

Anesthesia Admitting Form

Please read, complete, and return this form on day of surgery.

Surgery Date: _____ **Pet(s):** _____

Procedure: () Spay () Neuter () Ear Crop Cat declaw: () Front () Rear

() Growth Removal # _____ Location _____ () Other _____

For females: Is your pet in heat? () Yes () No

Are Vaccinations Current? Dhlppv, Bordetella, & Rabies (Dogs) () Yes () No

FVRCP, Felv, and Rabies (Cats) () Yes () No

If yes, where and when were the vaccinations given? _____

Patient Information:

Yes No

() () Did your pet eat or drink this morning?

() () Has your pet had any vomiting, diarrhea, or coughing within 20 days?

() () Has your pet ever had seizures?

() () Is your pet allergic to any medications, anesthetics or vaccines?

If so please list: _____

() () Is your pet presently on any medication(s) including aspirin?

If so please list: _____

When was the last feeding time for your pet? _____

Microchip: I would like microchipping performed on my pet while under anesthesia. We use the Home Again pet identification and retrieval system. Additional cost of \$51.99 and that includes the national enrollment fee.

() Yes, I accept () No, I decline

Anesthetic Safety:

Before your pet is anesthetized, the doctors **recommend** pre-anesthetic screening to help identify potential underlying health issues that may influence the anesthetic protocol. Blood screening also establishes a baseline of values in case future medical conditions should arise. **Bloodwork may be required in some pets.**

____ **Profile 1 \$45.00** Recommended for healthy pets younger than 6 years Pre-anesthetic: Creatinine (kidney), Bun (kidney), ALKP (liver), ALT (liver), Glucose (sugar), TP (hydration), and electrolytes.

____ **Profile 2 \$75.00** Recommended for healthy pets 6-9 years old Pre-anesthetic with CBC: Includes all tests in profile 1, plus; Complete blood count (assess anemia, infection, clotting).

____ **Profile 3 \$98.00** Recommended for healthy pets 9 years or older or those with questionable health status
General Health Profile: Includes all tests in profiles 1 & 2, plus ALB (protein), Amylase (pancreas). Bilirubin (liver), Phosphorus (kidney) and Cholesterol. Complete blood count (assess anemia, infection, clotting)

____ I am declining the recommended pre-anesthetic blood screening and request that you proceed with anesthesia. I fully understand that anesthesia and surgery always carry a potential risk.

IV Safety: Intravenous catheter and fluids is the standard of care for all human anesthetic procedures and is advised in our pets to increase safety, protect vital organs, and speed anesthetic recovery. For sterility, hair will be shaved over a vein on the leg so that an intravenous catheter (I.V.) can be placed. **It is recommended for any age** and required for geriatric or sick patients. This is offered at a discounted fee of \$49.00.

- I authorized the above IV safety (may be required on some patients)
 I do not authorize the above IV safety

Laser: Just as in people, laser surgery provides advanced care for your pet by allowing for more rapid recovery and less post-operative complications. Please carefully read the laser surgery pamphlet for all the advantages or ask a staff member.

The cost: \$35 for routine procedure (Level 1)

- Yes, I accept laser surgery. No, I decline laser surgery. Not Applicable

Pain Medication: To ensure the best care for your pet, pain medication is recommended before, during, and after surgical procedures. For many of our routinely performed procedures we have already included the initial dosage of pain medication in the cost of the surgery. However, we also recommend pain medication to be given to your pet while recovering at home. If you would like us to prescribe medications for pain control please indicate below.

Yes, I am interested in pain control
at home.

No, I decline pain medication to go
home.

Please note that if your pet has external parasites (fleas, ticks), they must be treated prior to surgery and this will be at the owner's expense.

Phone # to be reached at today: _____

Signature: _____ Date: _____