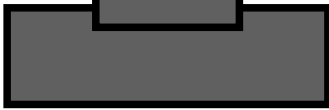


Advanced Veterinary Medical Imaging

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 2340 S. Sepulveda Blvd • Los Angeles • CA • 90064
 Ph: 800-717-2864
 reception@avmi.net
 www.avmi.net

Estimate for Services	
DATE 11-19-2018	EST NUM 82653

BILL TO
 Edward [REDACTED]



CUSTOMER ID: 277013
 ANIMAL: Charlie
 CLINICAL #:

DESCRIPTION	QTY	PRICE	TOTAL
Consultation - Thyroid	1 → 1	\$75.00	\$75.00 → \$75.00
Planar Thyroid Scintigraphy	1 → 1	\$0.00	\$200.00 → \$200.00
I-131 Treatment	1 → 1	\$0.00	\$495.00 → \$495.00
Hospitalization-NucMed	4 → 7	\$50.00	\$200.00 → \$350.00
Lact. Ring. Soln. 1000ml (SQ)	0 → 6	\$2.75	\$0.00 → \$26.50
Lactated Ringers Solution (+KCL QS 20 mEq/L)			
Feline Combo Plus Profile - IDEXX	0 → 1	\$270.00	\$0.00 → \$270.00
Urinalysis - IDEXX	0 → 1	\$74.23	\$0.00 → \$74.22
Radiographs-Thorax (1 view)	0 → 1	\$130.00	\$0.00 → \$130.00
Radiographs-Additional View	0 → 1	\$70.00	\$0.00 → \$70.00
Lact. Ring. Soln. 1000ml	0 → 2	\$10.00	\$0.00 → \$30.00
IV Adm. Set-15d/ml	0 → 1	\$4.52	\$0.00 → \$4.52
Needle(s)	0 → 10	\$0.25	\$0.00 → \$2.50
Towel	0 → 1	\$6.00	\$0.00 → \$6.00
iCat Web Cam Set Up	0 → 1	\$0.00	\$0.00 → \$0.00
Subtotal			\$970.00 → \$1733.74
Tax			\$0.00
Total			\$970.00 → \$1733.74
Required Deposit			\$0.00

This estimate is not a firm quote and as such is subject to change due to unforeseen circumstances. Due to the complex nature of most cases we see, the final charges may vary from this estimate.

We will make every effort to inform you should your pet's changing condition require substantial procedures or diagnostic work not outlined in the above estimate.

As part of our ongoing commitment to your pet's health, we encourage you to call if you have any questions. Please call the hospital at (949) 559-7289.

We accept the following forms of payment: MasterCard/VISA, American Express, Discover, CareCredit, and Scratchpay. An additional 5% surcharge is added to bills paid with either CareCredit or Scratchpay to offset the additional fees these companies charge us when clients elect their services. We do NOT accept personal checks.

I have read, understand and accept the estimate and terms above.

Owner (or agent of the owner) signature: Date: 11-19-2018

