



PEAK PAWS
ADVANCED VETERINARY HOSPITAL

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Referral Form for Outpatient Ultrasound with Dragonfly Imaging

This form may be used for any patient needs an ultrasound; patients will receive an exam and discussion of ultrasound results with a Peak Paws AVH doctor, and the results will be sent to you same day for continued follow-up. Please complete this full form, send complete medical records and labwork, and send any imaging (radiographs, etc) already performed.

Date of Referral: _____ Urgency: ASAP ☐ Urgent ☐ Stable ☐

Referring Veterinarian Information

Name _____ Hospital _____
Email _____ Phone _____

Client Information

Name _____ Address _____
Email _____ Phone _____

Patient Information

Name _____ Age / Date of Birth _____
Breed _____ Color _____ Gender _____
Temperament Notes _____ Weight _____

Outpatient Ultrasound Procedure Information

Patient History / exam findings / diagnostic concerns _____

Differential Diagnoses _____

Any other pertinent info _____

****PLEASE NOTE**** We prefer patients to be relaxed and comfortable for ultrasound. Oral pre-ultrasound sedation is fine; please let us know what you prescribed so we can confirm dosing with the owner. Patients that are not fully relaxed will receive injectable sedation so we can obtain diagnostic images. Estimate for referral exam, abdominal ultrasound, and range for sedation is \$600 - \$700 depending upon sedation used.