



Consent for Fine Needle Aspiration (FNA)

Should an FNA be recommended, I, _____, understand and acknowledge the following regarding the Fine Needle Aspiration (FNA) procedure to be performed on my pet, _____:

1. **Nature of Procedure:** FNA involves the insertion of a fine needle into a specific area of my pet's body to collect cellular material for diagnostic purposes. It is a minimally invasive procedure.
2. **Purpose:** FNA is performed to aid in the diagnosis of abnormal fluids, masses, or other abnormal tissues found during the ultrasound study.
3. **Risks:**
 - **Discomfort:** The procedure may cause discomfort or pain to my pet, which can be minimized but not entirely eliminated.
 - **Bleeding:** There is a risk of bleeding at the needle insertion site, although this is usually minimal.
 - **Infection:** While rare, there is a small risk of introducing infection at the needle insertion site.
 - **Pneumothorax:** There is a risk of leakage of air from the lung into the chest if sampling from the chest is performed.
4. **Alternative Options:** I understand that alternative diagnostic procedures or tests may be available, including but not limited to biopsy or surgical intervention. The benefits and risks of these alternatives can be explained to me should I request it.
5. **Consent:** I authorize the veterinarian and their team to perform the FNA procedure on my pet. I understand that sedation or anesthesia may be necessary depending on my pet's temperament and the location of the mass.
6. **Follow-Up:** I understand that further diagnostic tests or treatments may be recommended based on the results of the FNA.
7. **Financial Responsibility:** I agree to assume financial responsibility for the costs associated with the FNA procedure and any necessary follow-up care.

By signing below, I acknowledge that I have read and understood the information provided to me regarding the FNA procedure and its associated risks and benefits. I consent to the performance of the FNA on my pet under the terms outlined above.

Pet Owner's Signature: _____

Date: _____