



KOWALIGA
VETERINARY
CARE

Surgery / Anesthesia Consent

Date: _____

Owner: _____

Patient: _____

Address: _____

Species: _____

Phone: _____

Breed: _____

Cell: _____

Sex: _____

Age: _____

Procedure: _____

Your pet will be undergoing general anesthesia plus a surgical procedure today. **In order to recognize any underlying abnormalities your pet may have, we will run a pre-surgical blood profile on your pet. This consists of a CBC, which check blood cells and an ALT, ALKP, CREA, GLU, TP, and BUN, which will check blood glucose, kidney and liver enzymes. This blood test will help us to assess the health of your pet more completely and determine if there are any additions or precautions we need to take before surgery. The cost is \$75.00 per pet.**

OUR SURGICAL PROCEDURES INCLUDE SURGICAL IV FLUIDS, BLOOD WORK, PRE & POST-OPERATIVE PAIN MEDICATIONS, AND AN ANTIBIOTIC INJECTION.

THERE IS AN ADDITIONAL CHARGE FOR MICROCHIPS, NAIL GRINDS AND SCROTAL REMOVAL.

MICROCHIP (\$52.00) NAIL TRIM/GRIND (COMING SOON)

Microchip:

YES

NO, I decline the microchip

Nail Grind

YES

NO, I decline the nail grind while under anesthesia

I understand that some risks always exist with anesthesia and/or surgery and that I am encouraged to discuss any concerns I have with the veterinarian/technician before the procedure(s) is/are initiated. My signature on this form indicates that any questions I have regarding the surgical procedure have been answered to my satisfaction.

Today's Phone Contact: _____ Date: _____

Signature: _____