

CARBON COUNTY VETERINARY HOSPITAL
Warner McFarland, DVM ~  ~ Molly Murphree, DVM

ANESTHESIA/SUGERY/TREATMENT CONSENT FORM

Owner Name: _____ Date: _____

Pet Name: _____ Sex: _____ Age: _____ Breed: _____

EMERGENCY CONTACT PHONE NUMBERS: (1) _____ (2) _____

Procedure(s): _____

I am the owner, or representative for the owner, of the animal described above and have the authority to execute this consent.

Pre-Surgical Blood Screen:

Your pet is with us today for a procedure that will require anesthesia. Because some risk of injury or death always exists with anesthesia and/or surgery, it is advisable to perform a pre-surgical blood count and basic organ function tests before surgery. We recommend a Pre-anesthetic Profile for all pets 5-7 years of age for an additional cost of \$57.48. We require a General Chemistry Panel for all pets 8 years of age and older at an additional cost of \$107.55. These tests can help us assess your pet's ability to undergo anesthesia and surgery and help us to detect conditions that can contribute to complications and anesthesia (e.g., dehydration, diabetes, kidney/liver disease). Please initial: _____

Laser Surgery:

You pet's surgical procedure can be performed with traditional methods of a CO2 surgical laser. The benefits of using the surgical for your pet are: less pain, less swelling, less bleeding, reduced risk of infection and quick recovery. There is an additional charge of \$30.00 for the CO2 laser. Please initial:

REQUEST LASER _____ DECLINE LASER _____

Control of Pain:

Your pet has the same type of nervous system as we do and will perceive pain in a similar way, but cannot express pain the same way we do. The control of pain is a very important aspect of the surgical procedure. A pain free animal requires a lower level of anesthesia throughout the procedure. This increases safety for your pet and helps ensure a smooth and speedy recovery. We begin our pain management prior to surgery and into the postoperative recovery period until discomfort is no longer an issue. The initial pain management protocol is an injection of pain medication for \$21.50. If needed, a seven day course of out-patient meds can be prescribed for your pet to go home with at a cost of \$30.00-45.00 depending on the body weight of the patient.

Please initial: REQUEST PAIN INJECTION _____ DECLINE PAIN INJECTION _____
 REQUEST TAKE HOME MEDS _____ DECLINE TAKE HOME MEDS _____

Miscellaneous:

We require an intravenous catheter on all animals during surgery/anesthesia. This allows us to support internal organs affected by anesthesia (kidneys, liver, cardiovascular), maintain blood pressure during the procedure and provide immediate access for medications in case of an emergency. In addition, the administration of fluids helps patients expel the anesthetic from their body faster, allowing them to recover more easily. The cost of a catheter is included in the cost of spay and neuter surgeries. The cost of a catheter for all other surgeries is \$15.50. Fluid therapy is at the discretion of the veterinarian. If required, the cost range of surgical fluids is \$30.00 - 40.00.

If your pet vomits 3 or more times after surgery, an injection of Cerenia may be given at the veterinarian’s discretion for the additional cost of \$21.50. Cerenia is a medication used to prevent and treat acute nausea and vomiting.

There will be an additional charge of at least \$40.00 for animals that are in heat, pregnant or excessively overweight and are undergoing a spay/neuter surgery. This is due to additional surgery and anesthesia time required to perform the procedure. In the event the patient is pregnant, the pregnancy will be terminated unless advance notice is given.

All pets presented for surgery must be free of external parasites. If fleas, ticks, or ear mites are found, the pets will be treated for these parasites at the owner’s expense (\$12.50-30.00). This enables us to keep our hospital free of external parasites.

If a dental cleaning is being performed, teeth that are badly damaged by dental disease may be extracted at the discretion of the attending veterinarian.

Elective procedures to be performed while under anesthesia: Please initial:

- | | |
|---|----------------------------------|
| Trim nails (no additional charges) _____ | Clean/flush ears (\$17.50) _____ |
| Express anal glands (\$17.50) _____ | Microchip (\$32.00) _____ |
| Rabies (\$12.60) _____ | DA2PL P/C (\$17.74) _____ |
| CVR-C (\$8.23) _____ | Bordetella (\$11.20) _____ |
| FELEUK (\$17.36) _____ | Rattlesnake (\$17.94) _____ |
| Extraction of retained baby teeth (\$47.50) _____ | |

E-collar:

After surgery if your pet is licking or chewing on the incision site, your pet will be sent home with an Elizabethan collar (\$6.25-34.98). This small investment could save you the added cost to have the site repaired.

Surgical Follow-up Policy:

We perform a follow-up exam usually one week after surgery at the cost of \$10.00. Some surgeries may require additional follow-up visits. We do not include these fees in the surgery cost since there may be more than one follow-up exam necessary.

Authorization for Medical, Surgical and/or Anesthesia Treatment:

I hereby affirm that I am of legal age and that I am the owner or the owner’s representative, and I hereby authorize the admitting veterinarian (and his/her designated associates or assistants) to perform the above stated procedures and treatment of my pet.

The nature of the procedure(s) had been explained to me and no guarantee has been made as to the success of the result or cure. I understand that there are inherent risks in any anesthetic and/or surgical/medical procedures that could include serious bodily injury or death. These risks as they apply to my animal in its current situation have been explained and discussed with me and/or my representative. I am satisfied with the information I have received and release Carbon County Veterinary Hospital, its veterinarians, support staff, and owners from any liability associated with the above listed procedure(s) and any misunderstanding of the above issues of risk.

I agree that I am financially responsible for any and all charges incurred while my pet is in the care of this facility, including those that are considered therapeutically and/or diagnostically necessary as well as any unexpected lifesaving emergency care deemed necessary by the attending veterinarian. I understand that the veterinarian will use all reasonable care and that complications may occur anyway. I am aware that there will be fees involved for any follow-up visits deemed necessary by the veterinarian. These premises are not attended 24 hours a day for observations of animals by either veterinarians or support staff.

I understand that payment, in full, is due at the time my pet is released from the hospital. It is my responsibility to return for my pet when the surgery/treatment is completed. In the event that I do not pick up my pet at the scheduled time, extra charges will be involved for boarding. I also understand that, if I fail to pick up my pet within 10 days, and the hospital is not notified in writing of an alternate pick up date and/or arrangements, the pet will be considered abandoned and may be removed from the premises according to Wyoming State Statute 33-30-215. I further understand that this action does not in any way relieve me of paying all costs of your services, including the cost of boarding.

I have read carefully and understand this authorization for surgical treatment, the reason why the surgery/procedure is considered necessary, as well as its advantages and possible complications, if any.

Signature: _____ Date _____

DAYTIME PHONE NUMBERS ARE VERY IMPORTANT TO US!

Phone number(s) where I can be reached TODAY (1) _____ (2) _____

Witness: _____ Date _____

PLEASE MAKE SURE YOU ASK QUESTIONS IF YOU HAVE ANY. WE ARE HERE FOR YOU AND YOUR PET NEEDS!

Taking Care of All God's Creatures.