Somerset Veterinary Hospital Anesthesia, P.C. and/or Surgical Consent Form

Pet's Name:			
Procedure to be performed:			
Date:			

Like you, our greatest concern is the well-being of your pet. Prior to anesthetizing your pet, we will perform a physical examination. **Blood testing** is advised on all pets prior to anesthesia. Many conditions, including disorders of the liver or kidneys, may be detected through blood testing, possibly before your pet shows clinical signs of illness. In some cases, such as geriatric or sick patients, the doctor *may require* blood testing prior to anesthesia.

• For these reasons, we highly recommend blood screening before such procedures. The total cost for these important tests is $\frac{7900}{}$.

Our in-house laboratory is equipped and staffed to perform blood screening tests. Test results will be immediately available prior to anesthesia and/or surgery.

Please indicate your choice by circling the appropriate response below:

YES: I want my pet to have a pre-anesthetic blood screen.

NO: I do not want my pet to have a pre-anesthetic blood screen.

Intravenous (IV) catheter placement enables us to administer IV fluids during your pet's procedure which helps prevent low blood pressure and dehydration. It also allows for the immediate administration of life-saving drugs in the event of an emergency. In some cases, such as geriatric of sick patients, the doctor *may require* an IV catheter. The cost for this is \$ 50.

Please indicate your choice by circling the appropriate response below:

YES: I want my pet to have an IV catheter.

NO: I do not want my pet to have an IV catheter.

While your pet is under anesthesia, we monitor heart rate, respiratory rate, oxygenation levels, blood pressure, and temperature. This helps us to detect potential anesthetic complications early and treat them before they become life threatening. Although very uncommon, unforeseen complications with your pet's health may arise and require us to take life-saving actions for your pet. During this time we want to make helping your pet as fast and seamless as possible.

Cardiopulmonary Resuscitation (CPR) is the treatment of a pet who has stopped breathing or whose heart has stopped beating. CPR is tailored to meet the needs of an individual pet which may include the following:

 Establishing an airway via insertion of an endotracheal tube and administration of oxygen or medications through the tube.

- Establishing IV access via insertion of an intravenous catheter and administration of fluids and injectable emergency medications.
- Chest compressions

Pets that have survived cardiopulmonary arrest and have been successfully resuscitated are extremely critical and unstable. Management of post-arrest patients requires vigilant monitoring of dedicated critical care personnel. This care is costly and the outcome uncertain. Brain damage is common due to the temporary lack of oxygen to the brain, which can result in blindness and/or impaired mental function leaving a pet with mental and/or physical disabilities.

DNR – **Do not resuscitate** is the decision that *CPR* is not to be performed in the event that the pet stops breathing, has no heartbeat, collapses or becomes unconscious. No effort will be made to revive the pet and death is most certain.

Please indicate your choice by circling the appropriate response below:

CPR: I want the staff to perform CPR on my pet if my pet suffers from cardiac arrest, respiratory arrest, collapse or unconsciousness. I agree to be held responsible for any financial cost associated with this treatment regardless of the outcome.

DNR: I DO NOT want the staff to perform CPR on my pet. I understand that if my pet suffers from cardiac arrest, respiratory arrest, collapse or unconsciousness my pet will pass away.

I understand the procedure to be performed on my pet and have no further questions at this time. I acknowledge there may be concealed health risks to my pet and release the doctors and staff of Somerset Veterinary Hospital, P.C. from any liability relating to unforeseen complications arising from anesthesia/surgery. I the owner understand that I am financially responsible to the Somerset Veterinary Hospital, P.C. for all applicable charges related to this pet. I will be available at the phone numbers listed below. If the doctors at Somerset Veterinary Hospital, P.C. cannot reach me by phone, I agree to allow any treatment deemed necessary for the health of my pet.

Owner's Name:		
Signature:		
Phone Number:		
Secondary Phone N	lumber:	Kantoe, in j