

FIELDSTONE VETERINARY CARE SURGICAL FELINE GROWTH REMOVAL ANESTHESIA CONSENT FORM

Responsible Party: _____ Your pet's name: _____

Emergency phone where you may be reached at **during surgery**: _____ and/or _____

Has your pet had anything to eat or drink since midnight last night? If yes, amount and time?

My pet is here today for the following procedure: _____

Is your pet eating, drinking, and acting normally? **YES/NO**

Is your pet currently taking any medications? **YES/NO** If yes, please list the **medications** and **last time given**:

****Pre-anesthetic blood testing is *highly* recommended before any surgical procedure because it helps identify the patients with special medical conditions that may require additional supportive therapy to safely anesthetize your pet. ****

Short profile (\$50)

Gives the doctor info about the function of your pet's main organs (liver and kidneys).

Long profile (\$70)

Gives the doctor electrolyte levels in addition to the information collected in the short blood profile.

Long profile/CBC (\$110)

Gives the doctor the broadest range of information. Combines everything in the long profile in addition to a complete blood count.

Decline pre-anesthetic bloodwork.

While your pet is here with us we can also perform any of the following procedures:

Approval to send growth in for pathology?	(\$85)	YES	NO
Elizabeth Collar?	(\$9-\$21)	YES	NO
Feline rabies vaccine?	(\$17.50)	YES	NO
Feline dist/rhino w/ leukemia combo	(\$34)	YES	NO
Feline leukemia/immune virus test?	(\$46)	YES	NO
Ear cleaning?	(\$12.50)	YES	NO
Nail trimming?	(\$11)	YES	NO
Pain meds? (if needed)	(\$13)	YES	NO
Microchip (includes activation fee)	(\$30)	YES	NO
Ear Tip	Free	YES	NO

Please note that the following charges may apply:

- Flea treatment fee may be applied if fleas are present to safely operate. (The cost will be approximately \$10).
- Cleaning fee may be applied if carrier needs to be cleaned of urine/ fecal matter to safely send cats home in carrier.
(The cost will be approximately \$10)

I understand that my pet will undergo anesthesia and that some risk of injury or death always exists with anesthesia and surgery. I have discussed any concerns I have about these risks with my veterinarian and my questions have been answered to my satisfaction. My signature on this form indicates that I will not hold FVC or any of its agents liable for any complications that may arise and that I understand that results cannot be guaranteed. **I hereby authorize Fieldstone Veterinary Care to perform the above procedures. I also understand that payment is due at the time my pet is picked up and will be paying today by check _____ cash _____ or credit card _____.**

Responsible Party's signature: _____ Dated: _____