

## Consent to Anesthesia/Surgery/Dentistry/Boarding

Date: \_\_\_\_\_ Owner's Name: \_\_\_\_\_ Pet Name: \_\_\_\_\_

Procedure: \_\_\_\_\_ Sedation/Anesthesia Needed? Yes/No

The undersigned hereby warrants that he/she is the owner or authorized agent of the above-named pet and does hereby request, consent and authorize Dogwood Animal Hospital, its veterinarians, personnel and agents to board, hospitalize and to administer vaccinations, medication, tests and surgical procedures, anesthetics or treatments of said pet. During dental cleanings, for the health of the pet, minor extractions may be performed without prior discussion with owner. Major extractions will not be performed without the owner's explicit consent.

**Additional Charges Will Apply to Extractions.**

### Sedation and Surgery

*For pets over 8 years of age, there must be current lab work (within 6 mo. or sooner).* It is strongly advised for younger patients as a baseline value or to rule out possible causes for complications: -

**Circle Accept/Decline below:**

Pre-Anesthetic Profile and CBC	\$80.74	<u>Accept/Decline</u> (under 8 yr.)
<u>Or</u> Diagnostic Profile and CBC	\$105.13	<u>Accept/Decline</u> (under 8 yr.)
IV Catheter and Maintenance Fluids	\$35.00	<u>Accept/Decline</u> (under 8 yr.)
Heartworm Test	\$38.00	<u>Accept/Decline</u>

Dogs and Cats with heartworms have an increased risk of complications with anesthesia

FelV/FIV– Cats Only	\$38.10	<u>Accept/Decline</u>
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Added risk of complications during surgery and recovery period

### Pain Control

*Pain control is not optional for surgery and some dental procedures. The probable costs will be:*

Pre-surgical Injections	\$17 – 27 (depends on species and wt.)
Take Home Meds	\$7 – 25 (depends on species and wt.)

### Other Considerations

Microchip	\$33.82	<u>Accept/Decline</u>
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**NOTE: All pets admitted must be current on their vaccinations and must be free of external parasites. Any pet found to have fleas or ticks will be treated at owner's expense.**

I hereby authorize Dogwood Animal Hospital to perform such diagnostic and surgical procedures described above. The nature of such services has been described to me to my satisfaction. I realize there is always some risk involved with anesthetics and neither guarantee nor warranty can ethically or professionally be made regarding the results or cure. I also authorize the hospital staff in an emergency situation to follow through with such procedures as are necessary for the wellbeing of my pet on a continuing basis until further communication with me. I understand that I assume full financial responsibility for all services rendered. *I have read this information, circled the Accept/Decline myself, and approve.*

Signed by owner: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_