



Scarborough Location

385 Silver Star Blvd – Suite 212
Scarborough, ON M1V 0E3
Tel: (416) 321-9243 Fax: (416) 321-1650

North York Location (*NEW*)

1056 Wilson Ave – Unit 105 (2nd floor)
North York, ON M3K 1G6
Tel: (416) 633-6619 Fax: (416) 633-8955

Scan to book Online!



X-RAY

No Appointment necessary

Abdomen

- ☐ Plain Film (KUB)
☐ Acute (3 views)

Head & Neck

- ☐ Skull
☐ Adenoids
☐ Soft Tissue of Neck
☐ Mastoids
☐ Facial Bones
☐ Nasal Bones

Orbits

- ☐ Mandible
☐ T.M. Joints

Chest

- ☐ Chest
☐ Ribs & Chest P.A.
☐ R ☐ L
☐ Sternum
☐ Sterno-clavicular Joints
☐ Thoracic Inlet

Skeletal Survey

- ☐ Metastatic Series
☐ Arthritic Series

Pediatric

- ☐ Bone Age

Spine & Pelvis

- ☐ Cervical Spine
☐ Dorsal Spine
☐ Scoliosis Series
☐ Lumbo-sacral Spine
☐ L/S Spine, Pelvis & S.I. Joints
☐ Sacrum & Coccyx
☐ S.I. Joints
☐ Pelvis & Hips

Upper Extremities

- R L
☐ ☐ Shoulder
☐ ☐ Clavicle
☐ ☐ A.C. Joint
☐ ☐ Scapula
☐ ☐ Humerus
☐ ☐ Elbow
☐ ☐ Forearm
☐ ☐ Wrist
☐ ☐ Scaphoid
☐ ☐ Hand
☐ ☐ Fingers
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5



Lower Extremities

- R L
☐ ☐ Hip
☐ ☐ Femur
☐ ☐ Knee
☐ ☐ Tib & Fib
☐ ☐ Ankle
☐ ☐ Ankle incl. Stress Views
☐ ☐ Foot
☐ ☐ Os Calcis
☐ ☐ Toes
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5



9. BREAST IMAGING

- ☐ Ultrasound
R L Bil. Bil. Axilla
☐ ☐ ☐ ☐
☐ Mammography
(By Appointment at North York)
R L Bil. Bil. Axilla
☐ ☐ ☐ ☐
☐ OBSP
☐ Implants
Right Left



ULTRASOUND

We accept walk-in patients

- ☐ 1A. Abdomen (+Ltd. Pelvis if required)
☐ (AAA Screening)
☐ 1B. Liver Elastography (Non-OHIP)
☐ 1C. Liver Steatosis (ATI) (Non-OHIP)
☐ 2. Urinary Tract
(Kidneys, Bladder/Pelvis)
☐ 3. Female Pelvis ☐ Transvaginal
☐ 4. Prostate and Urinary Bladder
☐ Transrectal
☐ 5. Obstetrical
☐ Early Dating
☐ NT Scan
☐ Routine 2nd Trimester
☐ Limited OB ☐ BPP
☐ 6. Musculoskeletal
R L Bilateral
☐ ☐ ☐ Shoulder
☐ ☐ ☐ Elbow
☐ ☐ ☐ Wrist
☐ ☐ ☐ Hip
☐ ☐ ☐ Knee
☐ ☐ ☐ Ankle/Heel
☐ ☐ ☐ Soft Tissue
☐ 7. Small Parts
☐ Thyroid
☐ Neck
☐ Testes/Scrotum
☐ Hernia
☐ 8. Others _____

BONE MINERAL DENSITY

(By appointment at North York)

Ministry of Health restricts to:

- ☐ Baseline
☐ Low Risk (5 Years)
☐ High Risk (1 Year)

Date of Last Exam: _____

X-Ray Pregnancy Release: I declare, to the best of my knowledge, that I am **NOT** presently pregnant. _____

☐ Lead Shielding _____

Signature of Patient

Clinical History:

Patient Info:

Last Name: _____
First Name: _____
Birthdate (DD/MM/YYYY): _____
Health Card No: _____ Version: _____

Referred By:

Physician Name: _____ Billing #: _____
Signature: _____ Date: _____
☐ STAT ☐ VERBAL CC: _____

Address: _____

Telephone: _____

Appointment:

Date: _____ Time: _____

Please bring this requisition form and your valid Health Card. Reports will be sent to referring physicians within 2-3 days. Urgent cases will be forwarded as soon as possible.

