

Voici d'autres documents en Anglais pour remettre aux clients de Kanestate:

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TRACKING MILD TBI (Traumatic Brain Injury)

For Clients 16 years of age and older

Date of the accident: _____

SIGNIFICANT SIGNS (check pertinent statements)

- | |
|--|
| 1. Kinetics at risk |
| 2. Glasgow in the emergency (13-14-15) |
| 3. Loss of consciousness |
| 4. Loss of memory |
| 5. Concussion |
| 6. Focused neurological deficit |
| 7. Fracture or severe injury to the face or cervical spine |
| 8. Scan |
| 9. Clinical or radiological signs of a skull fracture |
| 10. Affect mental function |

Signs or symptoms (insignificant if isolated)
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- | |
|--|
| 1. Disoriented or confused at the emergency |
| 2. Injury to soft tissues (neck, head, face) |
| 3. Vomiting or headache |

OTHER

Medical diagnosis minor CBT / mild / mild to moderate
Head trauma pamphlet given

Support for CBT follow-up	yes	no	Date: _____
Name of nurse at CBT program:	_____		
Signature: _____	Date: _____		

Ocular Emergencies CODE 1

1. All trauma cases, hyphema, orbital or ocular contusions.
2. Serious chemical burns with complete erosion of the cornea or limb ischemia.
3. Ocular hypertension greater than 30, otherwise elective appointment.
4. Sudden decrease of most vision.
5. Floating black dots accompanied by flash
6. Lacrimal passages:
 1. if trauma, laceration of the canal
 2. if severe dacryocystitis (abscess)
7. Neonatal conjunctivitis
8. Infectious corneal ulcer
9. If uveitis of any kind is suspected
10. All problems related to a patient who has undergone ocular surgery.

FOR THE OTHER CASES, CONSULT AN OPHTHALMOLOGIST.

NOTE: For all other codes or when the doctor would like the patient to be seen quickly: the doctor must call the nurse in ophthalmology him or herself; Tuesday-Wednesday 473-6811 extension 2411

Fibre Scoreboard for Adults



Fibre scoreboard for adults

Healthy eating includes eating plenty of fibre. Fibre is the part of plant foods that your body cannot digest. Research shows that a diet high in fibre may reduce the risk of colorectal cancer. Eating plenty of fibre may also help you maintain a healthy body weight, which reduces the risk of several cancers.

There are 2 types of fibre – insoluble and soluble. Most plant foods contain both, but some foods have more of one type of fibre than the other.

Insoluble fibre is found in wheat bran, whole wheat products, brown rice, the skins of fruit and many vegetables. This fibre helps prevent constipation by keeping your digestive system healthy. It also helps you feel full longer.

Soluble fibre is found in lentils and legumes, oat products, flax, psyllium and fruit with pectin, such as apples, strawberries and citrus fruit. This fibre helps lower blood cholesterol and control blood sugar.

Getting enough fibre

Health Canada recommends that adult Canadians get 21 to 38 grams of dietary fibre each day for good health. Following *Canada's Food Guide* can help you reach that goal.

Add foods that are high in fibre to your diet gradually. As you add more fibre, be sure to drink extra fluids – fibre and water work well together.

Foods with the most fibre

- vegetables and fruit
- whole grain foods
- meat alternatives: legumes (beans, peas and lentils) and nuts

Foods with little or no fibre

- milk and milk products
- fats (oils) and sugars
- meats



Vegetables and fruit

Choose 5 to 10 servings of vegetables and fruit every day. Have vegetables and fruit more often than juice – doing so gives your body more fibre than juice.

Vegetables	Fibre	Fruit	Fibre
Asparagus, boiled, 5 spears	1 g	Apple, with skin, 1 medium-sized	3 g
Beans, green or yellow, steamed, 125 mL (½ cup)	2 g	Applesauce, 125 mL (½ cup)	2 g
Broccoli, raw or steamed, 125 mL (½ cup)	2 g	Apricots, dried, 60 mL (¼ cup)	3 g
Brussels sprouts, steamed, 125 mL (½ cup)	3 g	Avocado, raw, ½	7 g
Cabbage, cooked, 125 mL (½ cup)	1 g	Banana, 1 medium-sized	2 g
Carrots, raw or steamed, 125 mL (½ cup)	2 g	Blackberries, 125 mL (½ cup)	4 g
Cauliflower, raw, 125 mL (½ cup)	1 g	Blueberries, 125 mL (½ cup)	2 g
Celery, raw, 1 stalk	1 g	Cantaloupe, 125 mL (½ cup)	1 g
Corn niblets, 125 mL (½ cup)	1 g	Clementines, 2	3 g
Lettuce, romaine 250 mL (1 cup)	2 g	Dates, 5, 60 mL (¼ cup)	4 g
Mushrooms, cooked, 125 mL (½ cup)	2 g	Fruit juice, 100%, 125 mL (½ cup)	traces
Parsnips, cooked, 125 mL (½ cup)	3 g	Grapefruit, white or pink, ½	2 g
Peppers, green or red, 125 mL (½ cup)	1 g	Grapes, with skin, 20	1 g
Peas, frozen, green, cooked, 125 mL (½ cup)	4 g	Mango, ½	2 g
Potato, with skin, 1 medium-sized	5 g	Orange, 1 medium-sized	3 g
Spinach, steamed, 125 mL (½ cup)	2 g	Papaya, ½	2 g
Squash, baked, 125 mL (½ cup)	2 g	Peach, with skin, 1 medium-sized	2 g
Sweet potato, cooked, 125 mL (½ cup)	4 g	Pear, with skin, 1 medium-sized	5 g
Tomato, raw, 1 medium-sized	2 g	Plums, with skin, 1	1 g
Tomato sauce, plain, 125 mL (½ cup)	2 g	Prunes, 5	3 g
		Raisins, 60 mL (¼ cup)	2 g
		Raspberries, 125 mL (½ cup)	4 g
		Strawberries, 125 mL (½ cup)	2 g

