

Family Pet Clinic Veterinary Hospitals

6724 Mid-Cities Blvd.
North Richland Hills, TX 76180
Main: (817) 788-2525
Fax: (817) 788-5575

6813 Grapevine Hwy.
North Richland Hills, TX 76180
Main: (817) 284-9285
Fax: (817) 589-0198

303 W. Northwest Hwy.
Grapevine, TX 76051
Main: (817) 488-4618
Fax: (817) 251-1760

Anesthesia/Surgical Consent Form

Owner's Name: _____ Pet's Name: _____
Address: _____ Pet's ID: _____
_____ Pet Species: _____
Phone #1: _____ Pet Breed: _____
Phone #2: _____ Pet Sex: M F NM SF
Email: _____ Pet Color: _____

Our greatest concern during anesthesia and surgery will be the welfare of your pet. Before putting your pet under anesthesia, we will perform a pre-surgical physical examination. *However, many conditions, including disorders of the heart, liver, kidneys or blood may not be detected unless blood and heart testing are performed. To avoid potential problems and to further protect your pet's health and safety, we strongly recommend blood screening and ECG prior to any anesthetic procedure. **Hospital policy requires analgesia (pain medication) be provided to all pets receiving surgery at owner's expense. IV catheterization and fluids are also required for all pets (except in cases of feline neuters unless specifically requested by the client) at owner's expense. The pet must also be current on vaccines and free from external parasites or the hospital will provide such services at owner's expense. Surgery will not be scheduled and/or begun without owner's consent below of these policies.*** Your pet will be closely monitored while under anesthesia, but even with close monitoring, anesthesia still carries a small risk of anesthetic death.

_____ I understand that my pet must be current of required vaccines and free from external parasites to be admitted into the hospital or the hospital will provide the necessary services at my expense.

_____ I understand that FPC will provide pre-/peri-operative and post-operative analgesia to my pet at my expense.

_____ I understand that FPC will provide pre-/peri-operative IV catheterization and fluids to my pet at my expense. Note: Unnecessary for feline neuter surgeries unless requested below.

_____ I request that FPC provide IV catheterization and fluids to my cat receiving a neuter at my expense.

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_____ I have received a written treatment plan for the scheduled surgery/procedure. I understand that the treatment plan provides only an estimate to the services and charges. Actual services and charges may vary for which I agree to pay in advance or at time of discharge.

*****The following services listed below are in addition to the cost of the surgery*****

_____ YES, I want my pet to have the recommended blood screening. Initial here _____ if you do not wish to have the recommended blood screening.

_____ I understand that if my female pet is in heat or is pregnant during the OHE (spay), there will be additional charges for which I am responsible. Initial here _____ if you would like the OHE cancelled if your pet is discovered to be in heat or pregnant. Note: You will be responsible for all charges leading up to the stopped surgery.

_____ I understand that any retained, broken or abscessed teeth will be extracted while my pet is under anesthesia at additional cost for which I am responsible. Initial here _____ if you decline this service. Note: Performing this service at a later date will require anesthesia.

Our staff will contact you when your pet is in recovery or if there are any problems/questions. Thank you for choosing Family Pet Clinic for the treatment of your pet. Rest assured that we will provide the comfort and safety you expect and per your release. Please see one of our staff members and review the explanation of services if you have any questions.

I, being responsible for the above named pet(s), have the authority to grant Family Pet Clinic my consent to receive, prescribe for, treat, and perform surgery on said pet(s). I also consent to the administration of anesthesia as needed. I acknowledge that no assurance or guarantee has been made of the results of anesthesia, treatment, and/or surgery, and possibilities of complications exist with any anesthesia, treatment, and/or surgery. All charges, including boarding costs, shall be paid in full when pet is released from the hospital/clinic unless previously arranged with the hospital. If contact is not made by phone or in writing within 10 days of the specified date of release/pick up, the pet will be considered abandoned. It is understood that abandonment does not relieve me from paying any and all costs of said services and use of this hospital/clinic, including cost of boarding. There will be a fee for checks returned to us for any reason.

Signature of Owner or Authorized Representative

_____ **Date:** _____

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Pre-Anesthetic Blood Screen

**(Recommended for all pets particularly for pets 5 years of age and older
or those that have pre-existing medical conditions)**

Anesthesia carries some risk. Blood testing is recommended before any anesthetic procedure. The anesthetic agent is removed from the body by the liver and kidneys. It is important to know before anesthetic induction that these organs are functioning well. Blood work helps us make this determination. Our laboratory is fully equipped and staffed to perform these tests. Results will be immediately available before the general anesthesia is administered. If there is any indication of organ dysfunction or an abnormality is discovered, your doctor will contact you before proceeding with anesthesia and/or surgery and the appropriate steps can be taken to ensure the safety of your pet before anesthetic induction.

Catheter and Fluids

(Mandatory for all patients except for feline neuters)

Dehydration is a common problem associated with anesthesia. The drugs we use to sedate them and the anesthetic gas will contribute to dehydration. Low blood pressure is associated with anesthesia and can result in an inadequate blood flow through the kidneys and other organs. This can result in severe medical problems. The use of IV fluids will counteract the dehydration, low blood pressure and provide us with a direct intravenous line to your pet in case of an emergency.

Pre-Surgical ECG

**(Recommended for all pets particularly for pets 5 years of age and older
or those that have pre-existing medical conditions)**

An electrocardiogram (ECG) is recommended for all pets prior to any anesthetic procedure. Anesthesia places an added burden on the heart, making it important to identify underlying conditions. Our hospital is fully equipped with computerized ECG equipment. This makes rapid evaluation possible and results will be available before general anesthesia.

Analgesia (Pain Medication)

(Mandatory for all pets)

Your pet feels pain similar to the way humans do except they do not have the luxury of describing it. Family Pet Clinic practices advanced pain management procedures and therapy, offering both pre-/peri-operative pain control and post-operative pain control. This allows your pet to be as comfortable during and after surgery as possible, plus be able to recover more quickly.