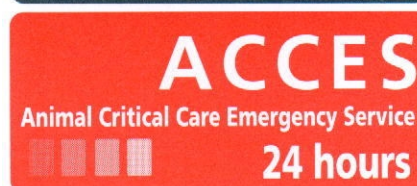


HOW CAN CT HELP MY PATIENTS?

1. CT (computed tomography) provides us with an ability to view thin slices of anatomy without the superimposition artifacts of conventional radiography
2. Our multi-detector (8-slice) helical scanner allows quick image acquisition, minimising motion artifacts and allowing angiographic studies
3. Spectacular 3D reconstructions are also possible with our Volume Rendering software



APPLICATIONS

CT is an excellent imaging modality for a large variety of diseases, including but not limited to those of:

- **the nasal cavity, paranasal sinuses, pharynx**
 - aiding in differentiation of inflammatory, infectious and neoplastic rhinosinusitis
- **the skull, orbit, tympanic bullae**
- **the brain**
 - acute haemorrhage, large forebrain infarcts, mass lesions due to neoplasms, abscesses or granulomas, and developmental conditions such as hydrocephalus
- **the spine**
 - the bony vertebrae (including discospondylitis), extradural, intradural/extramedullary spinal cord lesions including intervertebral disc disease
- **the lungs, pleura and mediastinum**
 - neoplastic disease and assessment of regional lymph nodes, diffuse airway or pulmonary diseases, pneumothorax, lung lobe torsions
 - cranial mediastinal masses
- **the abdomen**
 - neoplastic disease of any abdominal organ and assessment of invasion into surrounding structures or vasculature, soft tissue structures within the pelvic canal, the bony pelvis, ectopic or obstructed ureters
- **the extremities**
 - Surgical planning for difficult fractures/malformations/limb deformities
 - bony abnormalities or soft tissue neoplasms
- **the vasculature**
 - portosystemic shunt evaluation

LIMITATIONS and RISKS

The following is a list of limitations and risks associated with computed tomography and contrast administration

- General anaesthesia is necessary for almost all patients. However, it may be avoided in some critical patients (but a compromise in image quality will result, usually due to motion artifact)
- Streak artifacts may result from dense bone
- Artifacts may also result from metallic objects such as surgical implants or staples, though this does not preclude CT as an imaging modality for patients with those implants
- Radiation exposure, especially in patients undergoing repeat examinations
- Anaphylaxis and/or renal failure secondary to contrast administration in a very small number of patients
- CT is limited in providing clinically useful information for the following:
 - cardiac disease, where echocardiography and electrocardiography remain modalities of choice
 - parenchymal diseases of the brain, such as meningoencephalitis, where MRI or CSF analysis remain the modalities of choice
 - smaller infarctions of the brain, especially in the region of cerebellum/brain stem, where MRI remains a superior modality
 - intramedullary spinal cord diseases, e.g. ischaemic conditions such as fibrocartilaginous embolism, where MRI remains the modality of choice
 - peri-articular soft tissue structures such as ligaments, menisci, or cartilage, where MRI remains the modality of choice
 - the inner ear and fluid content, where MRI is a superior imaging modality

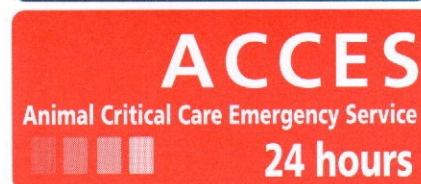
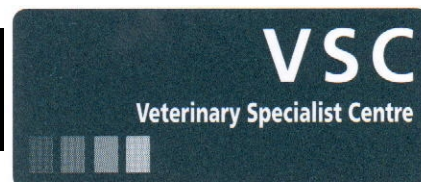
Cnr Deinh & Plassey Rds

Post Office Box 307 North Ryde NSW 1670

Email: vsc@vetspecialist.com.au www.vetspecialist.com.au

Telephone: 02 9888 9800 Facsimile: 02 9888 9338

REFERRING AN OUTPATIENT FOR CT



1. BOOKING

- a. Call Reception on (02) 9888 9800 to schedule a CT Study.

