



Bastet Veterinary Hospital Anesthesia Consent Form

Owner Name: _____ Pet Name: _____

Species: _____ Sex: _____ Age: _____ Procedure(s): _____

It is our goal to keep all as reasonably priced and safe as possible. Our base price includes the services we feel are most important for a successful surgery. There are several other services that we feel are important to offer you for your pet(s) safety and comfort.

Pre Anesthetic Blood Work

We offer a pre-anesthesia blood panel. This test is useful in diagnosing liver and kidney disease diabetes and other conditions that could complicate a surgical procedure. (Highly recommended in pet(s) 6+ years and “short snout breeds”).

Accept _____ Decline _____

IV Catheter and fluids

Administration of intravenous fluids helps your pet(s) recover quicker from anesthesia maintain blood pressure and increase circulation during anesthesia.

Accept _____ Decline _____

Pain Injection

The pain injection is useful to help your pet(s) with discomfort and pain.

Accept _____ Decline _____

Antibiotic Injection

The antibiotic injection is helpful to prevent infections.

Accept _____ Decline _____

Antibiotic Medication

Post-Surgery antibiotics are helpful to prevent secondary infections.

Accept _____ Decline _____

Pain Medication

Post-Surgery pain management is helpful for discomfort and pain

Accept _____ Decline _____

Microchip Implantation

This can be implanted at any time but is much more comfortable for your pet if under sedation or anesthesia. This cost also includes the one-time registration fee.

Accept _____ Decline _____

Elizabethan Collar (E-Collar)

This is the “Cone” that goes around your Pet(s) neck to keep them from licking or chewing at the surgery site.

The Owner is held responsible for any post-operative care needed as a result of not purchasing or using an E-Collar.

Accept _____ Decline _____

Multi Radiance Laser Post Surgery

Accept _____ Decline _____

In Heat

If your pet(s) is in heat or showing signs of a heat cycle, there will be an additional charge. Your pet(s) can show signs of heat 4 weeks before the heat cycle and 4 weeks post heat cycle. **Initial:** _____

Dental Radiographs

Accept _____ Decline _____

Dental Extractions

Pets teeth and gums can only be accurately assessed under general anesthesia. Extractions are an additional cost

Per Tooth and will increase your dental estimate. For this reason, BVH staff member will contact you for approval and with the new estimate cost. If we cannot contact you, **NO EXTRACTIONS** will be performed and **NO MOBILE TEETH WILL BE CLEANED** and your pet will be recovered from anesthesia. **Initial:** _____

I understand that during the procedure, unforeseen conditions may be revealed that could necessitate an extension of the procedure. I expect BVH to Exercise reasonable care and judgement in these cases. I understand the risks involved and realize that results cannot be guaranteed. I am also aware that unforeseen events with this animal do not relieve me from any obligation to cost and that payment is due at pick up.

Owner/Agent Signature

Date

Phone numbers you can be reached at today.