Nuclear Medicine Requisition

PRHC Peterborough Regional Health Centre

Diagnostic Imaging, 3rd Floor
D.I. Tel: 705-876-5039
D.I. Fax: 705-743-1713

1 Hospital Drive
Peterborough, ON
K9J 7C6

Patient Data *(print clearly or place imprint)*	***Physician Data*** *(print clearly or place imprint)*
Last Name _____	Name _____
First Name _____	Phone _____
Address _____	Billing No. _____
City _____ Postal Code _____	Copies to _____
Phone _____ DOB _____	
Health Card No._____	

	DIAGNOSTIC TEST REQUESTED *(please check)*	***TEST DURATION***
BONE	☐ Whole Body ☐ Specific Site (Flow, SPECT & SPECT/CT if needed)	3.5 hours (2 appointments same day)
TUMOUR / INFECTION	☐ Gallium Whole Body ☐ Gallium Specific Site (osteomyelitis)	Day 1: 15 min / Day 3: 1.0 hr / Day 4: 1.5 hrs
ENDOCRINE	☐ Thyroid Uptake and Scan	Day 1: 15 min / Day 2: 1 hour
	☐ Parathyroid	3.5 hours (2 appointments same day)
	☐ ^{131}Iodine Therapy (Dose: _____)	15 mins
RENAL	☐ Renogram (GFR / Differential Function)	45 minutes
	☐ Lasix Renogram (Diuretic)	1.0 hour
	☐ Captopril Renogram (Hypertension)	1.5 hours
	☐ Renal Cortical Imaging (DMSA)	3.5 hours (2 appointments same day)
	☐ Voiding Cystogram	45 minutes
G.I. STUDIES	☐ Gastric Emptying	1 to 2 hours
	☐ Gastric Reflux and Aspiration (Paediatric Milk Study)	1 to 4 hours
	☐ G.I. Bleed	1.0 hour
	☐ Hepatobiliary (HIDA)	1 to 3 hours
	☐ Liver/Spleen – R.B.C. (Haemangioma)	2 hours
	☐ Liver/Spleen – Sulphur Colloid (SC)	1.0 hour
	☐ Meckel's Diverticulum	1.0 hour
	☐ Salivary-Parotid Scan	1.0 hour
PULMONARY	☐ Ventilation/Perfusion (Lung V/Q) ☐ Quantitative (Lung V/Q)	1.0 hour
CARDIAC	☐ MUGA (Myocardial Wall Motion with Ejection Fraction)	1.0 hour
OTHER *(please specify)*	☐	

CLINICAL INFORMATION:

Physician's Signature _____ Date _____

LOCATION: Nuclear Medicine Dept, 3rd Floor
W3 Diagnostic Imaging

TIME: _____

DATE: _____

BOOKING NOTES:

TECHNOLOGIST COMMENTS:

PLEASE BRING THIS REQUISITION WITH YOU

If you are pregnant or think you might be pregnant, please inform the Nuclear Medicine Technologist.

If you are not able to attend this appointment please **call 705-876-5039 to cancel**.