COLONY ANIMAL HOSPITAL
NEWPORT NEWS, VA
(757) 877-6464

Anesthesia and Surgery Consent Form

Owner Name _____ Home Phone _____ Telephone Number Where You Can Be Reached Today _____

Name of Pet _____ Species _____ Breed _____ Sex _____

Surgical Procedure: _____

Are you currently using *Frontline*© or *Advantage*© on you pet? YES ❑ NO ❑ **Date of last application**: _____

As with any surgery requiring anesthesia, certain risks may result in serious complications or even death. To minimize such risks we require basic preoperative blood screens for select patients as well as intravenous fluid support for obese or senior pets. We offer the following for all anesthetic procedures at additional cost:

Procedure	Reason	Accept	Decline	Price
Additional Pain Management	To provide additional comfort after a surgical or dental procedure for prolonged relief	❑	❑	34.71
Basic Pre-Surgical Blood Screen	To check proper organ function, blood oxygen carrying ability and ability to fight infection **Required for pets over 4 years old**	❑	❑	51.69
Complete Pre-Surgical Blood Screen	Same as above but includes more extensive blood testing **Required for pets over 7 years old**	❑	❑	63.91
Intravenous Catheter and Fluid Support	Maintains blood pressure, replaces blood loss, speeds recovery and provides fast access if life saving drugs have to be administered in a case of emergency **Required for obese and senior patients**	❑	❑	66.74
Electrocardiogram (ECG)	Screening test to detect potential heart arrhythmias **Required for high risk patients**	❑	❑	25.68
Coagulation Test	Identifies patients with bleeding problems **Required for certain procedures**	❑	❑	40.59

Because the safety and comfort of your pet is important to us we offer a special price for the group of supportive procedures:
The **Safety and Comfort Package** includes:

- Complete Pre-Surgical Blood Screen
- Pain Management
- Electrocardiogram
- Intravenous Catheter
- Intravenous Fluid Support

Safety and Comfort Package

Only $160.67

❑ **I accept the Safety and Comfort Package**

❑ **I decline the Safety and Comfort Package**

Please read carefully: I, the undersigned, hereby confirm that I am the legal owner / agent of the animal described above and I am authorizing the surgical / treatment procedure(s) listed above to be performed on my pet. I consent to the administration of such analgesics sedatives, tranquilizers, anesthetics or other medications as may be deemed necessary by the attending veterinarian.

I acknowledge that no assurance or guarantee has been made of the results of treatments, procedures, or surgery. I am aware that every surgical procedure, treatment, and anesthesia, even performed on a healthy animal, carries a certain amount of risk and possibilities of complications. I understand that the staff of Colony Animal Hospital will make every reasonable attempt to safely and proficiently care for my pet. I am fully prepared to accept the risk to my pet from the procedure that I am directing the doctors of Colony Animal Hospital to perform. Colony Animal Hospital or it's staff will not be held responsible in any manner whatever or any circumstance, on account of the care, treatment, or safe keeping of the animal described above, or otherwise in connection therewith.

I also understand that conditions not known may make it advisable that additional treatments, procedures, or surgery be performed on my pet. I understand that every reasonable effort will be made to contact me. Until I can be contacted, I hereby authorize the staff of Colony Animal Hospital to perform any reasonable treatment, procedure and care for my pet as deemed necessary by the attending veterinarian.

I acknowledge that I will bare full financial responsibility for any and all costs incurred for the treatment and care of my pet, and I am aware that all outstanding accounts are payable in full after services are rendered.

I have read and understood the statement above _____ Signature _____ Date

ANESTHESIA AND SURGERY CONSENT FORM