

# Surgical Consent Form

Basic

All-Inclusive (Laser, I.V. Catheter/Fluids, Pre-anesthetic blood screening, post-surgical pain medication)

## PROCEDURE Spay OSS

Neuter- Check for Cryptorchidism  Vasectomy

Dental

Declaw

Mass Removal

Other \_\_\_\_\_

### YES

### NO

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Any vomiting, coughing, sneezing or diarrhea?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Did the pet eat this morning?                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Any history of seizures or anesthetic problems? |
| <input type="checkbox"/> | <input type="checkbox"/> | Pain management to go home?                     |
| <input type="checkbox"/> | <input type="checkbox"/> | Pre-anesthetic bloodwork?                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the pet in heat or pregnant?                 |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the pet on parasite prevention?              |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the pet current on vaccinations?             |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the patient have deciduous teeth?          |

I  **approve**  **deny** pre-anesthetic blood screening for my pet.

**Pre-anesthetic blood screening:** We recommend blood screening to help maximize patient safety and alert us of the presence of dehydration, anemia, infection, diabetes and/or kidney or liver disease.

Any other treatments to be done today? \_\_\_\_\_

I do hereby authorize Brookwood Animal Clinic to perform a procedure requiring general anesthesia on my pet. I am aware of the risks involved and release Brookwood Animal Clinic from any legal and financial responsibilities arising from anesthetic complications.

### How will you be paying today?

Cash

Debit/Credit Card

Care Credit

~~Check~~

~~Pre-Approved Payment Plan~~

**Signature** \_\_\_\_\_ **Phone** \_\_\_\_\_