



Potlatch Veterinary Clinic
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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

Procedure: _____

Owner: _____ 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?	Medically Responsible?
		☐	☐ Yes, they will pay the final bill. ▼	☐ Yes ▼
		☐	☐ Yes, they will pay the final bill. ▼	☐ Yes ▼

Pre-Anesthetic Blood Work

Please select one option below

☐ Basic Chemistry Panel and CBC

- Includes a basic internal organ screen, electrolytes, and full red and white blood cell count

☐ Advanced Chemistry Panel and CBC

- Includes a full screen of major internal organs, electrolytes, and full red and white blood cell count

☐ Comprehensive Chemistry Panel and CBC

- Includes a full screen of major internal organs, electrolytes, full red and white blood cell count, SDMA, and T4 levels
SDMA and T4 levels can be checked with any pre-anesthetic panel.

☐ Additional Bloodwork: SDMA + T4

- 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*

required by the veterinarian for the safety of the patient.

Intravenous (IV) Fluid Support

IV fluids are recommended to maintain your pet's blood pressure and decrease the risks of organ damage from decreased blood pressure, prevent dehydration, and to aid in recovery, as well as to provide a life-line in the event of an emergency.

Please choose an option below.

☐ Administration of IV fluids

☐ **I decline IV fluids and therefore accept the increased risks during anesthesia.**

Therapeutic Laser Post-Surgical Incision Treatment

Treatment of a post-surgical incision site alleviates pain and inflammation while promoting faster wound healing and tissue regeneration. This is a single laser treatment performed at the end of your pet's procedure during their post-op recovery.

Please choose an option below.

☐ Post-Surgical Incision Laser Treatment

☐ **I understand the benefit of post-surgical laser therapy but decline the additional procedure today.**

Cardiopulmonary Resuscitation (CPR): Informed Consent

Cardiopulmonary arrest is when an animal stops breathing on its own or its heart stops beating. CPR can involve chest compressions, artificial breathing, and/or administration of drugs in an attempt to resuscitate the patient. CPR is not always successful. A great deal of this success depends on pre-existing conditions (age, overall fitness, prior illness, etc.) It is possible that a resuscitated patient will have suffered brain damage or other long-term ill effects from having been technically deceased for any period of time. In the event, your pet stops breathing or the heart stops beating, we need your informed consent to proceed with or to withhold resuscitation efforts. CPR charges start at \$50-200 and will be in addition to any amounts quoted for this procedure. **Please choose an option below.**

☐ Do whatever is necessary to stabilize my pet with NO cost limitations. **I understand that I am responsible for ANY cost accrued and will be expected to pay the final bill in full regardless of the outcome.**

☐ Do whatever is necessary to stabilize my pet, but do not exceed \$ (Please list limit)

☐ Do not resuscitate my animal in the event of cardio-pulmonary arrest

Additional Services

While is under the comfort of anesthesia/sedation we offer the below services. Please check the box(es) you wish to have performed today.

☐ Microchip

☐ Apply topical flea treatment

☐ Express Anal Glands

☐ Heartworm Test

☐ Ear cleaning (if necessary)

☐ Feline Leukemia/FIV Test (Feline Only)

Pre-anesthetic/Sedation History

When was the last meal your pet ate?

Comments:

When did your pet last have access to water?

Comments:

Is your pet on any medications or supplements? If yes, please fill out chart below.

Medication Name	Amount given & How often	Last Given

Please review all statements below:

The procedure has been explained to me by a Potlatch Veterinary Clinic staff member and I understand the risks associated with anesthesia.

If fleas are found on my pet, they will be treated with a 24-hour preventative.

I understand that if my pet has not yet been vaccinated against Rabies and is healthy, they will be vaccinated during the procedure today for \$14.

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

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

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):

Signature: **Date:** _____