This requisition form can be taken to any licensed facility providing health care services including hospitals accepting community referrals and community surgical and diagnostic centres, such as those listed on the website: Community surgical and diagnostic centres | ontario.ca

LOCATION DETAILS & PATIENT INSTRUCTIONS ON THE BACK



SCARBOROUGH LOCATION			
ADDRESS: Maxum Professional Centre 385 Silver Star Blvd, Suite 212 Scarborough, ON M1V 0E3 Tel:(416) 321-9243 Fax:(416) 321-1650 silverstar@radiantmi.com	CLINIC HOURS: Mon - Fri: 8 a.m. - 6 p.m.* Sat: 9 a.m. - 2 p.m.* Sun: Open select Sundays for Ultrasound Only Public Holiday Closed <i>*X-Ray available after 10 a.m.</i>	SERVICES: X-Ray General Ultrasound MSK Ultrasound Obstetric Ultrasound	
NORTH YORK LOCATION			
ADDRESS: Downsview Shopping Center 1056 Wilson Ave, Unit 105 (2nd floor) North York, ON M3K 1G6 Tel:(416) 633-6619 Fax:(416) 633-8955 downsview@radiantmi.com	CLINIC HOURS: Mon - Thu: 8 a.m. - 5 p.m. Fri - Sat: 8 a.m. - 2 p.m. Sun: Closed Public Holiday Closed	SERVICES: X-Ray General Ultrasound MSK Ultrasound Obstetric Ultrasound Mammography BMD	
PATIENT PREPARATIONS			
超音波檢驗前之準備		ULTRASOUND PREPARATIONS	
腹部: (早上預約檢查) 半夜 12 點後不可進食. 唯可飲用清水, 齋啡或清茶. (下午預約檢查) 可進食輕量早餐. 檢查前 4 小時不可進食, 唯可飲用清水, 齋啡或清茶. 前列腺/ 婦科檢查/腎臟: 請於檢查前 1 小時飲用 4 杯清水, 飲後勿小便. 婦產科檢查: (懷孕未滿 16 週) 請於檢查前 1 小時飲用 2 杯清水, 飲後勿小便. (懷孕已滿 16 週) 不需作任何準備. 經直腸超聲波: 1. 到藥房購買 1 支灌腸劑(Fleet Enema). 檢查前 1 晚使用. 2. 檢查前 1 小時 飲水 4 杯, 飲後勿小便		Abdomen: (AM appointment): Nothing to eat or drink after midnight, except for water, black tea or coffee. (PM appointment): Light breakfast only. Do not eat 4 hrs prior to exam, except for water, black tea or coffee. Male/Female Pelvis/Renals: - Drink 4 cups of water 1 hr prior to exam. Do not empty bladder. Obstetrical: < 16wks: Drink 2 cups of water 1 hr prior to exam. - Do not empty bladder. ≥ 16wks: No preparation. Transrectal: - Purchase Fleet Enema at the pharmacy and take it the night before your appointment. Drink 4 cups of water 1 hr prior to exam. Do not empty bladder.	
乳房 X 光檢查前之準備		MAMMOGRAPHY PREPARATIONS	
- 檢查當日請勿使用除臭劑、止汗劑或爽身粉 - 為減少檢查時加壓帶來的不適感, 請儘量在檢查前避免攝取咖啡因 - 如正處於經期前乳房脹痛期, 可待不適緩解後再預約檢查 - 請穿著兩件式服裝以便檢查		- Do not use deodorant, antiperspirant or talcum powder before the examination. - Stay on a caffeine-free diet to minimize discomfort of compression required for optimal examination. - If you are experiencing premenstrual breast tenderness, you may delay booking until tenderness has subsided. - Wear a two-piece outfit.	
骨密度檢查 (BMD) 準備事項		BMD PREPARATIONS	
- 檢查當天請勿服用任何鈣補充劑或與骨骼相關的藥物 - 請攜帶一份您目前正在服用的藥物清單前來檢查		- Please do not take any calcium supplements or any bone-related medication on the day of your examination. - Bring a list of the medications you are currently taking to your appointment.	

- All examinations except x-rays generally require an appointment. We will accommodate walk-ins whenever possible.
- Please arrive 15 minutes prior to your appointment time in order to register and prepare for your examination
- Please call to cancel if you are unable to keep an appointment.