



Surgery Consent Form

Owner's Name _____

Address _____ City/State/Zip _____

Home Phone Number _____ Phone Number _____

Email _____

Pet's Name _____

Species _____ Breed _____ Color _____

Procedure _____

Did your pet eat this morning? _____ Yes _____ No

*All Canine Patients are required to have the Bordetella Vaccination. If your pet has not had one you will need to provide proof of, or we will have to administer this vaccination. **The cost for this vaccination is \$29.00.**

Pre-Anesthetic Blood Testing

Like you, our greatest concern is the well-being of your pet. Before putting your pet under anesthesia, we will do a physical examination. However, many conditions including disorders of the liver, kidneys, or blood are not detected unless blood testing is performed. For the safety of your pet, we highly recommend blood screening before any anesthetic procedure. **The fee for this blood work is \$85.00.**

_____ Accept, I want my pet to have the pre-anesthetic blood screen.

_____ Decline, I do not want my pet to have a pre-anesthetic blood screen. I understand there may be an increased risk during anesthesia.

Microchip Implantation

We also offer microchip insertion for your pet while your pet is under anesthesia is the perfect time for insertion. The cost of the chip is \$59.00, and this does not include registration. _____ Accept _____ Decline

Consent and Release

I hereby consent and authorize the Veterinarian on duty and designated assistants to prescribe for and administer treatment as is considered therapeutically or diagnostically necessary. I also consent to the administration of anesthetics and surgical procedures requested or as deemed necessary by the attending veterinarian. I understand that veterinary care during nighttime hours and/or weekends I provided during these hours.

I hereby certify that I have read and fully understand the authorization for medical and or surgical treatment, the reasons why surgery is necessary, its advantages and possible complications, as well as possible alternative modes of treatment. The Veterinarian will use reasonable precautions for the well-being of this animal but will not be help liable for conditions beyond his or her control.

A health care plan for the amount of services will be provided upon request. A deposit may be required prior to services. **All Charges are due and payable upon patient's release.**

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Signature