



Surgery and Procedure Consent



Dr. Ted Horner Dr. Dana Horner Dr. Brett Houlberg
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Owner's Name: _____ Pet's Name: _____ Date: _____

Surgery/Procedure: _____

If lumps/masses are to be removed, please ask for a skin marker and identify all areas or have an employee shave the area where the mass is located.

Does your pet have any known allergies? _____

When did your pet last eat? _____

Pre-anesthetic blood work performed for all patients undergoing an anesthetic procedure and must be current within the last 3 months.

Your pet will receive either subcutaneous or intravenous fluids during anesthesia in order to maintain blood pressure, protect its internal organs and to speed up recovery from its anesthetic procedure.

Dog Owners

A rabies vaccine and bordetella vaccine are required for all animals undergoing anesthetic procedures

Cat Owners

A rabies vaccine is required for all animals undergoing anesthetic procedures

ECG It is highly recommended that an ECG be performed before anesthesia in order to screen for underlying heart conditions not easily identified on physical exam.

Yes, I would like an ECG performed before anesthesia

Microchip Yes, I would like my pet microchipped

Authorization

I authorize the use of the appropriate anesthesia/medications judged necessary by the veterinarian. I understand that even with every conceivable precaution taken; anytime an animal is anesthetized there is a risk that an adverse reaction may occur potentially resulting in death. I understand that during the above listed procedure/surgery, an unforeseen medical condition may become evident that necessitates an extension of or an addition to the procedure. I authorize the performance of any procedures deemed necessary in the professional judgment of the veterinarian. I understand that the results of any procedure cannot be guaranteed. I assume full financial responsibility for this animal.

Signed: _____ Date: _____

Phone number(s) where you can be reached during the procedure: _____