

Canine Surgical and Anesthesia/Sedation Consent Form

Owner's name: _____

Pet's name: _____

Procedure: _____

1. Dogs over 7 years of age (and large breed dogs over 5 years of age) REQUIRE pre-anesthetic bloodwork.

2. If your dog is under 7 years of age, the pre-anesthetic bloodwork is OPTIONAL. The cost of the bloodwork is approximately \$50 and checks kidney, liver, blood sugar, and protein levels.

_____ Yes, I want my dog to have optional bloodwork.

_____ No, I do not want my dog to have optional bloodwork.

3. If your dog has fleas, Heritage Animal Hospital, Inc. will apply topical and/or oral flea medication while staying in the hospital. You will be held responsible for the cost of medications.

4. If your dog tests or has already tested negative for heartworms, do you want heartworm prevention?

_____ Yes, I would like _____ month(s) of _____.

_____ No, I do not need/want heartworm prevention.

5. To reduce the risk of your pet licking and/or chewing at the surgical incision site, would you like an e-collar to be sent home? The cost is \$12.50-17.50 (depending on the size).

_____ Yes, I would like an e-collar to take home.

_____ No, I do not need/want an e-collar to take home.

I understand, and accept that when anesthesia/sedation is involved, there are always inherent risks, including death. I understand the doctors and staff will take all necessary steps to reduce this risk by choosing the appropriate anesthetic, monitoring equipment, and use of fluid therapy. I will not hold the doctors and staff of Heritage Animal Hospital, Inc. responsible for any complications associated with anesthesia/sedation. I understand that I assume financial responsibility for all services rendered. Full payment is expected at the time of discharge.

****There may be additional charges for dogs undergoing a spay who are in heat or pregnant. If the cost exceeds more than 20% of the given estimate for ANY procedure, we will require your authorization before proceeding. If we are unable to contact you, we will proceed as necessary in the exercise of the veterinarian's professional judgment.**

Owner signature: _____ Printed name: _____

Emergency contact telephone number: _____