

Information sheet for Magnetic resonance tomography (MRT)

Owner			
Last name:	First name:	TelNo:	
Animal data			
Age:	Gender:	Breed:	
To reduce possible risks, please answer the following questions:			
Did your animal have previous surgeries?	YES	NO	UNKNOW
<i>If, YES, does it have implants and which? (e.g, joint prosthesis, operation clip, shunt, bone implants)</i>			
Does your animal have any metal or metal splinters (shot,pellets,..)	YES	NO	UNKNOW
Has your animal had a previous MRT-study?	YES	NO	UNKNOW
<i>If, YES, have there been, problems and which?</i>			
Is your animal tatoosed?	YES	NO	UNKNOW
Does your animal have a chip?	YES	NO	UNKNOW
When was the chip implanted?			
Does your animal have a pacemaker?	YES	NO	UNKNOW
Body weight (kg):	Body length (cm):		
Signatur of the owner		date/time	

„Information sheet for Magnetic resonance tomography (MRT)“ modified from OERG