

## **Potlatch Veterinary Clinic**

240 6th Street Potlatch, Idaho, 83855 Ph: 208-875-4838

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10-17-2024

## **Anesthesia/Sedation Consent Form**

All anesthetized/sedated procedures include a pre-anesthetic physical exam, nail trim, internal ear exam, IV catheter, anesthetic monitoring, recovery monitoring and a pain injection (if necessary) and an anti-nausea medication (if necessary).

## **Contact Information**

<u>Contact information</u>	
Procedure:	
Owner: Dr McConnel, Lindsey & Craig Animal:	
I can be reached today at the following number	
If I am unable to be contacted, please contact	
Different party picking up? If yes or unsure please fill out the below information for ALL possible parties.	
Persons Name Phone Number Text? Financial Responsible? Medica Responsible	nsible
Pre-Anesthetic Blood Work  Please select one option below	
☐ Basic Chemistry Panel and CBC \$134.10	
o Includes a basic internal organ screen, electrolytes, and full red and white blood cell count	
□Advanced Chemistry Panel and CBC \$174.65	
o Includes a full screen of major internal organs, electrolytes, and full red and white blood cell count	
□ Comprehensive Chemistry Panel and CBC \$226.30	
<ul> <li>Includes a full screen of major internal organs, electrolytes, full red and white blood cell count, SMDA, and T4 lev SDMA and T4 levels can be checked with any pre-anesthetic panel.</li> </ul>	els
□ Additional Bloodwork: SDMA + T4 \$51.60	
SDMA and T4 levels can be checked with any pre-anesthetic panel	
□ I decline blood work and understand there are increased risks during anesthesia.  *Note: If your pet is over 10 years old, IV fluids and a pre-anesthetic blood panel are highly recommended and may	be

Intravenous (IV) Fluid Support	
IV fluids are recommended to maintain your pet's blood pressure and decrease the risks of organ damage from decrease	ed

blood pressure, prevent dehydration Please choose an option below.	n, and to aid in recovery, as well as to provide a life-line in the event of an emergency.			
☐ Administration of IV fluids \$45.50				
☐ I decline IV fluids and therefore	accept the increased risks during anesthesia.			
Treatment of a post-surgical incision	Surgical Incision Treatment  In site alleviates pain and inflammation while promoting faster wound healing and tissue reatment performed at the end of your pet's procedure during their post-op recovery.			
☐ Post-Surgical Incision Laser Treatmen	nt \$10			
☐ I understand the benefit of post-	surgical laser therapy but decline the additional procedure today.			
Cardiopulmonary arrest is when an a compressions, artificial breathing, as successful. A great deal of this succe possible that a resuscitated patient technically deceased for any period informed consent to proceed with or any amounts quoted for this proced.  Do whatever is necessary to stab that I am responsible for ANY cobill in full regardless of the outce.  Do whatever is necessary to stab limit)				
Additional Services While is under the comfort of an wish to have performed today.	nesthesia/sedation we offer the below services. Please check the box(es) you			
☐ Microchip \$32.86	□Apply topical flea treatment \$25-60			
□ Express Anal Glands \$15	☐ Heartworm Test \$14.80			
□Ear cleaning (if necessary) \$15	☐ Feline Leukemia/FIV Test \$57.85 (Feline Only)			
Pre-anesthetic/Sedation	n History			
When was the last meal you	our pet ate?			
When did your pet last have access to water?				

Medication Name	Amount given & How often	Last Given
Please review all state	ments below:	
he procedure has been explarith anesthesia.	ained to me by a Potlatch Veterinary Clinic st	taff member and I understand the risks asso

If any complications arise, I will not hold the doctors or any support staff at Potlatch Veterinary Clinic responsible.

I understand that if my pet has not yet been vaccinated against Rabies and is healthy, they will be vaccinated during the

I am the owner of this animal and hereby am authorized to sign this release.

**Comments:** 

procedure today for \$12.

I understand that 100% of the low end of the estimate is due as a deposit at admit and all remaining services rendered will be due prior to discharge of the patient with cash, check, Visa, Mastercard, Care Credit, etc.

I hereby allow the doctors at Potlatch Veterinary Clinic to perform procedures on my pet as stated above

By signing this document I have carefully read and understand the terms and conditions set forth by Potlatch Veterinary Clinic and agree to all the above statements.

Name (Printed/Typed):	
10-17-2024	
Signature: Date: October 1	7. 2024