

SURGICAL/ANESTHETIC INFORMED CONSENT FORM:

Procedure: _____

Pet's Name: _____

Breed: _____

DOB: _____ Sex: _____

FOOD - When did your pet eat last? _____ AM / PM (Please inform us if your pet has had ANY food or treats. Vomiting during or after surgery is common and if they aspirate food, they can have severe anesthetic complications.)

MEDICATIONS - Has your pet has any medication this morning? YES NO

If yes, which medication and when? _____

PRE-ANESTHETIC LAB WORK - your pet will be undergoing a surgical or dental procedure under sedation or general anesthesia today. In order to recognize any underlying abnormalities your pet may have, which may put him/her at a greater anesthetic risk, we recommend having a pre-anesthetic blood profile run on your pet. This consists of a CBC, which will check blood cells, and a small chemistry panel, which will check blood glucose, protein, and kidney and liver function. These blood tests will help us to assess the health status of your pet more completely and determine if there are any additional precautions we need to take before surgery. If an unforeseen problem becomes apparent on the bloodwork, surgery/dentistry may not be performed at this time. In some cases, medical need will override your preferences. (\$72.50 - \$150.00 depending on age or medical needs of your pet)

_____ YES, I consent to the pre-anesthetic bloodwork for your pet.

_____ NO, I decline the pre-anesthetic bloodwork for your pet and understand the risks above.

IV CATHETER IS REQUIRED FOR ALL PATIENTS OVER 6 YEARS OLD. If your pet is younger than 6, IV Catheter is medically recommended as this provides direct IV access in case of emergency.

_____ YES, I consent to IV placement for your pet protection (if under 6 years old)

_____ NO, I decline IV placement and understand the risks involved.

SURGICAL LASER - Advantage of Surgical Laser is Reduced Pain. The laser beam seals nerve endings as it cuts through tissue. This reduces the amount of pain your pet feels during and after surgery. The cost for Laser is \$55.00.

_____ YES, please use the surgical laser on your pet's incision

_____ NO, I decline the use of the surgical laser on your pet

MICROCHIP - While under anesthesia, we can safely insert a microchip under your your pet's skin, between his/her shoulder blades, which offers permanent identification and helps assist in your your pet's safe return in the event that he/her is lost or stolen. Cost for this protection is \$50.00.

_____ YES, please protect your pet by insert a microchip

_____ NO, I decline/or your pet already has a microchip

E-COLLAR "CONE" - Helps prevent any chewing or licking at surgical site. Cost is \$12.50-\$17.50

(If during recovery, your pet starts licking at the site, this will not be optional.)

_____ YES, send your pet home with an e-collar for their protection

_____ NO, I decline the e-collar,& understand that if your pet does any damage to the surgical site I will incur additional costs.

PAIN CONTROL - Appropriate pain medication is routinely given to the patient before and after all surgical and dental procedures which lasts for 12 hours, Would you like additional pain control for your pet's comfort while healing?

_____ YES, please provide additional pain control for your pet's comfort while he/her is healing

_____ NO, I decline additional Pain Control

ADDITIONAL SERVICES – Other services that can be performed while your pet is anesthetized.

_____ Nail Trim \$16.00

_____ Ear Cleaning \$45.00

_____ Anal Gland Expression \$25.00

_____ Dental Cleaning (\$120-\$200 depending on size)

VACCINATIONS – For the protection of your pet and our staff, if your pet does not have current vaccines on file with El Toro Animal Hospital or verification of current vaccines cannot be obtained from a licensed veterinarian, or if your pet has evidence of Fleas, Ticks or Worms then your pet will be vaccinated/treated to our hospital protocol at your expense.

I have been advised as to the nature of the procedures or operations and the risks involved, including the possibility of death. I understand that I am encouraged to discuss any concerns I have about these risks with the attending doctor before the procedure(s) is/are initiated. Our veterinarian will perform a pre-anesthetic physical exam and that the staff will be monitoring my pet at all times while under anesthesia in order to minimize anesthetic risk. I understand that no guarantee can be made legally or ethically to me regarding the outcome of any procedure performed.

I am the owner of the above described animal and have the authority to execute this consent and authorization. I also assume full financial responsibility for this pet and understand that all charges shall be paid upon release of your pet from El Toro Animal Hospital.

I have read, acknowledge and do fully understand this authorization and consent.

Signature: _____

Date: _____