

Procedures Scheduling Request Form

University of Wisconsin Department of Family Medicine

Eau Claire/Augusta

Approved: 5/16/12 Revised: 2/6/13

Instructions: Below is a listing of procedures that are available to be scheduled at ECFM clinic. If you are interested in completing additional procedures that are not required for graduation, please indicate which of these procedures you are interested in. Complete and return this form to the Program Office Staff. When the procedure(s) you have indicated below are scheduled with referrals, arrangements will be made to try to schedule you for the procedure as well. Preference will be given based on PGY seniority and availability.

Note: Please refer to the [Procedure Scheduling Policy](#) for additional information and clarification regarding procedure scheduling. .

Name: _____

Today's Date: _____

Procedures that can be scheduled at ECFM Clinic:	Required	Yes	No
Aspiration/Injection Joints	X (6)	X	
Biopsy: Punch	X (1)	X	
Biopsy: Excision	X (3)	X	
Cardiac Stress Testing			
1. Treadmill			
a. Without Cardiolite			
b. With Cardiolite			
2. Adenosine (with Cardiolite)			
Circumcision			
Colposcopy			
1. Without Cryotherapy			
2. With Cryotherapy			
3. Loop Electrosurgical Excision Procedure (LEEP)			
Enucleation/Excision of external thrombotic hemorrhoid			
Flexible Sigmoidoscopy			
Foreign body removal			
Geriatric Assessments			
IUD insertion/removal			
Implantable contraception			
Nail Sugery-Ingrown Toenail			
Prolotherapy			
Ultrasound			
1. Amniotic Fluid Index			
2. Bladder Scan			
3. Complete Evaluation during pregnancy			
Vasectomy			

Resident Signature _____

Date _____

For office use:
 Update: J:\Program Policies and Forms\Procedures_requirement and scheduling\Procedure List_Summary Spreadsheet
 Scan to resident's file.

Original: Resident

CC: Advisor

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- Update: J:\Program Policies and Forms\Procedures_requirement and scheduling\Procedure List_Summary Spreadsheet
- Scan to resident's file.

Original: Resident

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