

Client: {FULLNAME} Patient: {NAME} Sex: {SEX}  
Date: {CURRENTDATE[SHORT]} DOB: {BIRTHDATE[SHORT]} Species: {SPECIES}  
Phone: {PHONENUMBER} Age: {AGE} Breed: {BREED}

### Anesthetic Safety Recommendation

**Did you check with our receptionist to insure your contact information is current? Y or N**

Your pet is schedule to undergo an elective procedure requiring general anesthesia. The safety of modern anesthesia has improved significantly with increased knowledge, state of the art equipment, and new anesthetic drugs. However, anesthesia can never be considered risk-free. The following will be performed on your pet in order to maximize anesthetic safety by identifying patients that may be at increased risk.

Please initial next to the following statement.

\_\_\_ Intravenous catheter and fluids: To maintain blood pressure during surgery and ensures a readily available route for drug administration in case problem arise. A catheter is of potential value in all anesthetized patients, but especially for extended procedures an in older patients.

\_\_\_ Vital Signs monitor: Provides warning of abnormalities in cardiac, blood oxygen level, blood pressure, body temperature and respiratory function.

\_\_\_ Pain management is not an option. There is no humane reason for your pet to be in pain postoperatively.

**This is strongly recommended but not mandatory:** Chest X-rays with radiologist consultation (\$255.00): Strongly recommended for pets over 10 years of age. Chest radiographs (X-rays) can alert the doctor to potential cardiac or pulmonary problems, thus making the anesthesia much safer.

\_\_\_\_\_ Accept \_\_\_\_\_ Decline

#### **For patients undergoing dental prophylaxis (teeth cleaning):**

During dental cleaning, there are many times when doctor(s) finds teeth that are infected, abscessed, and/or loose that require extractions. Every effort is made to save these teeth, however, extractions may become necessary to prevent oral pain as well as systemic illness in the future. Please provide us with a contact number so we can discuss further treatments. **We do ask you to return our calls in a timely manner so that we do not keep your pet under anesthesia for unnecessary length.** Please understand that there will be an extra charge for extractions.

Contact number: \_\_\_\_\_

**Surgical procedure (s):** \_\_\_\_\_

**Would you like a Microchip implanted at the time of your pet's procedure for \$65.00.**  YES  NO

I have been discussed the procedure described above, including the risks, benefits and alternatives regarding my pet. I have also been explained that with any procedure there is always the possibility of unexpected complication, and no guarantees or promises can be made concerning the results of any procedure or treatment.

PRINT: \_\_\_\_\_

SIGN: \_\_\_\_\_ Date: \_\_\_\_\_