

Hudson Valley Hematology-Oncology Associates

Consent for Iodinated Contrast

In order to evaluate your medical condition, your physician has requested a computerized tomography (CT) examination. A CT examination has some contraindications. The contrast material is an iodine-based compound; an examination should not be performed if there is a history of an allergic reaction to iodinated contrast material that has caused a shortness of breath, hives, itching, wheezing or chest tightness. Your physician must be notified if an allergy exists. In rare instances, hypersensitivity has occurred in patients with no known allergies. The use of iodine-based contrast material is also contraindicated in some medical conditions. Prior to your study today, the Physician or technologist will review your medical profile with you to screen for the presence of risk factors that might increase the likelihood of adverse reactions.

Have you ever had an allergic reaction to IV contrast? _____

Do you have a history of Asthma? _____

Are you allergic to any foods or medicines? _____

Please List: _____

Do you have any heart problems? _____

Are you Diabetic? _____

If yes, what type of medication do you take? _____

Are you taking a medication called Glucophage or Metformin? _____

(or medication containing Metformin)

(Inform Patient to withhold for 48hrs after IV Contrast)

Have you ever had problems with your Kidneys? _____

CONSENT: A CT exam, its indication and contraindications have been fully explained to me. Having complete knowledge of this procedure, I give my consent and permission to have the CT exam performed.

Patient Signature

Date

Technical Information:

Contrast Used: Isovue 370 Expiration Date: _____

IV Site: _____ IV Notes: _____

Infiltrate: Yes _____ No _____ BUN/Creatinine _____ / _____

Reaction to contrast (Past) Yes _____ No _____ If Yes, what happened: _____

Technologist Signature/Date: _____