

Nokomis Veterinary Service Anesthesia Consent Form

Owner's Name: _____

Date: _____

Today's Phone #: _____

Procedure: _____

Patient Name: _____

Today's Weight: _____

Please Check the Following:

Pre-anesthetic blood work highly recommended for the safety of your pet undergoing anesthetic procedure. While your pet may appear healthy, this testing can reveal hidden problems. Additional \$95.00-\$104.00.

Accept Decline

Pain Medicine is important following any surgical procedure. Oral pain medication will be sent home with your pet as part of routine post-surgical care. Price varies depending on weight and procedure.

Accept Decline

Pre-Operative anti-nausea injection helps prevent nausea post-op, last for 12 hours. Additional \$22.00.

Accept Decline

IV catheter and fluids are recommended to maintain your pet's blood pressure and decrease anesthetic risk, prevent dehydration, and to aid in recovery, as well as to provide a life-line in the event of an emergency. Additional \$40

Accept Decline

E-collar is recommended to stop patients from licking and chewing on incision sites. NVS will not be held liable for any damage done a patient that declines an E-collar. Additional \$15.00.

Accept Decline

Histopathology on mass removals is helpful in determining whether the mass is malignant or benign. Additional \$137

Accept Decline

****All surgery patients are given an antibiotic & pain injection after surgery \$12.00****

Any animal entering the clinic with fleas will be treated at the owner's expense

DOGS

- | | | |
|--------------------------|----------------------|---------|
| <input type="checkbox"/> | Rabies | \$17.00 |
| <input type="checkbox"/> | DHLP | \$27.00 |
| <input type="checkbox"/> | Bordetella | \$24.00 |
| <input type="checkbox"/> | Heartworm Test | \$30.00 |
| <input type="checkbox"/> | Fecal Float | \$22.00 |
| <input type="checkbox"/> | Microchip | \$75.00 |
| <input type="checkbox"/> | Flea Prevention | |
| <input type="checkbox"/> | Heartworm Prevention | |
| <input type="checkbox"/> | Deworm | |

ADDITIONAL SERVICES

- | | | |
|--------------------------|---------------------|-------------------|
| <input type="checkbox"/> | Clean Teeth | \$130.00-\$145.00 |
| <input type="checkbox"/> | Nail Trim | \$20.00 |
| <input type="checkbox"/> | Clean Ears | \$18.00 |
| <input type="checkbox"/> | Express Anal Glands | \$15.00 |

CATS

- | | | |
|--------------------------|-----------------|---------|
| <input type="checkbox"/> | Rabies | \$17.00 |
| <input type="checkbox"/> | Feline Leukemia | \$25.00 |
| <input type="checkbox"/> | FRVCP | \$25.00 |
| <input type="checkbox"/> | Leukemia Test | \$38.00 |
| <input type="checkbox"/> | Fecal Float | \$22.00 |
| <input type="checkbox"/> | Microchip | \$75.00 |
| <input type="checkbox"/> | Flea Prevention | |
| <input type="checkbox"/> | Deworm | |

Clinic Policy:

I understand that during the performance for this procedure, unforeseen conditions may be revealed that necessitate an extension or variance in the procedure(s). I expect Nokomis Veterinary Service to use reasonable care and judgment in performing the procedure(s). The nature of the procedure and the risks involved has been explained to me, and I realize results cannot be guaranteed. I am also aware that unforeseen events resulting in the procedure(s) will not relieve me from any obligation to all reasonable costs incurred regarding the animal.

Signature: _____

Date: _____