

FAMC ANESTHESIA CONSENT



Date: _____
Pet's name: _____ Owner: _____

Current on vaccinations: Yes ___ No ___ (update today? Yes ___ No ___)

Did pet eat this morning? Yes ___ No ___

Current medications: _____ Last dose: _____

Any vomiting, coughing, sneezing, diarrhea? Yes ___ No ___. If yes, describe: _____

Any home dental care products used on a regular basis? _____

Any known drug allergies? Yes ___ No ___

Any other specific problems requiring attention today? _____

I understand the nature of the procedure and that there may be risk involved. No guarantee has been made to the result or cure. Please list specific procedures to be performed:

Pre-surgical blood testing: is strongly recommended for all pets undergoing anesthesia. Blood work helps us to detect infection or anemia, and to assess kidney and liver function. Information gained from these lab tests allows us to adjust each patient's anesthetic protocol as needed.

Please initial your choice below.

Routine pre-surgical blood profile (<7 years of age): _____ (\$67.50).

Senior body function profile (>7 years of age): _____ (\$98.50).

I decline any blood work for my pet: _____

All animals will receive a free nail trim while under anesthesia. If you decline please check here _____

ELECTIVE PROCEDURES THAT CAN BE DONE WHILE YOUR PET IS UNDER ANESTHESIA

Ear Clean/Flush (\$29.00 - \$43.50): Y___ N___

Express anal glands (\$15.50): Y___ N___

Brush out/clip hair mats (\$20.50 per 10 min): Y___ N___

Nail trim with dremel (\$17.90): Y___ N___

Apply topical flea medication (\$17.50 - \$25.20): Y___ N___

Remove skin tags/small skin growths (\$45.00 and up) Y___ N___ Location: _____

Microchip implant (\$41.99, includes 1st year registration): Y___ N___

Other procedures you would like performed at this time: _____

Signature _____ Emergency Contact Number _____ Date <date>