



Computed Tomography

Referral Form

Please Include: A 3-view thoracic radiograph study required for all patients 5 years and older. A CBC, chemistry panel and urinalysis on all patients within 30 days of anesthesia are also required. Radiographs will be returned promptly. This information must be available at the time of the CT or we may need to repeat any diagnostic tests required for anesthesia. Thank you for your referral

Date:

rDVM Information

Referring Doctor:	Phone:
Hospital Name:	Fax:
Hospital Address:	Best time to call:
Email Address:	Preferred method of contact: phone fax email

Patient Information

Owner's Name:	Phone:
Owner's Address:	
Pet's name:	Species: canine feline other
Breed(s):	Birthday (or approx. age): Weight:
Current on vaccinations? yes no	Spayed/Neutered? yes no Sex: male female
Presenting Problem:	
History/Pertinent Physical Findings/Treatment:	

CT Examinations Requested:

Abdominal:	Survey	Other
Thorax:	Lungs	Thoracic Wall
Cervical:	Thyroid	Other
Cranium:	Orbit	Bulla Nasal
Spine:	Cervical (C1-T3)	Thoracolumbar (T9-S1) Other
Musculoskeletal:	Elbows	Other

Additional Requests: *If indicated by the CT, please select the procedures to the right you would like performed.*

Diagnostic Fine Needle Aspirate

Diagnostic Tru-Cut Biopsy

CLIENT COMMUNICATION: *Outpatient CT pets will be received by a doctor who will perform a general preanesthetic examination prior to the CT procedure. CT pets will be returned to the referring hospital by their owner after recovery from the procedure for further treatment. If you would like a referral to one of our other specialists, please advise the client to schedule a separate appointment with our reception staff. Copies of the CT images will be given to the client for the referring veterinarian's review. A formal CT report (by a board-certified radiologist) will be faxed to the referring veterinarian the following day. Please inform the client that the CT findings and any additional treatment plans will be discussed with them by the referring veterinarian.*

POTENTIAL RISK OF ANESTHESIA: *If a patient is anesthetized, a fully qualified technician working under the direct supervision of a veterinarian will be with the animal throughout the anesthesia and the initial recovery period. In spite of stringent anesthetic monitoring protocols, life-threatening complications are still possible. The overall rate of anesthetic complications is extremely low, but nevertheless, such complications always remain a possibility.*

POTENTIAL RISK OF FINE NEEDLE ASPIRATE (FNA)/BIOPSIES: *If the patient undergoes percutaneous biopsies or any form of centesis, there are potential risks such as hemorrhage, infection and death. These complications may be unlikely to occur, but always remain a possibility. Please inform your client of these prior to the referral.*

▶ **Has client been informed of all risks & possible complications and given consent to proceed, if anesthesia/sedation is required?** yes no

▶ **Has client been informed to fast their pet prior to the appointment?** yes no

▶ **Has client been informed of all risks & possible complications and given consent to proceed, if fine needle aspirate (FNA)/biopsies are required?"** yes no

I have reviewed and completed this form for submission to Animal Specialty Group for the evaluation of my patient: ▶

Referring Veterinarian Signature

