

Orange Blossom Veterinary Imaging

PROCEDURE CONSENT FORM

Date of Scan: _____

Name of Pet: _____

Name of Owner: _____

Attending Veterinarian: _____

Please initial the following:

_____ I give permission to shave my animal.

_____ I give permission to give sedation if deemed necessary by attending veterinarian.

_____ I give permission to ultrasound an additional body cavity if deemed appropriate by attending veterinarian.

_____ I give permission to perform a fine needle aspirate for tissue sampling and/or centesis (removal of fluid) if deemed appropriate by attending veterinarian. I understand this may require sedation and has a minimal but inherent risk including, but not limited to, non-diagnostic sample and hemorrhage.

_____ I understand that performing some of the above may incur additional costs.

Owner Signature: _____

Date: _____