

MRI | REQUISITION Appointment Required

BOOKING PROTOCOL

- Physician office to fax to EFW Radiology
- $\cdot \textit{EFW Radiology to confirm appointment with patient} \\$

MRI Booking **(403) 244-3700** MRI Fax **(403) 210-8391**

Online Booking Request EFW.ca 3T and Wide Bore Options Available

Patient Information	Place patient label here				
Name		Phone (Home)			
DOB DD/MM/YY	Male Female	Phone (Work)	Cell		
Address		AHC#			
		WCB#			
City/Province Postal Code		Height Height	Weight		
CLINICAL HISTORY / QL	JESTION TO BE ANSWERED				
Date of Issue DD/MM/YY					
MRI		MRI PATIENT SAFETY INFORMATION			
			Yes	No	
		r deermaker arrayer ear and earnismater.			
☐ Soft Tissue Neck		Ear or eye implant?			
□ TMJ		Intracranial aneurysm clip?			
☐ Cervical Spine		Heart surgery?			
☐ Thoracic Spine		Penetrating metal eye injury?			
Lumbar Spine		Was it removed by a physician?			
☐ SI Joints		Renal function normal?		☐ Creatinine	
☐ Breast		Claustrophobic?			
Abdomen		If yes, physician ordered sedation advised			
□ Pelvis		Any chance of pregnancy?			
Prostate		Breastfeeding?			
☐ Joint (Specify Location)		Last menstrual period?			
□R □L □Arthrogram		Please provide surgical report, make model and serial # for all implanted			
Other		devices or stents.	. devices or stents.		
PREVIOUS RELEVANT E	YAMS	REFERRING PHYSICIAN			
		REFERRINGFITTSISIAN			
	Vhen Where				
MRI 🗆					
CT					
X-ray					
US		Call/Fax emergency report to:			
Nuclear Medicine		·			
Other		Physician Address:			

← Radiology

PATIENT INSTRUCTIONS

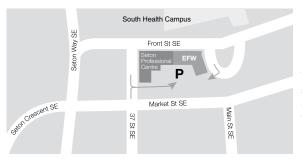
- Please arrive 30 minutes in advance of your appointment time unless otherwise indicated by MRI booking clerk.
- Confirming your identification is essential to ensure accurate medical records and for your protection and security.
- You will be asked at EACH VISIT to provide a VALID HEALTH CARE CARD and PICTURE ID.
- If you do not have your Health Care card you may be asked to return for your examination.
- Please bring your requisition with you, if it is not already on file with EFW Radiology.
- 24 hour notice required for appointment cancellations.
- Patients suspecting pregnancy should consult their physician before exam date.
- If you are having an Abdominal or Pelvic MRI, you MAY NOT eat or drink for 6 hours before your appointment. You may however take all prescribed medications with minimal amounts of water.
- If you are breastfeeding and require an injection of contrast with your MRI exam, you
 must inform the MRI Technologist prior to your appointment.
- Please arrange for child care as your children cannot accompany you into the MRI room.



EFW Radiology Cambrian

#100, 2000 Veterans Place NW Calgary, AB T3B 4N2

Located on the 1st floor of the Cambrian Wellness Centre. Complimentary underground parking is available. Please register your vehicle plate with reception on the day of your appointment.



EFW Radiology Seton

#116, 3883 Front Street SE Calgary, AB T3M 2J6

Complimentary underground and above ground parking available in designated EFW Radiology stalls. Please register your vehicle plate with reception on the day of your appointment. Parking in non-designated EFW stalls will not be reimbursed.

Official diagnostic imaging provider for:









EFW is a proud partner of:















STRA STRAFF

MRI Booking (403) 244-3700 MRI Fax (403) 210-8391 EFW.ca

SEPARATE REQUISITIONS FOR:

General Diagnostic, Pediatric Ultrasound, or Pain Management & Spine Interventional

Available as PDF downloads are available:

Online: EFW.ca Call: (403) 717-1816

The personal health information that you provide to EFW is collected, used and disclosed in accordance with the provisions of the Health Information Act (HIA), and is used to provide diagnostic, treatment and care services to you, and to bill Alberta Health Care for services provided. For more information, please contact the EFW Privacy Officer at (587) 470-6449.