

St. Francis of Assisi Veterinary Medical Center
8615 Potranco Rd
San Antonio, TX 78251
210.509.8500

ANESTHETIC CONSENT AND SURGICAL PROCEDURES

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

Procedure: _____

St. Francis of Assisi Veterinary Medical Center utilizes a variety of anesthetic techniques that we feel are among the safest and most efficient currently available in veterinary medicine. The methods used to render the patient in an unconscious, painless state are tailored to the individual patient and surgical procedure. Utmost care will be taken with your pet. However, with the use of any anesthetic, there is always the potential risk to the patient's life and well-being. This risk is always present with any surgery and the use of anesthesia and the risk increases with factors such as age, physical condition, and illness. Occasional problems can arise due to pre-existing conditions not evident during routine pre-anesthetic examinations. **To reduce the risks, the doctors at St. Francis of Assisi require that all non-elective surgical and anesthetic cases be screened prior to anesthesia by means of a Pre-Op Blood Profile (and for pets scheduled for elective surgery who are 1 year and older or at the doctor's discretion). The cost of this test will be added to the cost of the procedure listed above.** Any concerns or questions should be discussed with your doctor before going forward with any procedure.

I do hereby certify that I have read and fully understand the above authorization for medical and/or surgical treatment. The nature of the procedure and the risks involved have been fully explained to me and I understand that no guarantee or assurance has been given as to the result of said treatments. Further, I assume full financial responsibility for all charges incurred for this patient, and I consent to the release of medical information for the said animal.

In case of a life threatening emergency, please initial which action for the doctor to take:

_____ Cardiopulmonary Resuscitation "CPR" (The doctor **will** perform CPR and any other life saving measures)

_____ Do Not Resuscitate "DNR" (The doctor **will not** perform any life saving measures)

For your pet's protection and welfare, please list ALL medications that your pet is currently taking (including any heartworm/flea prevention and supplements):

Post-Operative Pain Medication

Even minor surgical procedures can cause significant post-operative pain in certain individual animals. ***It is the policy of St. Francis of Assisi Veterinary Medical Center to provide each patient with a long-acting analgesic injection to ensure comfort for the first 24 hours after surgery.*** The doctor will prescribe additional oral pain medications if necessary.

Surgical Doctor Preference: _____

Signature of Owner/Responsible Party

Telephone Number for Emergencies

If your pet is under 1 year of age and undergoing an elective procedure, then please initial one of the following:

_____ I **grant permission** for St. Francis of Assisi to perform a Pre-Op Blood Profile on my pet.

_____ I **decline permission** for St. Francis of Assisi to perform a Pre-Op Blood Profile on my pet despite the doctor's recommendation and as such relieve St. Francis of Assisi and its staff of any/all liabilities.