

Care & Comfort Veterinary Hospital

Client Name: _____ Patient Name: _____

A pre-anesthesia blood chemistry panel and ECG heart monitor are recommended for all pets prior to anesthesia. This pre-anesthesia testing produces the following benefits:

- Helps identify pre-existing problems which may cause complications with anesthesia
- Provides important baseline data for comparison throughout your pet's life

The options available for pre-anesthesia testing and ECG heart monitor are listed below:

I agree to a full in-house blood chemistry panel performed on my pet. **\$192.50**

I agree to a brief pre-anesthetic blood panel to check my pet's liver and kidney function only. **\$ 90**

I agree to a Feline Leukemia/Feline AIDS test performed on my cat **\$81.45**

I decline blood work prior to anesthesia today and understand all risks.

And

I wish to have an ECG performed on my pet prior to anesthesia. **\$40**

I decline to have an ECG prior to anesthesia; I wish only to have the ECG monitoring during anesthesia.

Nail Trim: 50% off while under anesthesia. **\$10 for dogs. \$7.50 for cats.**

Yes, I would like to have my pet's nails trimmed under anesthesia today.

No, I do not want my pet's nails trimmed today.

Microchip Pet Identification:

Yes, I would like my pet to be microchipped under anesthesia today. **\$40**

No, I do not want my pet to be microchipped today.

We recommend your pet be current on routine vaccinations before surgery, including a booster vaccine at the age of 16 weeks, to lower the risks of contagious diseases while they are recovering from a major surgery.

Yes –Please update my pet's vaccinations today.

No – I understand the risks, and do not hold Care & Comfort liable.

You will be contacted if there are any concerns regarding your pet's pre-surgical exam.

Date: _____

Authorization: _____

Phone number to be reached at during the procedure: _____

Care & Comfort Veterinary Hospital

Anesthesia and Sedation Consent Waiver

I hereby give permission to Care & Comfort Veterinary Hospital to anesthetize or sedate _____ . I have had the opportunity to ask questions regarding the procedure and the risks involved. I understand that there is a risk with sedation or anesthesia and waive any and all claims of damage against Care & Comfort Veterinary Hospital Inc., its officers and employees, in the event of injury or death of my animal.

Signature _____ Date _____

Surgical and/or Dental Consent Waiver

I hereby request Care & Comfort Veterinary Hospital to surgically operate on _____ . I have had the opportunity to ask questions regarding the surgery and the risks involved. I understand that there is a risk in any surgery and the surgery is performed using a general anesthetic. Not with-standing the risk, I request the surgery and waive any and all claims of damage against Care & Comfort Veterinary Hospital Inc., its officers and employees, in the event of injury or death of my animal. I hereby declare that under penalty of perjury that I am the owner, or authorized by the owner, to present the above animal for surgery.

Signature _____ Date _____

Unforeseen Circumstances Waiver

I am aware that there are additional charges for aggressive animals. I am aware that there are extra charges if an animal is pregnant, obese, in heat, has retained testicles, enlarged mammary glands or has an abnormal or enlarged uterus. I am aware that complications arising from surgery, included but not limited to, infection, hemorrhage, or premature removal of sutures by the animal will result in additional charges. **There will be a \$12 charge for us to administer a flea treatment if your pet has fleas.**

Signature _____ Date _____

Dental Extraction Waiver

During your pet's dental procedure, we may find teeth that need to be removed for medical reasons. Due to the unpredictability of whether or not some teeth may need extraction, the estimate may vary from its original range. I authorize removal of diseased, infected, fractured or otherwise unhealthy teeth and I understand that such services may result in additional charges.

Signature _____ Date _____