# **SUBMIT A CONSULTATION FORM**

Please complete and email this form, with all the medical records to [info@thepetoncologist.com](mailto:info@thepetoncologist.com)

# **INITIAL CONSULTATION REPORT**

Standard (3-4 business days) $300)

Urgent (1-2 business days) $350

Priority (Same-Day) $450 *(excludes after-hours, weekends & public holidays)*

# **DO YOU REQUIRE**

Phone call ($50 additional fee)

One chemotherapy protocol ($50 additional fee)

Subsequent chemotherapy protocol ($50 each)

Chemotherapy drug information sheets – handling, administration, side effects & safety ($15 each or $25 per protocol)

Client handout – chemotherapy drugs in the protocol ($15 each or $25 per protocol)

Client handout – cancer type ($15 each)

Client handout – chemotherapy in dogs & cats ($15)

Client handout – handling chemotherapy medications at home ($15)

Chemotherapy reconstitution and storage times ($15)

Guidelines for safe handling cytotoxic bodily wastes in veterinary patients ($15)

Chemotherapy flow chart ($0)

Chemotherapy body surface area (BSA) chart ($0)

Chemotherapy client consent form ($0)

Patient drop off admission form ($0)

# **TYPE OF PAYMENT**

Direct Deposit, PayID, or BPAY *(Australian Customers)*

Credit Card *(Overseas Customers)*

# **YOUR DETAILS**

**Veterinarian**

First Name:       Last Name:

Practice Name:

Address:

City:

State/Province:       Postal/Zip Code:

Country:

Phone Number:

Email/s for Reports:

Email/s for Billing:

# **PATIENT DETAILS**

Pet’s First Name:       Last Name:

Species:

Sex:  Male Entire  Male Neutered  Female Entire  Female Spayed

Breed:

Age (years):

Weight (kg):

# **PATIENT HISTORY**

Diagnosis:

*(Attach or cut and paste histopathology or cytology results)*

Patient History:

*(Attach or provide a summary of patient history)*

Current Medication/s:

*(Please provide dose, route and frequency (e.g. 2 mg mirtazapine PO q24h)*

Physical Examination Findings:

Blood Tests and other Laboratory Results:

*(Attach or cut and paste)*

Imaging Report:

*(Attach or cut and paste imaging report. Alternatively, provide the type of imaging and findings [e.g. three-view chest x-rays revealed a large cranial mediastinal mass])*

Regional Lymph Node Evaluation:

*(Cut and paste or attach findings/results. Alternatively, describe size, consistency and if applicable, any laboratory testing results [e.g. left popliteal lymph node enlarged and firm, approximately 3-cm diameter, cytology performed at the laboratory was reactive])*

Do you have any Questions or Comments?

Thank you! I look forward to assisting you treat your cancer patients.

**The Pet Oncologist**

Dr. Catherine Chan BVSc (Hons I)

FANZCVS (Veterinary Oncology)

Diplomate ACVIM (Oncology)

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