This is general information developed by the Canadian Cancer Society. It is not intended to replace the advice of a qualified healthcare provider.



Whole grain foods

Choose 6 to 8 servings of grain products each day. At least half of your grain servings should come from whole grains. Whole grains (such as barley, brown rice, oats and quinoa) will give you more fibre than foods made with refined flours.

Grain products	Fibre	Breakfast cereals	Fibre
Bread		All-Bran buds, 125 mL (½ cup)	18 g
Naan, ½	1 g	All-Bran original, 125 mL (½ cup)	12 g
Pita, whole wheat, ½	3 g	Bran Flakes, 175 mL (¾ cup)	6 g
White, 1 slice	1 g	Corn Flakes, 175 mL (¾ cup)	1 g
Whole wheat, rye, whole grain, 1 slice	2 g	Fibre One, 125 mL (½ cup)	14 g
Rice		Grape-Nuts, 125 mL (½ cup)	6 g
Brown, cooked, 125 mL (½ cup)	2 g	MultiGrain Cheerios, 175 mL (¾ cup)	2 g
Wild, cooked, 125 mL (½ cup)	2 g	Oat bran, cooked, 175 mL (¾ cup)	3 g
Pasta		Rolled oats, cooked, 175 mL (¾ cup)	3 g
Regular, cooked, 125 mL (½ cup)	1 g	Shreddies, 175 mL (¾ cup)	4 g
Whole wheat, cooked, 125 mL (½ cup)	3 g	Shredded Wheat, 1 biscuit	4 g
Others		Special K, 175 mL (¾ cup)	traces
Fibre One bar, 1	5 g	Wheat bran, 15 mL (1 tbsp)	2 g
Fig bar, 2	2 g		
Oatmeal raisin cookie, 2	1 g		
Popcorn (air-popped), 500 mL (2 cups)	2 g		

Meat alternatives: Legumes, nuts and seeds

Choose 2 to 3 servings of meat and alternatives each day. Meat, poultry and fish do not contain fibre, so choose legumes (beans, peas and lentils), nuts and seeds more often to add fibre to your meals.

Legumes	Fibre	Nuts and seeds	Fibre
Baked beans, 175 mL (¾ cup)	8 g	Almonds, 60 mL (¼ cup), shelled	4 g
Chickpeas, 175 mL (¾ cup)	8 g	Flaxseeds, ground 15 mL (1 tbsp)	3 g
Dark kidney beans, cooked, 175 mL (¾ cup)	12 g	Peanut butter, 30 mL (2 tbsp)	2 g
Lentils, cooked, 175 mL (¾ cup)	6 g	Peanuts, 60 mL (¼ cup), shelled	3 g
Meatless ground burger, 75 g (2.5 oz)	4 g	Sunflower seeds, 60 mL (¼ cup), shelled	3 g
Vegetable patty, 1	6 g		



Tips for getting more fibre

Breakfast

- Choose a cereal with at least 4 grams of fibre per serving. (Look for the Nutrition Facts label on the box.)
- Add a couple of tablespoons of wheat bran to cereals that are low in fibre.
- Add fresh or frozen berries to your cereal.

Snack

- Sprinkle granola, wheat bran, oat bran, flaxseeds or other bran cereal on yogurt, cereal, applesauce, salads, soups, casseroles or baked goods. If you're baking your own snacks, make sure to bake with whole wheat flour. For example, if your recipe calls for 250 mL (1 cup) of flour, you can use half white and half whole wheat flour.
- Nibble on a trail mix of dried fruit and nuts.

Lunch

- Spread hummus instead of mayonnaise on your sandwich.
- Try barley, lentil or split pea soup.
- Add some shredded carrots or any other vegetable in addition to the lettuce on your sandwich.
- Choose whole grain breads.

Dinner

- Leave skins on potatoes when you bake, mash or boil them.
- Have a salad with your meal. Make it with romaine lettuce, spinach, or bok choy or try using broccoli or cabbage.
- Add cooked lentils, beans or peas to your pasta sauce.
- Cook whole wheat pasta or brown rice, instead of using white pasta or rice.
- Add nuts or seeds to salads or a stir-fry.

Source for grams of fibre in all charts: *Nutrient Value of Some Common Foods*, 2008. Please note these are average amounts in grams.

