

OUTPATIENT CT



PRIORITY: Urgent Non-Urgent

Client's Name: _____ Phone: _____ - _____ - _____

Patient's Name: _____ Species/Breed: _____

Age/DOB: _____ Sex: _____

Precautions: _____

RDVM Clinic: _____ RDVM on the case: _____

Phone: _____ Email: _____

PROBLEMS/DIAGNOSTICS: _____

CT Region to Examine:	Anesthetic Complications:	PROBLEMS: Cardiovascular <input type="checkbox"/> Pulmonary <input type="checkbox"/> Seizures <input type="checkbox"/> Diabetes <input type="checkbox"/> Cancer <input type="checkbox"/> Hepatic <input type="checkbox"/> Renal <input type="checkbox"/> Neurologic <input type="checkbox"/>	If any problems checks, please explain	Contrast Required: Yes <input type="checkbox"/> No <input type="checkbox"/>
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Recent Bloodwork? YES NO

Recent Radiographs? YES NO

The following pre-anesthetic workups from rDVM clinic are required for the patient to be scheduled for on outpatient CT.

Three View Thoracic Radiographs: For any animal over 5 years of age, or any animal with concern for cardiopulmonary disease, taken within one month of CT procedure.

CBC and Chemistry Panel: Within one month of the CT procedure.

For expedited service, please attach and send all above diagnostics, including chart notes to:
xrays@ovra.com