

# PET Technologist Worksheet

Patient Name:

MMI:

Age:

## Indication For Exam / Symptoms:

History of cancer?

Organ/Side of cancer:

Date first diagnosed:

Pertinent surgery:

Date of last chemotherapy:

Date of last radiation therapy:

Patient currently taking medicine to increase RBC or WBC count?

Other cancer history:

## Screening:

Diabetes Mellitus

Glucose Level

If glucose >200 or <70 patient will need to be rescheduled (contact ordering clinician).

Caffeine <24hrs

Time of last meal:

## F18-FDG:

Assayed Dose:

Time:

Injection Time:

Residual Dose:

Time:

Imaging Time:

Administered Dose:

Time:

Uptake Time:

mins

Injection Site:

Tech Obtaining History:

Tech Performing Scan:

**Tech Verification:**

Standard Protocol

Y N

Patient ID

Y N

Procedure

Y N

Positioning

Y N