

Centre of Excellence in Skeletal Health Assessment Physician's Ordering Form

Office Use Only:
Date Rec'd: _____

Appt Date & Time: _____

Bone Mineral Density Test

Effective July 1, 2010, the Ministry of Health has adopted new guidelines on patient eligibility for Bone Mineral Density examinations. OHIP will continue to cover annual BMD tests in persons at high risk for osteoporosis and future fractures. Low risk patients are eligible for BMD testing once in any 60-month period. Please document the risk factors below in order to comply with the Osteoporosis Canada guidelines required by OHIP. Inappropriate referral or inadequate information may delay the scheduling of an appointment. If ineligible patients still wish to have a BMD examination, they are required to pay for the test prior to the performance of the exam.

Preferred appointment date/time: _____

Service site: Mount Sinai Princess Margaret Toronto General
 Toronto Western TRI Lyndhurst

| Patient Information | | | |
|-------------------------------|----------|-------------|----------------------------------|
| Name | | UHN MRN | Date of Birth dd mmm yyyy |
| Address | | Phone (H) | |
| City | Province | Postal Code | Health Card # (OHIP) |
| Alternate Contact Person Name | | Phone No. | |

Lift required / Not ambulatory? No Yes

Previous BMD test? No Yes **When?** _____

- Baseline – Patients are limited to one baseline test in their lifetime
- Low Risk – Patients who are not high risk
- High Risk – Patients with an expected bone loss in excess of 1% per year

Relevant Medical History, risk factors: _____

| | |
|--|---|
| Referring Physician Information: Name: _____ OHIP Billing no.: _____ Address: Tel: Fax: Signature: _____ Date: _____ | Please fax referral to the CESHA Program: UHN: 416-340-4707 MSH: 416-586-8790 TRI: 416-597-7042 For questions, please call UHN: 416-340-3890 MSH: 416-586-4446 TRI: 416-597-3422 ext. 6591 |
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Please refer to the MOHLTC BMD guidelines: (http://www.health.gov.on.ca/english/public/pub/ohip/bone_density.html)