



**SULTAN AHMAD SHAH MEDICAL CENTRE @IIUM**  
**PATIENT PREPARATION LIST**  
**COMPUTED TOMOGRAPHY (CT) SCAN**

CT scan examination use high technology computer system to analyse and reconstruct image. Patient should not move during the examination to make sure high quality of the image produced. Your cooperation is very important for the success of the examination.

NAME:	
PROCEDURE:	WARD/CLINIC:
DATE OF APPOINTMENT:	APPOINTMENT TIME:

Please inform our officer in charge if you have any of the following:

1. If you are pregnant or suspected to be pregnant
2. Have history of contrast media allergy previously
3. Have allergy to any drug/medication
4. Have asthma or history of asthmatic attack.
5. Any kidney disease
6. Diabetes Mellitus

**PREPARATION FOR THE EXAMINATION**

1. Not allowed to eat 4 to 6 hours prior to the examination. However drinking small amount of plain water is allowed.
2. Take your medication as usual (if any). For diabetic patient taking **METFORMIN (GLUCOPHAGE)**, they should stop taking the drug 48hours before the examination.
3. For patient with asthma/allergies, pre examination medicine (steroid) must be taken as follow:
  - \_\_\_\_\_ Tab. Prednisolone 50mg 12 hours before the examination and,
  - \_\_\_\_\_ Tab. Prednisolone 50mg 2 hours before the examination
4. Babies on milk feeding are not allowed to feed 3 hours before the examination.

**ATTENTION**

1. Please be present on the date and time designated.
2. Please bring along previous CT scan film, MRI film, Ultrasound result if any.

If you cannot make it to the appointment or have any other related difficulty/enquiry, please do not hesitate to contact us at 09-591 2576.

**SULTAN AHMAD SHAH MEDICAL CENTRE @IIUM**  
**TATACARA PERSEDIAAN TEMUJANJI PESAKIT**  
**COMPUTED TOMOGRAPHY (CT) SCAN**

Pemeriksaan CT Scan merupakan pemeriksaan x-ray menggunakan computer untuk memeriksa organ di dalam badan. Pesakit tidak dibenarkan bergerak semasa proses imbasan dijalankan bagi memastikan imej berkualiti tinggi diperolehi. Kerjasama pesakit adalah sangat penting.

NAMA:	
PEMERIKSAAN:	WAD/KLINIK:
TARIKH PEMERIKSAAN:	WAKTU PEMERIKSAAN:

Sila maklumkan kakitangan jabatan X-ray yang bertugas sekiranya anda:

1. Sedang/disyaki mengandungi
2. Pernah mengalami alahan kepada kontras media
3. Pernah mengalamai alahan kepada mana-mana ubatan
4. Pernah/sedang menghidap Lelah/Asma
5. Pernah/sedang menghidap penyakit buah pinggang
6. Pernah/sedang menghidap penyakit Kencing Manis atau Diabetik

**PERSEDIAAN PEMERIKSAAN**

1. Tidak dibenarkan makan 4 hingga 6 jam sebelum pemeriksaan. Minum air kosong dalam jumlah yang sedikit dibenarkan.
2. Anda dinasihatkan memakan ubat-ubatan anda seperti biasa, **KEQUALI** ubat **METFORMIN/GLUCOPHAGE** bagi pesakit kencing manis/diabetes. Sila berhenti mengambil metformin/glucofage **48 jam** sebelum pemeriksaan.
3. Jika anda adalah pesakit asma atau mengalami alahan (allergic) kepada mana-mana ubat-ubatan, anda perlu mengambil ubat steroid pra-rawatan seperti berikut:
  - \_\_\_\_\_ Tab. Prednisolone 50mg 12 jam sebelum pemeriksaan dan,
  - \_\_\_\_\_ Tab. Prednisolone 50mg 2 jam sebelum pemeriksaan
4. Bayi yang masih menyusu tidak dibenarkan menyusu 3 jam sebelum pemeriksaan.

**PERHATIAN**

1. Sila hadir pada tarikh dan masa yang telah ditetapkan.
2. Sila bawa bersama filem x-ray terdahulu seperti CT scan, MRI, Ultrasound dan lain lain jika ada.

Jika anda tidak dapat hadir atau mengalami masalah sila hubungi kami menggunakan talian di 09-591 2576.