



SURGICAL ADMITTING & CONSENT FORM

Owner's Name: _____ Date: _____

Pet's Name: _____

Emergency Phone # _____

(My Emergency Number Where I Can Be Reached Today Between 9:00am & 3:00pm)

Procedure To Be Performed: _____

YES NO

My Pet Was **FASTED** In Preparation For Anesthesia.

ANESTHETIC SAFETY: Our protocol for general anesthesia is to use the safest anesthesia available. For most procedures, we will establish a secure airway by placing a breathing tube in the trachea and then maintain a balanced anesthetic depth with oxygen and gas. We will monitor your pet's heart rate and blood oxygenation levels throughout the procedure.

CAN I IMPROVE THE SAFETY OF PUTTING MY PET UNDER ANESTHESIA? **Y E S**

Pre-anesthetic blood screening, EKG screening, and an IV catheter with IV fluids are minimums for human anesthesia and should be in veterinary medicine. Unfortunately, while these safety measures are available for your pets, the additional time it takes and the additional costs has traditionally prevented their widespread use in the past.

We want you to know what is best and then allow you to choose your level of care and risk.

Please check the pre-anesthetic safety measures that you would like for your pet:

(see the sheet given to you by the receptionist that explains each service)

ACCEPT DECLINE **PRE-ANESTHETIC BLOODWORK** \$ 66.70 (Pets under 7 yrs of age)
\$ 96.50 (Pets over 7 yrs of age)

ACCEPT DECLINE **EKG RHYTHM SCREENING** \$ 56.50

NOTE: Aggressive or uncooperative patients may prevent us from performing some, if not all, of these pre-surgical tests. In the event that we cannot perform the selected pre-anesthetic safety procedures, we will attempt to contact you at the emergency phone number you give at the top of this form to discuss the options.

YES NO If we cannot contact you, do you consent to proceed with the scheduled procedure if the doctor feels that it is reasonably safe to proceed?

ADDITIONAL SERVICES REQUESTED WHILE ANESTHETIZED:

- MICROCHIP IMPLANT** \$ 52.50. Ensures secure identification for your pet. This includes the price of the chip and registration fee.
- NAIL TRIM**
- If a **LUMPECTOMY** is being performed, the doctor strongly suggests sending the sample to the lab for a histopath (identifying the growth by examining the cells under a microscope). This will let us know if the growth is either benign or malignant. The cost is \$ 83.00.

CONSENT: I have been advised as to the nature of the procedure or surgery described above and the risks involved. I authorize Destin Animal Clinic's doctors and staff to use appropriate anesthesia and medications to perform the described procedures. I am fully aware that there are inherent risks with anesthesia and surgery and that results cannot be guaranteed. I further realize that I am responsible for full payment at the time of discharge.

As certain conditions may necessitate a change of plans, we will attempt to contact you. In the event that I am unable to be reached, I consent to having Destin Animal Clinic take the steps necessary to help ensure the safe care of my pet(s).

Signature: _____ Date: _____