



Veterinary Nursing Program

Physician Visit Checklist for Pregnancy

(This is a required form if the student becomes pregnant before or while attending the Veterinary Nursing Program.)

My physician has discussed the following with me concerning potential risks to myself and the fetus:

1. Exposure to anesthetic gases
2. Exposure to teratogens, including cytotoxic compounds, chemical agents, sterilizing agents, cleaning agents, preserving agents and fixing agents
3. Exposure to hormones (e.g., prostaglandins and progesterone)
4. Exposure to ionizing radiation and other sources of radioactive materials
5. Exposure to zoonotic diseases including, but not limited to, leptospirosis, salmonellosis, toxoplasmosis, brucellosis, cat scratch disease, fungi, psittacosis, rabies, Lyme disease, tuberculosis, and West Nile virus
6. Traumatic injury, including, but not limited to, bites, kicks, scratches, and possible electrical hazard exposure from equipment

I have discussed with my physician that I understand that as a Veterinary Nursing student, I have inherent risks in my profession, and I accept the responsibility of understanding the precautions necessary to decrease my risk and exposure as I complete my educational process in the Veterinary Nursing Program.

Student Signature: _____ Date: _____

Physician's name (print): _____

Physician's Signature: _____ Date: _____

Hospital, clinic, or address: _____

City, State _____