



SCAN TO BOOK

DIAGNOSTIC IMAGING REQUISITION

X-RAY / ULTRASOUND

604-985-WCMI (9264)

ULTRASOUND EXAMS

BOOK YOUR ULTRASOUND APPOINTMENT ONLINE

FAST, EASY AND AVAILABLE 24/7

SCAN TO BOOK OR VISIT **BOOK.WCMI.CA**

X-RAY EXAMS

X-RAY EXAMS ARE AVAILABLE ON A WALK-IN BASIS

NO APPOINTMENT IS REQUIRED

FIND A CLINIC AT **LOCATIONS.WCMI.CA**

PATIENT INFORMATION

Last Name **First Name**

Date of Birth (MM / DD / YYYY) **Sex** (M/F/X)

Health Card Number

Address

City **Postal Code**

Mobile Phone **Home Phone**

INSURANCE

☐ **MSP**

☐ **PATIENT**

☐ **WSBC**

☐ **ICBC**

☐ **MEDAVIE
BLUE CROSS**

☐ **OTHER:**

PHYSICIAN INFORMATION

Name of Referring Physician

Requisition Date (MM / DD / YYYY)

Referring Physician Signature **MSP #**

Clinic Address:

FAX NUMBER:

COPY REPORT TO:

EXAM REQUESTED

☐ **X-RAY**

CLINICAL HISTORY:

☐ **ULTRASOUND**

ADDITIONAL INFORMATION

☐ **URGENT**

☐ **PATIENT IS DIABETIC**

☐ **PATIENT HAS KNOWN/SUSPECTED
COMMUNICABLE DISEASE**

☐ **OTHER:** _____

APPOINTMENT INFORMATION

- ✓ ARRIVE 15 MINUTES PRIOR TO YOUR APPOINTMENT
- ✓ BRING THIS FORM + YOUR HEALTH CARD
- ✓ DEPENDING ON PATIENT VOLUMES, WE MAY STOP ACCEPTING NEW X-RAY WALK-IN PATIENTS EARLIER THAN THE POSTED CLOSING TIME
- ✗ CHILDREN ARE NOT PERMITTED IN THE EXAM ROOM
- ✗ CHILDREN CANNOT BE LEFT UNATTENDED IN WAITING AREA
- ✗ TECHNOLOGIST CANNOT LIFT/HOLD OR TRANSFER PATIENTS