**Quince Orchard Veterinary Hospital**

**ANESTHETIC CONSENT**

Owner's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pet's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Species: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize Dr. Lawrence Giebel, Dr. Douglas Amspaugh, Dr. Matthew Felrice, Dr. Megan Giebel, Dr. Lauren Giebel, and their designees to perform the following procedures:

 Ovariohysterectomy (Spay) Dentistry

 Castration (Neuter) Biopsy

Exploratory surgery Wound management

 Removal of growth/lump/tumor/cyst

 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am aware that there are risks involved in the adminstration of any anesthesia and with all procedures. If an unforeseen condition or emergency arises during the course of my pet's treatment, I further authorize the doctors to perform any additional procedures which, in their judgment, may be immediately necessary to my pet's life and health. I acknowledge that no guarantee concerning the results of these procedures has been made.

In order to reduce the risk of complications, I authorize the doctors to perform the following tests:

 Pre-anesthetic CBC Profile (Blood Test)

 Urinalysis

 I decline all pre-anesthetic tests. \_\_\_\_\_\_\_\_\_\_ Initials

I also request the following services:

 Post-operative pain relief Micro-chip inserton

 Anal gland expression Ear clean/pluck

I am submitting a **$100.00 deposit** at this time.

I understand **full payment is due when my pet is picked up.**

I can be reached by phone **TODAY** at:

 1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

My **evening phone** is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My **phone tomorrow** is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Another person who can make decisions concerning my pet is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 who can be reached at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Normal "pick-up" times are 4:00-5:30 p.m.

A good time to pick-up my pet is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Owner's signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_