



## PEND OREILLE VETERINARY SERVICE

{CLINICADDRESS1} {CLINICADDRESS2}  
{CLINICCITY}, {CLINICSTATE} {CLINICPOSTALCODE}

### Anesthesia / Sedation Consent

{CURRENTDATE[SHORT]}

**Client Name:** {FULLNAME} **Patient Name:** {NAME}  
**Address:** {ADDRESS1} {ADDRESS2} **Species:** {SPECIES}  
{CITY}, {STATE} {POSTALCODE} **Breed:** {BREED}  
**Sex:** {SEX}  
**Phone Number:** {PHONENUMBER} **Color:** {COLOR}  
**Weight:** {CURRENTWEIGHT} {CURRENTWEIGHTUNIT}

*Our goal is your pet's care and comfort. To help ensure your pet's SAFETY AND COMFORT before and after their procedure, we offer the latest in diagnostic and post-procedure care options.*

#### PRE-ANESTHETIC DIAGNOSTIC OPTIONS

A complete physical exam will be performed on your pet prior to the procedure. However, this may not identify all systemic or metabolic problems. To ensure the safety of your pet we recommend specific pre-anesthetic diagnostics which include:

- Pre-Anesthetic Blood Panels to determine function and health of kidneys and liver as well as determining white and red blood cell counts, platelet counts, glucose and electrolyte levels. In geriatric or at risk pets the doctor may recommend a more in-depth blood panel (General Health Panel).
- Two X-rays to survey your pet's heart, lungs and/or abdomen. May also be used to determine arthritic changes in your pet.
- ECG to detect any underlying heart abnormalities or dysfunction
- Coagulation Panel to ensure clotting factors are adequate.

Choose our pre-anesthetic diagnostic SAFETY PACKAGE and receive a 20% discount for all four. Or you may choose individual items at full price.

**Pre-Anesthetic Safety Package \$369.80**  or choose individual options below

**Blood Panel Options: Pre-Anesthetic \$103.90**  **General Health Panel (included in Safety Package) \$131.60**

**Coagulation Panel: (included in Safety Package) \$67.45**

**ECG (included in Safety Package) \$101.85**

**X-rays (included in Safety Package) \$162.30**

**Decline all recommended diagnostics:**

#### PAIN CONTROL AND INCREASED COMFORT OPTIONS

We care about your pet's comfort during and after surgery. To give our patients the highest standard of care we offer multiple comfort options to aid in your pet's healing. The options available to your pet are individually tailored based on the health status of your pet and the procedure to be performed.

- Peri-operative pain control can include anti-inflammatory injections, local nerve blocks and long-acting nerve blocks.
- Post-operative medications provide your pet relief from the discomfort of surgery as well as helping in recovery and healing.
- Occasionally post-operative sedatives are indicated to help keep your pet calm and quiet during the recovery process.

We are also proud to offer Laser Therapy, which is proven to help promote healing of tissues when applied to the surgical site upon completion of the surgery.

**Post-Operative Pain Medication:** Tablet  Liquid  Transdermal (Cats Only)

**Post-Operative Sedatives:** Yes  No

**Laser Therapy \$10.00:** Yes  No

**Local, Short Acting Nerve Blocks (when indicated) \$43.50:** Yes  No

**Long-Acting Nerve Block/Nocita (when indicated):** Yes  No

This is a newer extended-release local nerve block can be instilled into the tissues at the surgical site or for dental

extractions. It provides 72 hours of pain control at the surgery site. Cost is based on the quantity used which is determined by the size of the patient and the extent of the surgical site. Costs are approximate and will not exceed the listed amount.

**Cats \$19-30**

**Dogs <22 lbs \$19-60**

**Dogs 22-44 lbs \$60-120**

**Dogs 44-88 lbs \$120-240**

**Dogs >88 lbs \$200-300**

**\* Dog Spays and Neuters (any size) \$15-75**

### **MICROCHIP OPTIONS**

For the protection of our pets the insertion of a microchip is recommended but optional at the time of your pet's anesthetic procedure.

**I authorize microchipping \$66.60  I do not authorize microchipping**

### **REGARDING PATIENTS STAYING OVERNIGHT IN THE HOSPITAL:**

At Pend Oreille Veterinary Service we do occasionally keep surgery patients in the hospital overnight prior to, or after surgery. Every effort is made to make our environment as safe and comforting as possible for your pet. However, we do want clients to be informed that we are not staffed 24 hours/day. Your pet will be unattended overnight until the morning staff arrives. Based on availability, we can sometimes arrange a technician to stay overnight with critical patients. For 24 hour monitoring we recommend transport to a fully staffed emergency clinic. There are emergency clinics in Coeur d'Alene, Post Falls and Spokane. Our doctors and staff are available to answer any questions you have regarding your pet's overnight care.

### **RECEIVING UPDATES REGARDING MY PET:**

In the event the doctor has questions or concerns regarding your pet, they will call you on the number(s) listed below. If unable to reach you, the doctor will use their clinical judgement regarding your pet's care.

In regards to routine updates (such as completion of surgery or to confirm discharge time), would you like to be contacted via:

Phone call only

Text and/or picture message to the number listed below

E-mail. E-mail address:

I, the undersigned owner or agent of the pet identified above, certify that I am over 18 years of age and authorize the staff of Pend Oreille Veterinary Service to perform the above procedure(s). In signing this form I am also giving Pend Oreille Veterinary Service permission to treat my pet as deemed necessary on the basis of the veterinarian's findings during the course of the examination and evaluation; understanding that there is no guarantee that treatment will be successful and Pend Oreille Veterinary Service will not be held liable for any loss that may occur. I acknowledge that staff members at this practice have explained the procedures to me, answered questions to my satisfaction and cannot be held responsible for any unforeseeable results. Furthermore, I understand that I am financially responsible for all costs incurred during this surgery treatment and hospitalization. I also assume full responsibility for any additional expenses incurred after the surgical procedure is performed, such as follow up radiographs, re-check physical exams and additional surgery due to post-op complications. These are more likely to occur when there is a failure to comply with the aftercare instructions.

I have read and fully understand the terms and conditions set forth above.

Signature of Owner: {CLIENTSIGNATURE}

Date: 4/20/23

Anesthetic and surgical procedure(s) to be performed: **{ENTERPROCEDURESTOBEPERFORMED}**

Phone number(s) to reach you today: **{NUMBERTOREACHCLIENT}**