drive, Suite 312 North York ON, M3C 1J4 **T: 416-443-2626** **F: 416-443-2611** **SERVICES:** Ultrasound, X-ray	229 Broadway, Unit 4 Orangeville, ON L9W 1K4 **T: 519-943-0022** **F: 519-943-0045** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology	300 King Street West, Suite 201 Oshawa, ON L1J 2K1 **T: 905-723-3110** **F: 905-723-9045** **SERVICES:** Bone Mineral Density, Nuclear Cardiology	CorCare Specialists in Cardiac Care 1105 Kingston Road, Building E, Suite 200A Pickering, ON L1V 1B5 **T: 416-284-4744** **F: 416-284-0141** **SERVICES:** Specialist Consultations, Cardiology
PICKERING (RADIOLOGY)	**PORT PERRY**	**SCARBOROUGH MILNER**	**SCARBOROUGH BIRCHMOUNT**	**SCARBOROUGH ELLESMERE**
1105 Kingston Road, Building D, Suite 202 Pickering, ON L1V 1B5 **T: 905-420-3068** **F: 905-420-6057** **SERVICES:** Bone Mineral Density, Mammography & OBSP, Ultrasound, Vascular Ultrasound, X-ray	462 Paxton Street, Suite B07 Port Perry, ON L9L 1M1 **T: 905-985-9727** **F: 905-985-0479** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology, Bone Mineral Density, Mammography & OBSP, Ultrasound, Vascular US, X-ray	CorCare Specialists in Cardiac Care 325 Milner Avenue, Suite 410 Scarborough, ON M1B 5N1 **T: 416-284-4744** **F: 416-284-0141** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology, Nuclear Medicine	462 Birchmount Road, Unit 1B Scarborough, ON M1K 1N8 **T: 416-690-9437** **F: 416-690-9441** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology, Bone Mineral Density, Ultrasound, X-ray	520 Ellesmere Road, Suite B15 Scarborough, ON M1R 4E6 **T: 416-759-3462** **F: 416-759-9237** **SERVICES:** Bone Mineral Density, Mammography & OBSP, Ultrasound, X-ray
SCARBOROUGH LAWRENCE	**SCARBOROUGH MARKHAM RD.**	**THORNHILL**	**TORONTO BAY**	**TORONTO DANFORTH**
3000 Lawrence Ave. E., Suite C-02 Scarborough, ON M1P 2V2 **T: 416-438-6636** **F: 416-438-6008** **SERVICES:** Cardiology, Vascular Ultrasound, Mammography & OBSP, Ultrasound, X-ray	1200 Markham Road, Suite 112 Scarborough, ON M1H 3C3 **T: 416-439-4866** **F: 416-439-5776** **SERVICES:** Bone Mineral Density, Ultrasound, X-ray	7241 Bathurst Street, Unit 12 Thornhill, ON L4J 3W1 **T: 905-889-2400** **F: 905-889-2455** **SERVICES:** Bone Mineral Density, Ultrasound, X-ray, Immigration X-ray	790 Bay Street, Suite 716 Toronto, ON M5G 1N8 **T: 416-260-9382** **F: 416-260-2274** **SERVICES:** Ultrasound, X-ray, Immigration X-ray	2494 Danforth Avenue, Suite 3A Toronto, ON M4C 1K9 **T: 416-691-5071** **F: 416-691-3349** **SERVICES:** Mammography & OBSP, Ultrasound, X-ray
TORONTO DAVISVILLE	**TORONTO KING**	**TORONTO YORK**	**WHITBY**	
1849 Yonge Street, Suite 207 & 218 Toronto, ON M4S 1Y2 **T: 416-928-3467** **F: 416-928-3502** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology	11 King Street West, Suite C-100 Toronto, ON M5H 4C7 **T: 416-864-1814** **F: 416-864-1499** **SERVICES:** Specialist Consultations, Cardiology, Nuclear Cardiology, Ultrasound, Vascular Ultrasound, X-ray	Toronto Centre for Medical Imaging 150 York Street, Suite 910 Toronto, ON M5H 3S5 **T: 416-368-8488** **F: 416-368-5217** **SERVICES:** Bone Mineral Density, Mammography & OBSP, Ultrasound, 3D-Automated Breast US, X-ray	1615 Dundas Street East, Main Floor Whitby, ON L1N 2L1 **T: 905-430-3277** **F: 905-240-7700** **SERVICES:** Nuclear Cardiology	

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