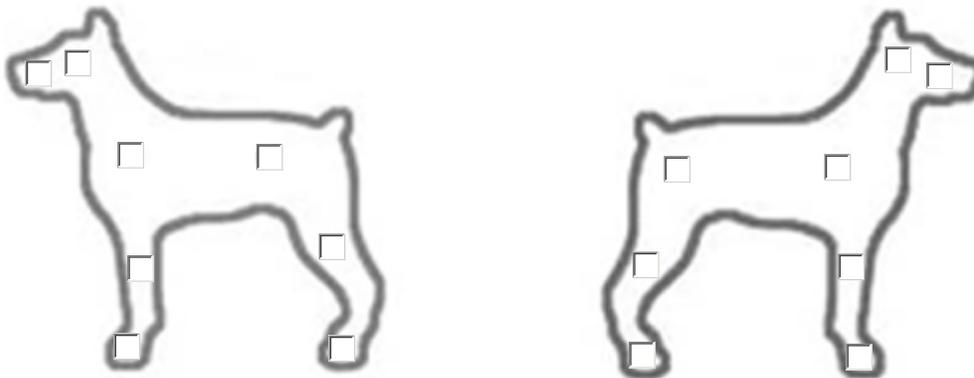


Some of the following items may be hazardous to the animal's safety or may interfere with the MRI exam. Please check the correct answer for each of the following. If you check yes, please give more information. (E.g. Type of material? How long ago?) Use the diagram to indicate the location on the animal's body.

- | | | | | | |
|-----------------------|-----------------------|--|-----------------------|-----------------------|--|
| Yes | No | | Yes | No | |
| <input type="radio"/> | <input type="radio"/> | Aneurysm clip (s) | <input type="radio"/> | <input type="radio"/> | Bone growth/bone fusion stimulator |
| <input type="radio"/> | <input type="radio"/> | Cardiac pacemaker | <input type="radio"/> | <input type="radio"/> | Metallic stent, filter, or coil |
| <input type="radio"/> | <input type="radio"/> | Vascular access port or catheters | <input type="radio"/> | <input type="radio"/> | Shunt (spinal or intraventricular) |
| <input type="radio"/> | <input type="radio"/> | Venous umbrella/IVC filter/Greenfield filter | <input type="radio"/> | <input type="radio"/> | Medication patch (Nicotine, Nitroglycerine) |
| <input type="radio"/> | <input type="radio"/> | Electronic implant or device | <input type="radio"/> | <input type="radio"/> | Any metallic fragment or foreign body |
| <input type="radio"/> | <input type="radio"/> | Magnetically-activated implant or device | <input type="radio"/> | <input type="radio"/> | Hernia repair (mesh patch) |
| <input type="radio"/> | <input type="radio"/> | Neurostimulation system | <input type="radio"/> | <input type="radio"/> | Wire mesh implant |
| <input type="radio"/> | <input type="radio"/> | Spinal cord stimulator | <input type="radio"/> | <input type="radio"/> | Tissue expander (e.g., breast) |
| <input type="radio"/> | <input type="radio"/> | Insulin or other infusion pump | <input type="radio"/> | <input type="radio"/> | Surgical staples, clips, or metallic sutures |
| <input type="radio"/> | <input type="radio"/> | Implanted drug infusion device | <input type="radio"/> | <input type="radio"/> | Bone/joint pin, screw, nail, wire, plate, etc. |
| <input type="radio"/> | <input type="radio"/> | Implant held in place by a magnet | <input type="radio"/> | <input type="radio"/> | Wire sutures or surgical staples |
| <input type="radio"/> | <input type="radio"/> | Any type of prosthesis or implant | <input type="radio"/> | <input type="radio"/> | Joint replacement (hip, knee, etc.) |
| <input type="radio"/> | <input type="radio"/> | Electrodes (on body, head, or brain) | <input type="radio"/> | <input type="radio"/> | IUD, diaphragm, or pessary |
| <input type="radio"/> | <input type="radio"/> | Artificial or prosthetic limb | <input type="radio"/> | <input type="radio"/> | Dentures, partial plates, or braces |
| <input type="radio"/> | <input type="radio"/> | Any metallic fragment or foreign body | <input type="radio"/> | <input type="radio"/> | Tattoo |
| <input type="radio"/> | <input type="radio"/> | Any external or internal metallic object | <input type="radio"/> | <input type="radio"/> | Breathing problem |
| <input type="radio"/> | <input type="radio"/> | Internal electrodes or wires | <input type="radio"/> | <input type="radio"/> | Other implant _____ |
| <input type="radio"/> | <input type="radio"/> | Harrington rods (spinal rod) | | | |

Please mark on the figures below the location of any implant or metal inside of or on the animal's body.



I attest that the above information is correct to the best of my knowledge. I read and understand the contents of this form and had the opportunity to ask questions regarding the information on this form and regarding the MR procedure that I am about to undergo.

Personnel, please read the confidentiality obligations found [here](#) before clicking.

In lieu of a signature, please click this box to agree to the above statements