

Chart #	_____
Pet Name	_____



SURGICAL CONSENT FORM

Like you, our greatest concern is the well-being of your pet. Many conditions including disorders of the liver, kidney, or blood are only detectable through blood or urine screening. Such tests are **especially important** before any general anesthesia or surgery.

Unlike some clinics, we do not mandate these test be performed prior to your pet's procedure, but do **highly recommend** them. Our veterinarians may suggest other specific tests, in addition to routine screening, that may be appropriate for the age and condition of your pet. As an additional safety factor, placement of an intravenous catheter is preferred as well. The costs of these items are listed. To confirm that you have read and understand these recommendations, please initial those items listed below.

Recommended test or procedure	Cost	Initial	
		Yes	No
Pre-Anesthetic CBC with Chemistry Panel	\$109	_____	_____
Pre-Anesthetic CBC only	\$47.	_____	_____
Pre-Anesthetic Urine Screen	\$37.	_____	_____
Intravenous Catheter Placement	\$63	_____	_____

We are committed to providing the highest level of comfort for your pet. Would you like to have medications prepared for your pet's post-operative pain management? In most instances, the cost for this medication will be between \$25.70 and \$62.54, depending on the size of your pet. **Yes**_____ **No**_____

Would you also like your pet to receive a post-operative cold laser treatment to diminish pain, reduce swelling and enhance healing time for an additional \$49.00. **Yes**_____ **No**_____

While your pet is sedated would you like your pet to receive a fluoride dental treatment for an additional \$10 ? **Yes**_____ **No**_____

Would you like your pet to be anesthetized using Sevoflurane, a lower-risk anesthetic recommended for geriatric pets, for an additional \$33.50 . **Yes**_____ **No**_____

*Elizabethan collar **YES**_____ **NO**_____

I consent to, and agree to pay in full for all services requested and rendered, including any deemed necessary by the Veterinarians for medical or surgical complications or any unforeseen circumstances.

Signed: _____
Owner or agent

Date: _____

Phone number you can be reached between 9a.m. and 6p.m. today _____

Would you like to receive a post-surgical update by phone call or text message?

Yes: Phone call _____ Text message _____ Both _____ **No** _____

*There may be an additional charge if your pet is in heat or pregnant*All patients will be ready to go home after 3p.m. unless otherwise specified.