

NAME:

Date of Birth:

Referring Physician:

Servant Medical Imaging - Xray and CT Patient Advisory and Consent

ALL PATIENTS:

Servant Medical Imaging recognizes that radiation from X-ray and CT scans can be harmful if excessive. While the level at which it becomes harmful is not known, we choose to limit exposure to as little as possible to achieve quality exams. We are participants in the national campaigns "Image Gently" and "Image Wisely". Even so, some harm is still possible, even if very unlikely. I acknowledge such risk and agree for Servant Medical Imaging to perform the X-ray or CT as requested by my doctor.

FEMALES, 11 - 55 YEARS OF AGE:

The radiation used in X-ray and Computed Tomography (CT) may be harmful to an unborn child. To help prevent unnecessary radiation of an unrecognized pregnancy and in accordance with the national standards, we require the following information of female patients of child bearing age.

If any of the information below indicates even a remote possibility of pregnancy, your referring physician will be asked to order a urine or serum pregnancy test prior to any X-ray or CT to the pelvis area.

I have been fully informed of the risks involved in radiation of a first trimester pregnancy and assume the responsibility for any consequences from the procedures I am about to have. I understand that I will not hold Servant Medical Imaging, the employees of the facility or the interpreting radiologists responsible for any potential harm to myself or my unborn child.

First Day of your Last Mentrual Cycle: _____

Birth Control Method(s) used: _____

Yes No Is there a possiblility that you might be pregnant?

Patient's Signature (Parent or Guardian as appropriate)

Date Signed: