

## Risk Assessment and Consent Form for Contrast Injection

<b>Patient Name:</b>			
<b>Patients DOB:</b>			
<b>Procedure:</b>			
<b>Please answer ALL questions below:</b>			
What is your approximate weight?	_____ kg	What is your age?	_____ years
Previous <u>Severe</u> Allergic Reaction needing treatment (inc. contrast)	<b>Yes</b>	<b>No</b>	If yes please explain below:
Have you had a mild contrast reaction? (i.e. vomiting, skin rash etc.)	<b>Yes</b>	<b>No</b>	
Do you have or have you ever had asthma/eczema/hay fever?	<b>Yes</b>	<b>No</b>	
Do you have an allergy to any medications/food/chlorhexidine?	<b>Yes</b>	<b>No</b>	
Do you have hyperthyroidism?	<b>Yes</b>	<b>No</b>	
Do you have heart disease?	<b>Yes</b>	<b>No</b>	
Are you taking beta blockers?	<b>Yes</b>	<b>No</b>	
Do you have any known kidney disease or are you on dialysis?	<b>Yes</b>	<b>No</b>	
Are you diabetic and taking <i>Metformin</i> ?	<b>Yes</b>	<b>No</b>	
<b>Note: Metformin</b> is also known as Glucophage, CarbophageSR, Riomet, Fortamet, Glumetza, Obimet, Gluformin, Dianben, Diabex, Diaformin, Siofor, Metogamma	<b>Yes</b>	<b>No</b>	
Are you Pregnant or Nursing an Infant?	<b>Yes</b>	<b>No</b>	
Have you had a Barium Study in the Last Week	<b>Yes</b>	<b>No</b>	

**I hereby give my consent for the administration of IV contrast for this examination;  
The reasons for the risks involved have been explained**

Patient/Representative Signature: \_\_\_\_\_

**If an allergic reaction does occur, in rare cases there is a possibility that you may require transportation to the Geraldton Regional Hospital by ambulance. Do you have ambulance cover?    Yes    No**

Form Reviewed by Technologist Staff: \_\_\_\_\_ Date: \_\_\_\_\_

TECHNOLOGIST USE ONLY	
CREATININE Result _____ range ( _____ ) GFR _____ Date reported _____	Cannulated By: _____ No of attempts: _____ Cannulation Site: _____ Injected By: _____
<b>ALLERGIC REACTION:</b> _____ <i>MEDICATION given</i> _____ <i>PRESCRIBED/Administered by</i> _____	Saline Flush prior to use:    Y    N Contrast Volume: _____ <div style="text-align: right;">(Amount)</div>
<b>NOTES</b> _____ _____ _____	