



SURGERY/PROCEDURE CONSENT FORM

Client name: _____ Patient name: _____

Daytime phone: _____ Evening phone: _____

Surgical procedure: _____

How would you like to be contacted? (Phone call, e-mail, or text message) _____

Please read carefully and sign.

PRE-ANESTHETIC BLOODWORK

We recommend a blood profile screening before anesthesia and surgery to ensure that your pet is in a low-risk category. Conditions which may influence the effect of anesthetic agents or medications on your pet may not be evident during the pre-surgical physical examination. The latest technology lets us run safe, accurate blood chemistries before anesthetic induction. These tests are similar to those your own physician would run were you to undergo anesthesia. In addition, the results of these tests will serve as reference values for future use should your pet become ill.

Pet Health Screen 3 \$107.00 – (451)

Healthy patients 7 years of age and over.

Bloodwork is required for pets in this category.

Includes:

PCV (assesses anemia)	Na (sodium)	Alkphos (liver)	Creatinine (kidney)
Amylase (pancreas)	Cl (chloride)	K (potassium)	Total Protein (hydration) Cholesterol
BUN (kidney)	ALT (liver)	ALB (protein)	Calcium (certain cancers)
Phosphorus (kidney)	Bilirubin (liver)	Glucose (sugar)	CBC (assesses anemia, infection, clotting)

RADIOFREQUENCY SURGERY

We now provide a new technology known as radiofrequency surgery. Radiofrequency surgery passes an electric signal (similar to FM radio waves) down a very small wire to incise and cauterize tissue. This allows us to limit blood loss, while at the same time minimizing pain and swelling related to surgery. This technology is available for all surgeries at an additional \$42 charge.*

**RADIOFREQUENCY TECHNOLOGY IS REQUIRED FOR ALL MASS REMOVAL AND ORTHOPEDIC SURGICAL PROCEDURES.*

_____ **Yes, I would like to have the radiofrequency surgical machine used during my pet's surgery to limit blood loss and pain. I am aware that this will add \$42 to the cost of the surgery. (RFS)**

_____ **No, please do not use the radiofrequency machine during my pet's surgical procedure.**

I, the undersigned owner or agent of the owner of the pet identified, authorize the veterinarian(s) and staff at the Orrville Veterinary Clinic, Inc to perform the above procedure(s). My signature on this form indicates that any questions I have regarding anesthesia or the above procedure(s) have been answered to my satisfaction. I understand that although all reasonable precautions and due care will be taken, there is always a potential risk with anesthesia and surgery. I accept these risks and authorize Orrville Veterinary Clinic, Inc. to perform such treatment as deemed necessary. I assume financial responsibility for all charges incurred to patient.

X _____ Date _____
Signature of Owner/Responsible Agent

For the excellence you've come to expect...we've grown to provide.

MICROCHIPPING

The HomeAgain Pet Recovery Service (Microchipping) is a safe, simple and permanent form of pet identification designed to quickly identify lost pets and reunite them with their owners. It's a proven way to successfully recover your pet if it ever becomes lost. This can be done while your pet is under anesthesia.

PLEASE INITIAL ONE: _____ Yes, microchip my pet for \$42.00. This includes the microchip and registration fee for the first year.(523)
_____ No, I do **not** wish to have my pet microchipped at this time.

FLEA PREVENTION

We offer the flea pill Capstar, a safe product that can be given orally to your pet to kill all adult fleas for a 24 hour period. If live fleas are noticed on your pet, we will automatically administer a Capstar tablet. You may also choose to have a Capstar pill given if you would like to prevent any adult fleas from going home on your pet.

PLEASE INITIAL ONE: _____ Yes, give my pet a Capstar tablet on the day it is to go home. I understand an additional \$5.00 charge will be applied to my bill. (977SI <25# or 978SI >25#)
_____ No, do **not** give my pet a Capstar tablet.

MASS REMOVAL

It is often hard to tell what type of growth has been removed from your pet and we recommend sending it to a laboratory to have a pathologist examine it microscopically. Results are faxed to us approximately 5 working days later. In case we have trouble reaching you please contact the clinic after the appropriate time has passed.

PLEASE INITIAL ONE: _____ I do want a biopsy sent in on my pet. I understand an additional \$127.00 charge will be applied to my bill.(0376)
_____ I do **not** want a biopsy sent in on my pet.

X-RAY

Your animal will be positioned on our x-ray table and will need to remain very still during the x-ray procedure for optimal results. Sometimes it is necessary to place your animal in positions that are uncomfortable for a short period of time. If the animal objects to this, minor sedation may be required. With certain injuries, we do not want your pet to struggle or injure themselves more. The position needed for x-ray and the amount of discomfort to the animal will determine the level of sedation. We want this to be as pleasant an experience as possible for your animal.

PLEASE INITIAL ONE: _____ I give permission to perform all necessary x-rays for my pet.(571)
_____ I wish to have a phone call after the examination of my pet, prior to x-rays, with an estimate.

DENTAL

Dentals require a light level of anesthesia to be given to your animal in order to use a special machine that helps break tartar off the teeth. Once the teeth have been cleaned, they are polished to help retard build-up of tartar. Depending on the type and number of extractions your pet requires, cost for this procedure may vary. Serious conditions may require specialized procedures and a referral to a specialty clinic will be made if necessary.

PLEASE INITIAL ONE: _____ I give permission to perform all necessary extractions for my pet. I understand additional charges will be applied to my bill accordingly.(751)
_____ I wish to have a phone call after the examination of my pet, prior to additional extractions, with an estimate.

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