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GASTROENTERITIS

When a child suffers from gastroenteritis he or she may experience diarrhea or vomiting. Some children will have both symptoms during the illness which lasts a few days. It is necessary to reduce food intake while increasing the quantity of liquids.

MONITORING

11. If possible, weigh the child at the onset of symptoms.
12. Monitor and keep track of rectal temperature, number of bowel movements, vomiting and urinations.

Worsening is characterized by weight loss, increased number of vomiting and bowel movements and a decrease in the frequency of urination, tears and saliva.

DIET

- ⤴ Stop the regular diet and replace with one of the following solutions:

Pedialyte: is a drink or popsicle that you can purchase at the pharmacy. You can give it to your child as instructed on the bottle (do not give child ONLY PEDIALYTE FOR MORE THAN 24 HOURS without consulting with a doctor).

OR

Mix 360 ml (12 ounces) of unsweetened orange juice with 600 ml (20 ounces) of boiled water; add 1/2 a teaspoon of table salt to the mixture. Avoid orange juice mixes (Tang, Quench, etc).

OR

While waiting to purchase one of the two mixtures above give the child: 1 litre of boiled water and 1/2 a teaspoon of salt and 2 to 3 tablespoons of sugar.

- ⤴ Avoid apple juice; if unavoidable, then dilute by half with water.
- ⤴ Frequently (every 30 or 60 minutes) give a small amount (1 to 3 ounces) of one of

the solutions above. Slowly increase the amount if child does not vomit.

✧ Return to a regular diet in small quantities.

✧ Do not stop giving milk products unless otherwise advised by a doctor.

Request for a Magnetic Resonance Image (MRI) Exam

Type of test requested

Cerebral (head)	Cervical spine	Ankle
Pituitary	Dorsal spine	Elbow
Internal auditory canals	Lumbar spine	Shoulder
Temporomandibular joints (Jaw joints)		Knee
Thorax	Cholangiopancreatography resonance	Hip
Abdomen	Breasts	Hand
Pelvis		Foot
		Wrist

Resonance Angiography:

Other area:

Mandatory and relevant clinical information

Referring Doctor

Please complete the consent questionnaire at the back of this form and sign

Date of request

Doctor's signature

Licence number

TO TAKE AN APPOINTMENT

1. Please complete the request for an exam including the questionnaire and the consent form duly signed and fax it to (450) 473-2868.
2. Include a telephone number where the patient can be reached between 8:00 am and 4:00 pm from Monday to Friday.
3. We will contact the patient to schedule an appointment.
4. At the time of his/her appointment, the patient must bring all previous pertinent radiology exams (x-rays, scans, MRIs)

RESERVED FOR USE BY RADIOLOGY

Cystoscopy

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Cystoscopy

Cystoscopy allows the visual examination of the bladder and its outlet as part of the investigation and treatment of various urinary tract problems.

The investigation of urinary tract problems doctor, the anesthesiologist, will explain how anesthetic has worn off completely. The use often requires visual examination of the bladder and its drainage system. This examination is called a cystoscopy. Cystoscopy may be performed in your urologist's examination room or at your local hospital. The location, date and time of the cystoscopy will be specified so that you can make any necessary arrangements.

The Examination

On the day of your examination you may be asked to undress and put on a gown. A nurse will ask you a few questions and explain the examination procedure. At the appropriate time, you will be taken to an examination room where you will lie down on a special bed. Your legs may be elevated and supported in stirrups. Cystoscopy is performed using sterile technique. This means that care is taken to prevent any bacteria from entering the bladder and causing infection. Before the examination begins, an antiseptic solution is used to clean the genital area, which is then covered with a sterile sheet.

Local anesthetic ("freezing jelly") may be applied to the urinary passage (urethra) to numb its lining. During the cystoscopy, you will be awake and aware of being touched, but any discomfort should be tolerable.

If additional tests are planned, your urologist may recommend that you receive an anesthetic. In these cases, another specialist

you will be kept comfortable with sedation or by being "put to sleep." You will be asked not to eat or drink anything for a number of hours before your cystoscopy if an anesthetic is to be used.

Cystoscopy is performed by passing a narrow tube (the cystoscope) through the urinary opening, along the urethra and into the bladder. It is important that you relax during the examination. The bladder is then filled with sterile water and special lenses are used to examine every part of its lining. The prostate and urethra are also examined, if appropriate.

The entire examination normally takes no more than a few minutes and you should be able to resume your usual activities immediately, unless an anesthetic is required. In this case, you will be monitored until your of an anesthetic requires that you arrange to be driven home because of its potential prolonged sedating effects. You should be able to resume all your usual activities by the next day.

After the Examination

After a cystoscopy, some patients may experience burning during urination and blood in the urine for a few days. These symptoms will disappear more quickly if you drink plenty of fluids and empty your bladder frequently. Your urologist will discuss any findings immediately after completing your cystoscopy. You may be asked to make an appointment later to review the results of all investigations and to plan further tests or treatment as required. Medication may also be prescribed following your cystoscopy, if appropriate.