

## **Chase Animal Hospital: Surgical Consent Form**

Thank you for choosing Chase Animal Hospital for your pet's surgical needs. Your pet will undergo a pre-surgical physical examination prior to anesthesia, but to ensure that your pet's procedure is as safe as possible we also offer the following. Please circle the appropriate response to each selection and initial next to your response. Please sign and date when complete. Thank you!

### **Medical History:**

Animals staying for any length of time at this facility must be current on their Rabies, Distemper, and Bordetella vaccinations. Owners and agents are expected to provide proof of vaccination at the time that the pet is brought to the facility. If appropriate documentation is not provided, the pet will be vaccinated accordingly at the owner's expense.

### **Pre-Anesthetic Blood Panel:**

This requires a small blood sample that is used to test for any abnormalities in vital organ function that are undetectable with a physical examination. Should the test detect an abnormality, our veterinary staff can adjust the anesthesia accordingly. This procedure is highly recommended by our veterinarians to ensure the safest possible surgery for your pet. The cost of this procedure is \$72

**ACCEPT** \_\_\_\_\_

**DECLINE** \_\_\_\_\_

In addition, all dogs scheduled for surgical procedures must provide proof of heartworm testing and prevention. If appropriate documentation is not provided or if the pet has not been tested, the dog needs to be tested prior to the scheduled procedure. I have considered the risk of anesthesia if my pet has heartworms, and I

**ACCEPT** \_\_\_\_\_

**DECLINE** \_\_\_\_\_

### **Pain Medication:**

Pain medication is always administered prior to surgery, but you also have the option of pain management via oral medication at home to lessen discomfort that may occur after surgery. The cost of pain medication varies from \$20.00 to \$55.00 based on the size of your pet and the type of procedure performed.

**ACCEPT** \_\_\_\_\_

**DECLINE** \_\_\_\_\_

### **Reproductive Complication Fees:**

Complications, such as the following, can occur during your pet's surgery:

- Female dogs experience normal heat cycles and/or pregnancies that are not always detectable with a physical examination. Unlike dogs, the heat cycles of cats are rarely detectable with a physical exam and can only be confirmed once surgery has commenced. Extra costs are incurred if your pet is spayed while in heat or pregnant, even if it is not detected prior to surgery, due to increased size of and blood flow to the reproductive organs and resulting surgery time.
- Occasionally, male dogs and cats experience a condition called cryptorchidism. This occurs when one or both of the testicles do not descend into the scrotum. Extra costs are incurred if your pet is cryptorchid due to the additional time and supplies necessary for the procedure.

Do you consent to have your pet spayed or neutered if a reproductive complication is noted before anesthesia?

**CONTINUE WITH PROCEDURE** \_\_\_\_\_

**DO NOT CONTINUE WITH PROCEDURE** \_\_\_\_\_

### **Retained Juvenile Teeth:**

During the pre-operative examination, our veterinarians often discover deciduous teeth retained in the mouths of cats and dogs. Though these teeth are often lost naturally during youth, they can cause future problems if retained. It is in the best interest of your pet to have these teeth removed while your pet is under anesthesia for his or her surgery. The cost of this procedure is approximately \$15 to \$30 per tooth. Do you consent to have any juvenile teeth removed if found?

**AUTHORIZE PROCEDURE** \_\_\_\_\_

**DECLINE PROCEDURE** \_\_\_\_\_

### **Surgical Complications:**

As with all surgical procedures, complications can occur before, during, or after surgery. The severity of complications can be highly variable. Any complication needs to be addressed at the moment it occurs and contacting you by phone is not always possible. Any complication can increase the length of the surgery time and require further treatment before or after surgery. Do you consent to have the surgery performed realizing that complications occasionally occur and that you would be responsible for additional costs incurred?

**AUTHORIZE PROCEDURE** \_\_\_\_\_

**DECLINE PROCEDURE** \_\_\_\_\_

**I have read and understand all of the above and declare that I am the owner, or an authorized agent of the owner, of this pet. I authorize the staff at Chase Animal Hospital to perform the optional procedures according to my choices above, signified by my initials, and accept full responsibility for all of the associated charges.**

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_