2. FAX REQUEST FORM

- a. Fill out the attached CT Request Form and fax to VSC on (02) 9888 9338 on or before the date of examination

3. TRANSPORT/PICK – UP

- a. Delivery and pick up of your patient may be performed by:
 - i. A nurse from your clinic
 - ii. A veterinarian from your clinic
 - iii. The owner of the animal
 - iv. Or alternately, animal transport such as PetMedics (oxygen support available in the ambulance)*

4. PRE-ANAESTHETIC EVALUATION

- a. Patients will be examined on arrival by a veterinarian
- b. Patients will be catheterised unless one is in place
- c. PCV/TPP, urea/creatinine will be performed unless supplied

5. RADIOLOGIST REPORT

- a. Interpretation of the CT will be performed by Dr Graeme Allan MVSc FACVSc DACVR, or Dr Robert Nicoll BSc(Vet) BVSc DACVR (Veterinary Imaging Associates)
- b. A report will be available on the day of examination, or the following morning if the study is performed late in the day
- c. The report will be faxed or emailed to you, depending upon your request

6. CT IMAGES

- a. Selected CT images of your patient are accessible on our server for your perusal if requested

7. PAYMENT

- a. Your hospital will be responsible for payment of the account, and an invoice will be provided to you on the day of examination
- b. The fee is inclusive of VIA specialist radiologist interpretation
- c. Costs of a CT study are as follows:
 - i. Single region with contrast approximately \$1350 – 1450 depending if hospitalized
 - ii. Two regions with contrast approximately \$1600
- d. Additional fees will apply for the following:
 - i. CT myelograms, angiograms, vascular studies.
 - ii. Specialist (surgery, internal medicine, oncology) consultation if requested
 - iii. Anaesthetic emergencies

*For enquiries regarding the PetMedics service and costs, please call Niccole or Gareth on 0403 881 998

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REQUEST FORM



DATE OF EXAMINATION: _____
CLIENT NAME: _____
PATIENT NAME: _____
SPECIES/BREED: _____
DOB: _____

REFERRING HOSPITAL: _____
VETERINARIAN: _____
PHONE: _____
FAX/EMAIL: _____

Would you like a faxed or emailed copy of the radiologist's report? FAX EMAIL

CLIENT CONSENT FOR ANAESTHESIA AND CONTRAST ADMINISTRATION IF DEEMED NECESSARY:

I am over 18 years of age. I am the owner of _____ (patient name). I recognise that there is some degree of risk attached to any medical, anaesthetic, and imaging procedure/contrast administration and I have discussed any concerns with my veterinarian. I also understand the performance of the procedure does not guarantee a definitive diagnosis or a desired outcome. I consent to anaesthesia and contrast administration (if deemed necessary) in my animal for the CT procedure.

Signed: _____ Name (please print): _____

Date: _____

CASE SUMMARY:

(Relevant history, physical examination findings, laboratory results, differential diagnoses. This may be faxed if preferred)

Please include PCV/TPP and urea/creatinine as minimum database for anaesthetic purposes. Otherwise, these will be performed at our hospital.

REGION OF STUDY:

HEAD/NECK:

- Brain
- (Pituitary)
- Bony orbit
- TMJ
- Osseous bullae
- Sinonasal
- Dental

THORAX:

- Entire thorax
- Metastatic evaluation
- Pneumothorax

ABDOMEN:

- Entire abdomen
- Metastatic evaluation
- Liver
- Pancreas
- Spleen
- Adrenal glands
- Renal
- Urinary tract
- (IVP/IVU)
- (ectopic ureters)
- Pelvic canal

SKELETAL:

Extremities (bilateral):

- Elbow
- Shoulder
- Tarsus
- Stifle
- Hip
- Entire thoracic/pelvic limb

Spine:

- Cervical
- Thoracic
- Thoracolumbar
- Lumbar
- Lumbosacral space
- CT Myelogram

VASCULAR:

- Portosystemic shunt

Other Comments:

For enquiries regarding costs, bookings or other administrative matters, please phone VSC Reception at Tel: (02) 9888 9800.

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