



# Rutland Animal Hospital Anesthesia Consent Form

DATE \_\_\_\_\_ OWNERS NAME \_\_\_\_\_

PROCEDURE: \_\_\_\_\_

**YES**      **NO**

Can you make medical and financial decisions regarding this pet?

As the owner/authorized agent for the above named patient, I give consent for Rutland Animal Hospital to induce and maintain anesthesia for the scheduled procedure. I understand and accept that there is risk associated with any anesthetic procedure and authorize the attending DVM to proceed as necessary should any complications occur.

An intravenous catheter allows for rapid administration of emergency drugs should any anesthetic complications occur. It also allows for the administration of intravenous fluids which help maintain adequate blood pressure and circulation to vital organs during anesthesia. **It is required for all surgical procedures.**

\_\_\_\_\_  
Please initial

**APPROVE**      **DECLINE**

A standard pre-anesthetic blood panel is highly recommended to help minimize anesthetic risk. This blood panel helps to assess internal organ function and can highlight issues not detectable with a physical examination.

A CBC is added to our standard pre-anesthetic blood panel to check if a patient has underlying anemia and has adequate white blood cells to fight infection and heal properly. It also measures platelets that are used for clotting after surgery. ***If I approve this blood panel, then I understand that a standard pre-anesthetic blood panel with a CBC is an additional cost.***

**APPROVE**      **DECLINE**

Microchips are an important part of pet ownership. In the event your pet becomes separated from you, any shelter or veterinary facility has the ability to scan for microchip information. We recommend that all pets be microchipped. ***If I approve the placement of a microchip, then I understand that it is an additional cost.***

**APPROVE**      **DECLINE**

All patients are given pain medications dependent on the procedure performed, which is not optional. Laser therapy is an additional, non-invasive pain treatment that can help reduce inflammation and healing time. ***If I approve laser pain therapy, then I understand that it is an additional cost***

**YES**      **NO**

Did your pet eat this morning?

**YES**      **NO**

Is your pet on any medication? **IF YES**, please list all medications below:

SIGNATURE \_\_\_\_\_ PHONE \_\_\_\_\_