Vancouver Coastal Health

MEDICAL IMAGING REQUISITION

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Vancouver, BC V4H 4B4					
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Date of Birth: 29-Jun-1990		Escort Required	[] Nurse	Porter	[] Volunt
Previous Images? Location:		Mode of transport	☐ Wheelchair		
territorio de la company d		Other CO2	Solation	Portable	entra productiva produ
EXAM(s) REQUESTED: URGENT REQUEST: CT ABDOMEN	WITH CONTRAST	*Recent CT CHEST	at VGH/URC r	anartad	Priority ☐ Routine
findings/lesions of liver suspicious for		Mecenico I Onico	at vGi//ODC ii	aported	∭ Hourne
Physician should consult with Radiologist for U					Stat
Able to give consent? [] Yes [] No If th	te patient does not spe	eak English, an interpre	eter <u>MUST</u> acco	mpany the pa	itlent
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Donath Care Com (C) Var (MA)		ASTATIC DISEASE Pt nder on exam Please cl			
Pregnant 🖺 Yes 🗶 No pelvis	• .	Mac all challer loads of	ICI GOIOILE IIVEI	and do comp	isto apuor
LMPIntest	tinal infection, Campyle	obacter, GERD; DM; ac	ortic sclerosis - E	CHO(2020)	due in
G 2022;	; Asthma - confirmed o	n methacholine challer	nge Feb 2019; C	hronic kidney	disease,
	ecified, Diabetes Mellit aine with aura, OA, Pas	us; Gastritis And Duod	enitis, Other Gas	stritis; Hyperli	pidemia;
GFR 40	ame with aura, UA, Pat	SCHISTORY NOTE			
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Physic	tan's signature Gilmunda	Tel: 604-707-	ງງາຊ ຄ _{ານເ}	ician's MSP billin	
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