



Surgical Consent Form

Date: _____

Client Name: _____ Pet's Name _____

Client Number : _____ Text or Call: _____

Procedure(s): _____

Pre Anesthetic Physical Exam, IV catheter, and anesthetic monitoring (\$150 value): *Included*

Pre Anesthetic Blood Work

Pre-anesthetic blood work checks the internal organs and blood count and is a vital part of safe anesthesia. Help us provide the best level of care for your pet by choosing to perform blood work prior to anesthesia or sedation.

PLEASE CHECK ONE

Chemistry Panel w/ Complete Blood Count (CBC) **\$145**

- Basic internal organ screen (liver, kidneys), electrolytes, and full red and white blood cell count

Note – we may require this blood work for some procedures and situations

I decline blood work and I understand there are **increased risks during anesthesia.**

Intravenous (IV) Fluid Support During Anesthesia

Administration of IV fluids during anesthesia helps maintain blood flow to the organs and keeps blood pressure normal. IV fluid support greatly increases the safety of anesthesia.

PLEASE CHECK ONE

Administration of IV fluids during anesthesia (covers fluids and IV pump use for short procedures) **\$71**

***Please note some procedures and conditions will need additional IV fluid support for longer periods of time which will be at additional cost. Your pet's doctor may require IV fluids for anesthesia.**

I decline IV fluid support and understand there are **increased risks during anesthesia**

Additional Services While Under Anesthesia

Toe Nail Trim - \$10

Ear cleaning if needed - \$25

Microchip - \$70

Feline Leukemia/FIV test - \$52

Express anal glands - \$20

Histopathology (Masses only) - \$160- \$350

Heartworm test - \$55



ANESTHESIA/SEDATION/PROCEDURE AUTHORIZATION

Please initial after each statement below:

- I authorize the performance of any procedures or treatments that are deemed immediately necessary for the health and wellbeing of my pet in the professional opinion of the veterinarian. _____
- I hereby authorize anesthesia/surgery for my pet. I understand that some risks always exist with anesthesia and/or surgery. My signature on this consent form indicates that any questions have been answered to my satisfaction. While Brimfield Veterinary Services provides the highest quality of anesthesia monitoring and surgical services, I understand that there are rare complications associated with any anesthetic or surgical procedure. I have been advised that there is a risk of death, complications, or side effects every time an anesthetic is used and that I have been advised of the possibility. I acknowledge these risks and understand that the veterinarians and hospital staff will try to minimize such risks. I will not hold Brimfield Veterinary Services, the veterinarians, or any staff member liable for any complications that may arise. _____
- I understand that if circumstances arise, Brimfield Veterinary Services will preform life saving procedures if needed, on my pet. _____
- I understand that I assume financial responsibility for all services rendered. _____

I have read and understand this authorization.

Owner/Authorized Agent Signature _____ **Date** _____
Technician/DVM witness initials _____