

Radio-iodine treatment of Feline Hyperthyroidism



Please feel welcome to discuss a potential case by phone, email or via our website. Thank you for referring this patient and for completing this form which is also available via our website. Laboratory results, clinical histories and other documents can also be uploaded, or returned with this form via email, fax or post. All reports are emailed; please include a practice email address in addition to your own.

Your Client's Details	
Name	
Address	
Tel	home
	work
	mobile
Email	
✓	
Information Booklet has been given to our client	
Please tick if you would like more copies sending to your practice	

Patient Details	
Name	
Breed	
Age	
Sex	
Last vaccination date	
Insurance company Please ask your client to contact their insurer giving permission for us to discuss their policy, and to let us know when they have done this.	
Policy expiry date	
Already claimed	

Urgency of Referral		✓
Low:	good control, easy to medicate/ feed low iodine diet	
Medium:	reasonable control, but a bit of a struggle to medicate	
High:	drug intolerance suspected/ confirmed	
	insurance time-limit	

Your Details	
Case clinician	
Practice address (Please use a stamp if available)	
Telephone	
Fax	
e-mail (case clinician)	
e-mail (practice)	
Today's date	

What Happens Next?

- we'll call you to confirm we have received your referral (if you haven't heard from us please check we've received it)
- we'll contact your client to confirm we've received the referral
- we'll hold telephone consultations with your client to discuss all aspects including what to expect from radio-iodine, the specifics of their own cat and radiation safety
- once an appointment has been arranged we'll write to you to confirm the date and any pre-appointment tests / investigations we require.

E: enquiries@hyperthyroidcatcentre.co.uk
www.hyperthyroidcatcentre.co.uk

The Hyperthyroid Cat Centre
 433 Birch Park, Street 7, Thorp Arch Estate
 Wetherby, West Yorkshire LS23 7FG

Tel: 0345 544 4300 Fax: 0345 544 0300



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Hyperthyroidism Clinical History		At time of diagnosis	Current clinical situation
Date			
Total T4 (nmol/l) & laboratory			
Palpable goitre (L/R, approx. size, smooth/irregular/cystic)			
Haematology and biochemistry abnormalities as shown (full results, including SDMA*, attached)			
Body condition	Weight in kg		
	Score out of 9		
Cardiac function:	Heart rate		
	Murmur		
	Arrhythmia		
	Heart failure?		
Urinalysis	Specific gravity		
	Protein: creatinine ratio		
	Culture and sensitivity		
Concomitant disease			
Management to date, including dose rates and adverse effects	Felimazole		
	Vidalta		
	Thiafeline		
	Transdermal Methimazole Gel		
	Other		
	Hill's y/d		
	Thyroidectomy, uni/bilateral		
Other Medication			
Other relevant history or comments? Please include additional results/reports/information as appropriate, for example, cystitis, chronic flu, drug reactions/allergies, behavioural concerns such as aggression or fearful in a cattery environment.			

*SDMA is a novel renal biomarker detecting renal function deterioration earlier than creatinine or urine SG. The test is available at IDEXX.