

HÔPITAL NOTRE-DAME HOSPITAL (HEARST)

DOCTOR'S FORMS REQUISITION

Doctor's Office _____

Date: _____

<u>Qt</u>	<u>Form #</u>	<u>Description</u>	<u>Del'd</u>
	Online	Dossier prénatal #1	
	Online	Dossier prénatal #2	
	Online	Antenatal Record #1	
	Online	Antenatal Record #2	
	0036444	Uricult Cled Macconkey - Dip & Count (box of 10)	
	0039474	Container specimen urine sterile	
	0039547	Form Booking Surgical Suite	
	0000505	Doctor's Order Form	
	0040182	Medication Reconciliation-Ambulatory Care	
	0060075	Purg-Odan Instructions for Colonoscopy	
	0060076	Go-Lytely instruction for Colonoscopy	
	0001111	Starswabs Amies Charcoal / Swab transport	
	0000994	Requisition diagnostic 3 col. 2 parts (Radiography/ Mammography/ U/S	
	PC-81 A&B	Physio. Dept - Referral & Treatment Record	
	PC-6 A&B	Services externes / Outpatient Services	
	PC-88	Services externes / Outpatient Services for Respiratory Therapy	
	300210 Public Health Lab	Chlamydia / Gonorrhoea Aptima	
	PC-18	Doctor's Forms Requisition	
	PC-49 (rev. 98.04.23)	Nutrition Referral for Ambulatory Care	
	PC-50 (rev. 98.04.29)	Nutritional consultations-Instructions to patients	
	PC-34	NORTH Network Referral Form	
	Public Health Lab	Laboratory Request for Pathology NCR (copy)	
	PC-37 A&B	Consent Form/Formulaire de consentements	
	PC-5	Request for Clinic Booking/Clinique externe	
	PC-66	Operating Room Special Form	
	PC-59 A&B	Gastroscopy /GastroscoPie	
	PC-62	RN Performed Flexible Sigmoidoscopy Referral Form (Colorectal Cancer Screening Program)	
	PC-99 A-B Pamphlet	Patient Safety: Protecting Yourself from Medical Errors	
	PC-99 C-D Pamphlet	Sécurité des patients: Protégez-vous contre les erreurs médicales	
	On Network	Secondary Stroke Prevention Clinic / TIA Rapid Referral Form	
	PC-4 A&B	Changement de médecin de famille / Change of Physician	

Place requisition as required, once a week on Tuesdays.

PC-18
rev. 2017/10/02

Requested by: _____

N.B.: