

Surgery and Anesthesia Consent

Pet's name: _____ Species: _____

Age: _____ Sex: _____ Color: _____

Procedure: _____

My pet has been fasted: YES NO

My pet is allergic to: _____

My pet is on Heartworm Prevention: YES NO Flea Prevention: YES NO

Last given/applied: (HWP) _____ (Flea Prev) _____

My pet is on these other medications including OTC medications (ex. Aspirin, Ibuprofen, Tylenol, etc.)

Dose/Frequency/Last Given:

While your pet is under anesthesia we maintain a constant record of vital signs including heart rate, respiratory rate, oxygenation levels, blood pressure, and temperature. This helps us to detect potential anesthetic complications early and treat them before they become life threatening.

- I have been informed that there are risks and complications associated with anesthesia and surgery.
- I acknowledge that my pet may have an underlying condition that has not been detected with diagnostic tests/tools to date, and I further understand that during the course of the operations or procedures, unforeseen conditions may arise that could necessitate the performance of additional procedures.

I release Pine Woods Animal Hospital, P.C. and staff from any liability relating to unforeseen complications arising from surgery and/or anesthesia. _____ (PLEASE INITIAL)

I will be available at the phone numbers listed below at all times during the day of the procedure. If the doctors cannot reach me by phone, I authorize any treatment deemed necessary for the health of my pet. _____ (PLEASE INITIAL)

- I am the owner (or agent for the owner of legal age) for the animal described above and I have the authority to execute this consent.
- I hereby authorize and direct the veterinarians of Pine Woods Animal Hospital, P.C. to perform the procedure(s) described above.
- I agree to pay in full for services rendered, including those deemed necessary for medical or surgical complications, or any other unforeseen circumstances.

The nature and purpose of the procedure(s) to be performed on my pet has been clearly explained and I have no further questions at this time. _____ (PLEASE INITIAL)

Owner's Name (or agent): _____ Date: _____

Signature: _____

Phone #: _____ Alternate Phone #: _____