



Pre-Treatment Owner Consent Form

Radiation Safety Procedures in Radioiodine-treated Cats

Your cat has been diagnosed as having a hyperactive thyroid gland (hyperthyroidism). Radioiodine therapy has been shown to be an effective treatment. The therapeutic use of radioactive substances must be closely controlled and monitored by radiation safety personnel. After your cat receives the radioiodine, it is housed in a special area and all of its excrements (urine and stool) are collected and stored by trained radiation safety personnel. The expected confinement period is 4-28 days depending on which release protocol is used.

A disadvantage of this treatment is that should your cat need critical care, it must be provided in the confines of the hyperthyroid cat ward. This area is not equipped for critical care and because of the radiation hazard; personnel cannot remain close to the patient. Thus, compromises in the medical treatment could arise if your cat becomes ill. Owners cannot visit the radiation ward. Should your cat die during the confinement period, the cat's remains must be disposed of under radiation safety conditions. Personal belongings will not be returned.

In addition to the pre-treatment consent form, you will be required to read and sign a release form explaining necessary steps taken at home following I131 treatment. Most people will read and sign a normal release protocol, though some situations may necessitate an extended stay in isolation (thereby utilizing an extended release protocol.) This form must be reviewed and signed both at admission and upon discharge.

Non-Compete Agreement

As a referral service, we have promised referring veterinarians that we will not see referral clients in our general practice for one (1) year following the completion of this treatment. If you have questions or issues beyond the scope of the radioiodine treatment, you should direct those to your current veterinarian or another doctor in the same practice. By signing below, you agree to these conditions of service.

I have read and understand the above conditions of treatment and give permission for treatment to begin.

Owner/Agent Signature: _____

Date: _____