



**Saskatchewan Health Authority**

Saskatoon Cancer Centre - TST: 306-655-2662/Fax: 306-655-2910

MOCK, Colleen  
 HSN: 123456788 SCA: T123456  
 DOB: 01-JAN-1970 AGE: 50 Years  
 Gender: Female  
 123 Happy Lane  
 Regina, SK S4S4S4  
 Phone#: 306-303-0303 Cell#: 306-404-0404

## Medical Imaging Requisition

City and Location of Booking: \_\_\_\_\_

<b>Test / Procedure Requested:</b> CT Scan (With Contrast,Head)	<b>Priority:</b> Urgent
	<b>Height:</b> 160 cms <b>Weight:</b> 60 kg
	<b>Isolation Precautions:</b> No

Diabetic: Yes Port: \_\_\_\_\_  
 Known previous contrast reaction?  Yes  
 Allergies: No Known Allergies

Isolation Precautions:  
No

For Stat/Urgent tests and procedures, list any anticoagulant medications that have been held:

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

**Creatinine:**  
**Diagnosis / Clinical Indication:**  
History of breast cancer, rule out mets.

Known Pertinent Imaging not available on PACS  Yes Where \_\_\_\_\_

Electronically Signed by: TEST, Dr. MD  Date: 18-DEC-2020  
 Send Report to Oncologist: TEST, Dr. MD

**DEPARTMENT USE ONLY**

The following lab results may be found in the eHealth Viewer: (within acceptable ranges)

CBC/Platelets	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Value _____
INR	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Value _____
PTT	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Value _____
Creatinine	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Value _____

Date Received: \_\_\_\_\_ Clerk: \_\_\_\_\_  
 Appointment Date: \_\_\_\_\_ Appointment Time: \_\_\_\_\_