

PRE-ANESTHETIC CONSENT FORM

Patient: _____ Client: _____ Date: ___/___/___

As the owner or agent of the above animal, I hereby grant permission for the following procedure(s) to be performed by the admitting veterinarian or designated staff

_____ Phone Number Where I can be reached today: _____

I understand that my pet is scheduled for a procedure that requires anesthesia. I realize that any anesthetic procedure involves certain risks. To better evaluate my pet's ability to undergo anesthesia, certain laboratory tests may be useful in determining potential risk factors that could endanger my pet. I understand that pre-anesthetic blood work does not guarantee the absence of complications. It may, however, reduce the risk of anesthetic or require changes in the anesthetic protocol by identifying certain conditions (such as diabetes, liver or kidney disease, etc.) prior to undertaking the procedure, I certify that I have notified the doctor of any pre-existing conditions, such as seizures, allergic reactions, previous anesthetic complications or other medical or surgical problems.

Signature: _____ Date: ___/___/___

Pre-anesthetic blood screening enhances our ability to evaluate the health of your pet. This may help us avoid possible complications or lead to postponement of the procedures to be performed. Cost \$90 Yes__ No __

IV catheter and fluids are highly recommended. Fluids maintain blood pressure as well as hydration, and in an emergency situation the IV catheter provides venous access. Cost \$60 - \$75 Yes __ No __

We recommend permanent identification with a petlink microchip. Fee \$60 Yes __ No __

We recommend all vaccines be up to date and current on heartworm prevention. Is your dog current on heartworm preventative? Yes: __ No: __ . Is your pet current on vaccines, if not, do you want to update your pet's vaccines? Yes __ No __

Heartworm/Lyme/Anaplasma Test \$37 Yes __ No __ FeLV/FIV test for cats \$43 Yes __ No __

Dentals: Do you want to be called with an estimate if your pet requires extractions? Yes__ No __

If you pet is having a lump or mass removed, do you want the sample sent in to the lab for biopsy? Cost approximately \$210. Yes__ No__

*** Please note: There will be additional fees for spays when the patient is obese, pregnant or in heat, or for neuters that are cryptorchid as determined at the time of surgery. There is an extra charge for all dogs over 2 years old. Do you want to be called with an estimate before proceeding with the procedure? Yes __ No __

Would you like pain medication to take home with your pet? Yes __ No __ Specify Pills or Liquids. We give a pain injection during surgery that lasts 12 hours.

If the hospital staff cannot reach me by phone, please do the following: Please treat my pet as deemed necessary by the attending veterinarians, and I will be responsible for any associated costs. Yes __ No __