

# RADIOLOGY ASSOCIATES OF REGINA MEDICAL P.C. INC.

Drs. Devitt, Verma, Clarke, Rice, Lembke, Suchet, Lim, Hillis, Schulte,  
Lala, Adams, Jeon, Phillipson, Patel, Kapoor, Le, Gourgaris & Chaturvedi

## OFFICES:

- 6-2727 Parliament Avenue S4S 6X5  
X-Ray Phone: 779-1500 Fax: 522-4311  
Hours: Monday to Friday: 8:00 AM - 5:00 PM
- 214 University Park Drive (University Park Mall)  
Phone: 789-3331 Fax: 789-8148  
Hours: Monday to Friday: 9:30 AM - 5:30 PM

*Radiology Associates is a scent free workplace. Please refrain from wearing  
perfumes & cologne on the day of your appointment.*

NAME \_\_\_\_\_ M  F  D.O.B. .... / .... / .....  
DD MM YY

ADDRESS \_\_\_\_\_

S.H.S.P. \_\_\_\_\_ PHONE# \_\_\_\_\_

W.C.B. AND OTHERS \_\_\_\_\_

IS PATIENT PREGNANT?  YES  NO

DATE OF START OF L.M.P. \_\_\_\_\_ SHIELDED  YES

RADIOLOGICAL EXAMINATION OF: \_\_\_\_\_

## CLINICAL INFORMATION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PREVIOUS X-RAYS LOCATION AND DATE

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
DR \_\_\_\_\_ CLINIC \_\_\_\_\_  
DD MM YY

DOCTOR'S SIGNATURE \_\_\_\_\_

## FOR X-RAY USE ONLY

DATE: ..... / ..... / .....  
DD MM YY

TECH INITIALS \_\_\_\_\_ # OF FILM \_\_\_\_\_