

GOD'S CREATURES ANIMAL HOSPITAL
SURGICAL and/or ANESTHESIA CONSENT #1

Owner's Name: _____ Date: _____

Please list the **phone number(s)** at which you can be reached at **today** in case of an emergency:

Animals Name: _____ **Description:** _____

Has your pet been **sick or injured** in the past two weeks? _____

Did your pet eat this morning (circle one): Yes No

Does your pet have any known allergies? Yes No

Surgical procedure **to be performed:** _____

If your pet has not had vaccinations within the last year, we highly recommend that you have **your pet be vaccinated and checked for parasites** to ensure that your pet remains healthy. *It is also recommended because parasites can be transmitted to you and your family, especially children.* **Date of last rabies vaccine** _____ (A rabies vaccine will be given if there is no proof of current vaccination) it is **required by law**.

_____ Accept the following procedures:

_____ Complete examination, vaccinations and tests as needed

_____ Continue vaccination series _____ Heartworm test _____ Stool Parasite Check

_____ Feline leukemia/AIDS test

_____ Decline any preventative health care for my pet and accept responsibility for any risks.

Procedure requiring anesthesia are always associated with a **certain amount of risk**. Like you, we want to minimize that risk as much as possible. In order to do this, we recommend **pre-anesthetic blood testing**. This requires a small sample of blood to be drawn and tested on the day of surgery. The cost for pre-surgical blood work described below is **\$68. Blood work Includes: A CBC which checks for blood disorders, including but not limited to anemia, infection and clotting problems. A Blood Chemistry 10 which checks for low/high blood sugar, liver disease and kidney disease.** Please indicate your preference: _____ Accept _____ Decline

Dr. Jeni recommends **SENIOR blood work** on all pets **seven years of age or older** annually. This option has more to offer in an economical package. Total Body/CBC/Full Chemistry (including electrolyte levels) which is a more complete look at organ function and a thyroid screening. The cost of the blood work described above is **\$94.75. Must be pulled the night before surgery for this price.** Please indicate which is your preference for the surgical procedure planned: _____ Accept _____ Decline

You have the option to have **IV catheter and fluids** during the procedure at a cost of **\$45.75** _____ Accept _____ Decline **Propofol** is recommended for *Senior and Heart Patients*. It is a short acting Induction agent that is safer. Cost of Propofol is **\$52.75** for pets <65 #; **\$68.75** for Pets >65#'s _____ Accept _____ Decline Fluids Additional **\$28.75**

Because **heart disease** is so vital when sedating an animal we recommend a pre-surgical **ECG** screening. This allows for a measure of the hearts ability to work properly prior to the procedure. The cost of the pre-surgical ECG is **\$48.75.** _____ Accept _____ Decline

Occasionally puppies and kittens will not loose their **baby teeth** on schedule, which results in potential dental problems. We recommend extracting these unwanted teeth while the pet is anesthetized. The additional cost is **\$12.75** per K9 teeth and **\$5.75** per incisor. _____ Accept _____ Decline **Adult teeth** Vary from \$8.75 up to \$48.75 _____

Res Q Microchip is a small microchip implanted beneath their skin for permanent identification if he/she gets lost. The cost of the Rescue Microchip is **\$41.75** _____ Accept microchipping _____ Decline microchipping

Dr. Jeni Evans does recommend an **E-Collar** after any feline or k9 spay or neuter, however it is *optional*. The prices for an E-Collar are: Small-Large are **\$16.75** X-Large is **\$19.75** _____ Accept _____ Decline

** I understand if my female is found to be **in heat** there will be an additional charge at time of spay surgery. **

I hereby authorize the veterinarian to examine, prescribe for, and perform surgery on the pet above.

I assume responsibility for all charges incurred at the case of this animal. I also understand that these charges will be paid at the time of release and that a deposit may be required for surgery.

Signature: _____ Date: _____