Central Alberta Medical Imaging Services

P: 403-343-7459 | F: 403-309-0093 |
www.camiscare.ca connect@camiscare.ca

MSK IMAGING & INTERVENTION REQUEST FORM

Appt Date/Time _____

PLEASE FAX A COPY OF THE REQUEST TO CENTRAL ALBERTA MEDICAL IMAGING SERVICES LTD. 403-309-0093

Patient Information

Name _____ M ☐ F ☐ Other ☐

Address _____ DOB (D/M/Y) _____

City _____ A.H.C.# _____

Province _____ Postal Code _____ WCB Claim # _____

Phone Home _____ Alt _____ Date of Injury (D/M/Y) _____

Clinical Information (Required) _____

_____

_____

_____

Diagnostic Imaging

MSK Ultrasound (to assess tendons, ligaments and muscles)

Shoulder	☐R	☐L	Quadriceps	☐R	☐L
Elbow	☐R	☐L	Greater Trochanter Bursa	☐R	☐L
Wrist	☐R	☐L	Iliopsoas Bursa	☐R	☐L
Hand	☐R	☐L	Ankle	☐R	☐L
Achilles Tendon	☐R	☐L	Morton's Neuroma	☐R	☐L
Plantar Fascia	☐R	☐L	Knee	☐R	☐L

Other _____

Soft Tissue Ultrasound (to asses soft tissue mass)

☐ Lipoma Area _____

☐ Ganglion Area _____

☐ Ganglion Aspiration and Injection

Other: _____

If pathology is found in the area of interest you may expedite the patient's treatment. By checking the box below the patient will be booked for a therapeutic injection if appropriate.

☐ Please proceed with appropriate therapeutic injection

Interventional Procedures *some interventional procedures require prior imaging. This will be arranged by our office*

Prolotherapy (series of 3 treatments)

Achilles Tendon	☐R	☐L
Lateral Elbow	☐R	☐L
Medial Elbow	☐R	☐L
Patellar Tendon	☐R	☐L

Special Procedures

Calcific Tendinopathy Barbatoge

_____ ☐R ☐L

Ganglion Aspiration and Injection

Area _____ ☐R ☐L

PRP (Uninsured Services)

☐ Patient is interested in PRP

Knee Joint	☐R	☐L
Lateral Elbow	☐R	☐L
Medial Elbow	☐R	☐L

☐ Repeat

Steroid Injections

Shoulder Joint	☐R	☐L
Shoulder Bursa	☐R	☐L
AC Joint	☐R	☐L
Biceps Tendon Sheath	☐R	☐L
Elbow Joint	☐R	☐L
Wrist Joint	☐R	☐L
Carpal Tunnel	☐R	☐L
CMC Joint	☐R	☐L
Hand	☐R	☐L

Digit _____

MCP ☐ DIP ☐ PIP ☐

Trigger Finger	☐R	☐L
DeQuervain's	☐R	☐L
Foot	☐R	☐L

Digit _____

MTP ☐ DIP ☐ PIP ☐

Plantar Fascia	☐R	☐L
Ankle Joint	☐R	☐L
Talonavicular Joint	☐R	☐L
Subtalar Joint	☐R	☐L
Morton's Neuroma	☐R	☐L
Posterior Tibialis	☐R	☐L
Peroneal Tendons	☐R	☐L
Knee Joint	☐R	☐L
Pes Anserine Bursa	☐R	☐L
Hip Joint	☐R	☐L
Greater Trochanter Bursa	☐R	☐L
Ischial Tuberosity	☐R	☐L
Psoas Muscle	☐R	☐L
Iliopsoas Bursa	☐R	☐L

Other: _____

Referring Physician

Stat Report ☐

Name _____ PRAC ID _____

Address _____ Signature _____

_____ **CC** _____

Phone _____ Fax _____ _____ Fax _____

Central Alberta
Medical Imaging Services

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For General Inquiries: connect@camiscare.ca |

CAMIS Red Deer - Main

Address: 4312 54 Ave, Red Deer
Phone: 403-343-6172 | **Fax:** 403-309-0092

Ultrasound: Diagnostic, Prenatal, MSK
Breast Ultrasound
Echocardiography
Ultrasound-Guided Biopsy
Pain Management
Nuclear Medicine
ABI

Walk In X-Ray
CT Scans (Private)
Bone Mineral Densitometry (BMD)
Body Mass Composition Scan (BMC)
Screening Mammography
Diagnostic Mammography

CAMIS Red Deer North Gaetz

Address: Unit 130 - 7101 50 Ave, Red Deer
Phone: 403-755-8061 | **Fax:** 403-309-0092

Ultrasound:
- Diagnostic, Prenatal

CAMIS Red Deer Notre Dame Plaza

Address: Bay 1117 - 2827 30 Ave, Red Deer
Phone: 403-967-0672 | **Fax:** 403-754-4389

Ultrasound:
- Diagnostic, Prenatal, MSK

MRI / Private MRI

Walk In X-Ray
Pain Management

CAMIS Red Deer Gasoline Alley

Address: Unit 102 - 408 Lantern Street, Red Deer
Phone: 403-755-8068 | **Fax:** 403-309-0092

Ultrasound:
- Diagnostic, Prenatal

CAMIS Sylvan Lake

Address: 115 - 33 Beju Ind. Drive, Sylvan Lake
Phone: 403-864-0130 | **Fax:** 403-864-0131

Ultrasound:
- Diagnostic, Prenatal, MSK

CAMIS Olds

Address: 240-6700 46 Steet, Olds
Phone: 403-556-3554 | **Fax:** 403-556-8933

Ultrasound:
- Diagnostic, Prenatal

Echocardiography
Screening Mammography

CAMIS Stettler

Address: 4710 50 St, Stettler
Phone: 403-742-2240 | **Fax:** 403-742-1188

Ultrasound:
- Diagnostic, Prenatal

Echocardiography

CAMIS Innisfail

Address: Unit 100 - 4824-46 Ave, Innisfail
Phone: 825-639-2070 | **Fax:** 587-823-2934

Ultrasound:
- Diagnostic, Prenatal

CAMIS Lacombe

Address: 121, 5250 45 Street, Lacombe
Phone: 825-640-3050 | **Fax:** 403-789-1141

Ultrasound:
- Diagnostic, Prenatal

Echocardiography
Pain Management

CAMIS Rocky Mountain House

Address: Unit 2 - 5020 44 Street, Rocky Mtn House
Phone: 587-798-1484 | **Fax:** 403-864-0131

Ultrasound:
- Diagnostic, Prenatal

Echocardiography

CAMIS Drayton Valley

Address: Unit 3 - 5004 50 Ave, Drayton Valley
Phone: 587-673-1727 | **Fax:** 825-317-2501

Ultrasound:
- Diagnostic, Prenatal

Screening Mammography
Echocardiography

Walk In X-Ray
Bone Mineral Densitometry (BMD)
Body Mass Composition Scan (BMC)