



Cheat Lake Animal Hospital Ultrasound Pre-Exam Instructions and Consent Form

INSTRUCTIONS: To be completed and returned the day of the exam. Please fill in this form (you can type in the blanks, if desired). Then print, sign, and give it to the receptionist when you come in.

NOTE: Fields marked with ** are required.

Client's Name** _____

Patient's Name** _____

Your E-mail Address** _____

Daytime Phone # where you may be reached today** _____

PREPARATION:

Your pet has been scheduled for an ultrasound procedure on ____ / ____ / ____.

- Please drop off your pet between 7:30 and 9:00 am that morning.
- Please call us prior to this date if there are any additional problems or concerns that you would like the doctor to address while your pet is in the hospital.
- Please withhold your pet's food for 8 hours prior to the exam. When animals eat, they also swallow small amounts of air which inhibits our ability to visualize structures in the abdomen.
- Continue to give your pet water prior to the exam. Please try to prevent your pet from urinating the morning of your appointment as a full bladder helps us visualize structures in and around the bladder.
- If your pet is taking any medication that you are uncertain should be given the day of the procedure, please call our office for advice.
- Give lots of extra hugs and kisses!

**** NOTE: Hair will be shaved at the ultrasound site. ****

OTHER SERVICES:

While your pet is in the hospital, there are several procedures, which some pets resent when awake, that can be done at this opportune time. These include placement of a microchip (which is a permanent identification method), having anal glands expressed, nails trimmed, ears cleaned, heartworm test, or a fecal exam.

Vaccines can be given after your pet has fully recovered from sedation. Again, just let us know prior to your pet's scheduled procedure date, or call us if you would like further explanation of these services.

Sedation

It is very important that your pet remain very still during the procedure. Depending on patient cooperation, sedation may be needed for an ultrasound.

Please accept or decline sedation for your pet. The cost of sedation may vary with your pet's weight and the type of sedation used. Please ask for an estimate if needed.

_____ **Accept** sedation

_____ **Decline** sedation

Bloodwork

With sedation, we recommend Blood Chem 10 (checks kidney and liver function, includes PCV/TP, which indicates oxygen carrying capacity and hydration status) and IV Catheterization, but they are both OPTIONAL.

Please accept or decline.

_____ **Accept** bloodwork

_____ **Decline** bloodwork

IV Catheterization

In the unlikely event of crisis during sedation, this allows for medication to be administered rapidly. ** NOTE: Hair will be shaved at the catheter site(s).

_____ **Accept** IV placement

_____ **Decline** IV placement

I have read and understand the above information.

Signature** _____

Date** _____

If you have any questions, please call our office. We will be happy to address the issues you may have regarding the health and well being of your family pet.

Should you decide to delay or cancel this appointment for any reason, we ask that you notify our office as soon as possible at (304) 594-1124.