

Name \_\_\_\_\_ Date \_\_\_\_\_

Your doctor has ordered a Positron Emission Tomography (PET) / Computerized Axial Tomography (CT) Scan for you today. This exam combines PET scan images with limited CT images to locate areas of increased cellular activity within the areas of the body that are imaged. Both the PET and limited CT images are performed at the same time and are considered to be one exam which is called a PET/CT Scan.

For this test you will have your blood sugar level checked by a needle stick to your finger. You will also have an IV placed in a vein in your arm. The IV will be used to administer a radioactive tracer injection that allows us to take the PET/CT images. While there are typically no side effects or allergic reactions associated with this injection, there is always a remote chance of an allergic reaction to any injected substance. The radioactive tracer injection will be excreted through your urinary system, but will not harm your kidney function. It will take approximately 24 hours for the tracer to completely clear your body. In an effort to avoid unnecessary radiation exposure to those who are most sensitive, we ask that you avoid contact with children and pregnant women for the remainder of the day today. It is not necessary to avoid contact with non-pregnant adults today.

\*\*\* Your signature indicates that you understand the above information and consent to this procedure.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

**Female Patients of Childbearing Age**

It is important that you immediately notify the technologist if you are pregnant, think you may be pregnant, or are breast feeding. The injection that you will receive for your test today emits radiation that may be harmful to a fetus or small child. It is for this reason that our Radiologist will need to consult with your doctor before doing this test if there is any chance you are pregnant.

If you are breast feeding you will receive instructions from the technologist to discontinue breast feeding for the 24 hours following your exam today. You may express and discard breast milk but should NOT feed to a child any breast milk expressed during the 24 hour period following your exam.

Date of Last Menstrual Period \_\_\_\_\_

Currently Pregnant? Yes \_\_\_\_\_ Unsure \_\_\_\_\_

No \_\_\_\_\_

I have read and fully understand the above information and have had all of my questions answered to my satisfaction.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date