

**GatorVetImaging**  
**Small Animal PennHip and OFA Request Form**  
 Phone: (352) 273-8585 Fax: (352) 294-9877 Email: GVI@vetmed.ufl.edu  
 Website: www.GatorVetImaging.com

**Client, Patient, and Veterinarian Information:**

**Client and Patient**

**Veterinarian**

Client Name: \_\_\_\_\_  
 Address, Street \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Client Phone(s): \_\_\_\_\_  
 Patient Name: \_\_\_\_\_

Veterinarian: \_\_\_\_\_  
 Hospital: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Species: Canine                      Sex:  Female  Female Spayed  Male  Male Neutered  
 Color: \_\_\_\_\_                      Weight (kg): \_\_\_\_\_                      Date of Birth: \_\_\_\_\_  
 Breed: \_\_\_\_\_                      Date Last Rabies Vaccine: \_\_\_\_\_

**Examination Request: Check Exam to be Performed**  
**\*\*Fees include Certification Fees; Radiograph(s) Shipping & Handling**

- |   |   |
|---|---|
| <input type="checkbox"/> <b>PennHip (\$350)</b>                           | <input type="checkbox"/> <b>OFA Pelvis (\$272)</b>            |
| <input type="checkbox"/> <b>PennHip and OFA Pelvis (\$460)</b>            | <input type="checkbox"/> <b>OFA Pelvis and Elbows (\$400)</b> |
| <input type="checkbox"/> <b>PennHip and OFA Pelvis and Elbows (\$613)</b> | <input type="checkbox"/> <b>OFA Elbows (\$244)</b>            |
| <input type="checkbox"/> <b>Tattoo (optional) (\$30)</b>                  |   |

**Note: Any questions regarding the examination please email or call GatorVetImaging for assistance or visit the website, for additional information.**

**List Previous Surgeries, Anesthetic Agents Used and Complications:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**I attest that the above information is correct to the best of my knowledge.**

\_\_\_\_\_  
**Veterinarian's Signature**

\_\_\_\_\_  
**Date**

