

## SAFETY SCREENING QUESTIONNAIRE CT-scan (Computed Tomography)

Name : _____	Date of birth: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
First name: _____	Weight : <input style="width: 100px;" type="text"/> kg
	Size : <input style="width: 100px;" type="text"/> cm

	YES	NO
Do you suffer from an allergy to contrast products?	<input type="checkbox"/>	<input type="checkbox"/>
Do you suffer from any drug allergy ? If yes : which : _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you suffer from any other allergy or do you have asthma? If yes, which: _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you suffer from a kidney disease or kidney failure? If yes, which: _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a thyroid disease? If yes, what medication are you taking ? _____	<input type="checkbox"/>	<input type="checkbox"/>
Are you diabetic ? If yes, what medication are you taking (p.e. Metformin)? _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you take anticoagulants ? If yes : which : _____	<input type="checkbox"/>	<input type="checkbox"/>
<b>Female patients only :</b>		
Are you, or could you be, pregnant?	<input type="checkbox"/>	<input type="checkbox"/>
Are you breast feeding?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks / additional information? _____ _____ _____		
<p>By signing below, I confirm to have read the information about this exam and understood and correctly answered this questionnaire and give my consent to the conduct this exam. To better assess my case, I accept that Affidea can request previous reports or exams.</p>		
Signature of patient: _____	Date : <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	