Waterloo Wellington Hospitals Nuclear Medicine Requisition

OFFICE USE ONLY		
Exam Date:		
Arrival Time:		
Exam Time:		

Fax completed requisition to ONE Hospital:

Guelph General Hospital: (GCH) 519-766-9882 St. Mary's General Hospital: (SMCH) 519-749-6997 Stream that all Nuclear Medicine tests require a booked appointment waterion Regional Nuclear Medicine (Satellite Site); 519-749-6997 Stream that minimal stream the stream that all the stream that the stream tha			er Waterloo Regional Nuclear Medicine (Main Site)
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Please indicate location of Nuclear Medicine examination for Patient:

Cambridge Memorial Hospital 700 Coronation Blvd. Cambridge ON N1R 3G2	Telephone: 519-621-2333 x2245 Fax: 519-740-4904 www.cmh.org	 All patients are to register in the Diagnostic Imaging Department, located on the 1st Floor of the hospital's A Wing, at the indicated arrival time.
Guelph General Hospital 115 Delhi St. Guelph ON N1E 4J4	Telephone: 519-837-6413 Fax: 519-766-9982 www.gghorg.ca	 All patients are to register in the hospital's Diagnostic Imaging Department, located on the 3rd Floor, at the indicated arrival time.
Kitchener Waterloo Regional Nuclear Medicine (Main Site) St. Mary's General Hospital 911 Queen's Blvd Kitchener ON N2M 1B2	Telephone: 519-749-6495 Fax: 519-749-6997 www.smgh.ca	 All patients are to register in the hospital's Diagnostic Imaging Department, located on the 1st Floor, at the indicated arrival time.
Kitchener Waterloo Regional Nuclear Medicine (Satellite Site) Grand River Hospital 835 King St. W	Telephone: 519-749-6495 Fax: 519-749-6997 www.grhosp.on.ca	 All patients are to register in the Department of Medical Imaging, located on the 2nd Floor of the hospital's D Wing, at the indicated arrival time.

How to prepare for your Nuclear Medicine Examination

Kitchener ON N2G 1G3

Type of Study	Patient Preparation	Expected Time	Visit Detail
BONE	No preparation	1 st Visit: 15 Minutes 2 nd visit: 1 hour	1 st visit: Injection 2 nd visit 2-4 hours later Imaging
BRAIN	Nothing to eat or drink 4 hours before test	2-4 hours	Injection upon arrival followed by Imaging
GALLIUM	No preparation	1 st Visit: 15 Minutes 2 nd visit: 1-2 hours	1 st visit: Injection 2 nd visit: Imaging
GASTRIC EMPTYING (GET)	Nothing to eat or drink after midnight Notify department if you have an allergy to eggs, food restrictions or are Type I diabetic Diabetic patients, bring insulin and glucose monitor Check with your doctor about stopping medications	4 hours	Provided a standardized meal and Imaging up to 4 hours.
LIVER & SPLEEN SCAN	No preparation	45 minutes	Injection upon arrival followed by Imaging
LUNG SCAN (V/Q)	Need recent CXR 24-48 hours prior to lung scan (GGH only)	1 hour	Imaging immediately
MYOCARDIAL PERFUSION	Please refer to separate listing of instructions provided by your physician	1 st Visit: up to 2 hours 2 nd visit: up to 3 hours	Please refer to separate listing of instructions provided by your physician
PARATHYROID	No preparation	Up to 4 hours	Injection upon arrival 1st imaging at 15 minutes 2nd imaging at 3-4 hours
RENAL DIURETIC	Drink 3-4 glasses of fluids/water prior to test	1 hour	Injection upon arrival followed by Imaging
RENAL with CAPTOPRIL	 Check with your doctor about stopping medications Drink 3-4 glasses of fluids/water prior to test No food 4 hours prior to test Bring a list of medications 	1st Visit: 2 hours 2nd visit: 45 minutes may be required based on results of 1st visit	1st Visit: Oral Captopril given upon arrival Injection at 1 hour followed by Imaging 2nd Visit: Injection upon arrival followed by Imaging
SALIVARY	No preparation	1 hour	Injection upon arrival followed by Imaging
SENTINEL NODE	No preparation	2 hours	Injection upon arrival followed by Imaging
THYROID UPTAKE AND SCAN	Check with your doctor about stopping medications No CT contrast for 30 days prior to test	1 st Visit: 15 minutes 2 nd visit: 45 minutes	1 st Visit: Pill ingestion 2 nd visit: Injection upon arrival followed by Imaging
WALL MOTION (MUGA)	No preparation	1.5 hours	Injection upon arrival followed by Imaging

Important

- Please bring your **Ontario Health Card** and this form to your appointment
- Patients must be able to consent to the procedure. If language is a barrier, please bring an interpreter.
- If you are unable to keep your appointment, please give us 48 hours' notice
- We kindly ask that you do not wear or apply fragrances in support of our Fragrance Free policies.