

Rimforest Animal Hospital, Inc.

1299 Bear Springs Rd

Rimforest, California 92378

Client Name:

Patient Name:

Dog or Cat:

Breed:

Birthday:

Sex:

Anesthesia Consent Form for No Patient Allocated

Procedure(s) to be performed:

Our greatest concern is the well being of your pet. We will perform a physical examination before administering anesthesia. If your pet is found to have any external parasites (fleas/ticks), your pet will be treated at your cost. If your pet is found to be in heat (female), there will be an extra charge. However, disorders of the liver, kidneys or blood, are not detected unless blood testing is done. Abnormalities of any of these may increase anesthetic risk. For these reasons we highly recommend pre-anesthetic blood screens. Intravenous fluids given during surgery help maintain normal blood pressure and allow rapid administration of drugs should an emergency situation develop, ****I understand that if I decline bloodwork and IV catheter, this is against the Veterinarian's medical advice and I accept the possible health risks for my pet.****

While your pet is in the clinic, would you like any of the following services performed:	YES	NO
Chem 10-Eval liver/kidney function, glucose levels (rec for pets 4-7 years of age) (\$67.25)	<input type="checkbox"/>	<input type="checkbox"/>
Chem 22 w/CBC eval liver/kidney function, electrolytes, glucose (rec for pets 8 yrs of age or older) (\$165.84)	<input type="checkbox"/>	<input type="checkbox"/>
IV Catheter & Fluids (\$126)	<input type="checkbox"/>	<input type="checkbox"/>
If having a dental, I authorize any extractions if they are necessary (for an extra cost)	<input type="checkbox"/>	<input type="checkbox"/>
Must call if there are any extractions	<input type="checkbox"/>	<input type="checkbox"/>
Histopathology (if tumor removal) - to see what type of tumor it is (\$198)	<input type="checkbox"/>	<input type="checkbox"/>
Ear Cleaning (\$37)	<input type="checkbox"/>	<input type="checkbox"/>
Fecal Exam (\$48.36)	<input type="checkbox"/>	<input type="checkbox"/>
Microchip (\$60)	<input type="checkbox"/>	<input type="checkbox"/>
Express Anal Glands (\$23)	<input type="checkbox"/>	<input type="checkbox"/>
Would you like a sedative for your pet? (\$15-\$30)	<input type="checkbox"/>	<input type="checkbox"/>
Nail Trim (FREE)	<input type="checkbox"/>	<input type="checkbox"/>
Laser therapy - light targets tissue and results in decreased inflammation, decreased pain and accelerated healing. (\$20)	<input type="checkbox"/>	<input type="checkbox"/>

As the owner of the above pet, I certify that I am over the age of 18; and I authorize the staff of this hospital to perform the procedure(s) listed above, as well as those deemed necessary to treat life-threatening emergencies. As with all anesthetic, treatment, and/or surgical procedures, I understand there are risks inherent in these services. I acknowledge that staff members at this practice have explained the procedures to me, answered questions to my satisfaction and cannot be held responsible for any unforeseeable results. No

warranty or guarantee has been given to me as to the results or cure afforded by these treatments or procedures. Further, I understand that I am financially responsible for all costs incurred during this surgery, treatment, and hospitalization.

Phone # you can be reached at today: ()

Signature:

Date: