

Gordonsville Veterinary Hospital Surgical Consent Form

Client Name _____ Pet Name _____
Telephone # s _____ Date _____
Procedure _____ Office Use _____

A Pain injection will be administered prior to your pet's surgery for pain control during recovery and is given with all surgical procedures to help ensure the comfort of your pet and aid in recovery. The cost is included in the price of your pet's surgical procedure. **An E-Collar may be placed on your pet following surgery to prevent self-trauma to the incision site** and is done at the discretion of the doctors and staff.

Would you like pain medicine to take home? YES / NO

* Pain Medication is strongly recommended for several days following surgery to improve the comfort of your pet. The cost is between \$20.00 and \$35.00.

Would you like to have a pre-surgical blood screen/ CBC/PT/PTT? YES / NO

* In order to evaluate organ function prior to anesthesia, a Pre-Surgical Blood Screen is recommended for all patients. It is highly recommended for pets over 7 years of age. This screening gives the veterinarian information about whether your pet is anemic or not, has appropriate clotting properties, has an underlying infection, and the condition of your pet's liver and kidney functions. Proper liver and kidney functions are imperative for your pet to be able to metabolize the anesthetic. Problems that can be found on the blood work may lead to prolonged recovery time and/or other serious complications. The cost is \$97.50.

Would you like to have an IV Catheter and Fluids? YES / NO

* An intravenous Catheter and fluids may be necessary to help maintain your pets blood pressure and provide internal organ support (especially kidney function), also improving the tolerance of anesthetic agents. This is doctor discretion but, you may opt to have done additional to procedure if not required. The cost is \$52.50.

Would you like your pet to receive a microchip? YES / NO

* A microchip is an ID that helps reunite lost pets to their owners. We can implant one today. The cost is \$54.60.

Would you like to have a histopathology performed? YES / NO

* If your pet is having a tumor/growth removed, it can be sent to the lab for histopathology (biopsy). The cost is \$178.00.

Would you like to have a dental cleaning? YES / NO

* Once your pet is anesthetized, a dentistry to clean his/her teeth can be performed. The cost to add on to a procedure is \$170.00 to \$250.00 additional. It may be necessary to extract teeth during the dental procedure. (Some teeth may actually fall out during the dentistry.) Unfortunately, we cannot tell exactly how many teeth may be extracted until we anesthetize and do an oral exam. **The cost of extractions ranges from \$20 for a simple extraction to \$50 for a complex extraction (involving suturing the gums).** We will make every attempt to contact you at the numbers listed above. If you cannot be reached, we will take appropriate measures to ensure the health of your pet at your expense.

Please check your preferred option below:

- Perform any necessary procedures/extractions at this time.
- Perform necessary procedures/extractions up to \$_____ additional to the estimate.
- Please call me and provide an estimate of any additional procedures. Do not proceed without authorization.

Propofol – It may be necessary to use this drug for those requiring very quick recovery from anesthesia. This is to be used at the doctors' discretion. (Additional cost is \$26.30)

The nature of such procedure has been described to me. I understand that during the performance of the procedure, unforeseen conditions may be revealed that may require an extension or different procedure than those set forth above. I understand that there is always a risk of complications up to and including death with sedation and anesthesia. I understand that there are no guarantees or assurances as to the outcome of this procedure. I, the undersigned have read and understand that it is the policy of this hospital to receive payment in full at the time services are rendered and that a deposit may be required upon admission to the hospital for treatment. I am the owner or the owners' agent and am authorized to make decisions as to the care of this pet.

Signature of Owner or Authorized Agent