



Client Name _____
Patient Name _____
Procedure _____
Date _____

PRE-ANESTHETIC EVALUATION & PROCEDURE AUTHORIZATION

A complete physical exam will be performed on your pet prior to the anesthetic procedure written above, but this may not identify all systemic or metabolic problems. For this reason, we recommend that your pet have a preanesthetic blood panel to evaluate major organ functions prior to anesthesia.

For young animals, under three years, preanesthetic diagnostics (including an IV catheter) are **strongly** recommended, but not required. We have diagnosed serious disease with our preanesthetic testing on patients in the past. Although your pet may be young, this does not ensure perfect health.

Please indicate your decision regarding preanesthetic testing and the IV Catheter below if your pet is under three years of age:

I want to have a preanesthetic blood panel run: Yes No

For geriatric animals, over seven years of age, preanesthetic diagnostics (including an IV catheter) are critical as the risks of various organ and heart problems are heightened at this life stage. If your pet fits within this age bracket, preanesthetic bloodwork and the IV catheter are no longer optional.

Pain Management: We believe in compassionate, quality medical care for our patients. As a result, all patients will receive pain management during surgery and post-operative recovery as deemed necessary by the veterinarian overseeing each case. Providing pain relief also means that additional medication may be dispensed for use at home.

The nature and purpose of these procedures and treatments, the associated major risks and available alternative treatments have been explained to me. I acknowledge that no guarantee has been made as to the results that may be obtained. I understand that there may be risks involved with anesthesia and that complications, including death, may arise. I will not hold Wags 2 Whiskers Veterinary Hospital and/or the doctors or team liable for any complications or unforeseen results.

Signature of Owner or Authorized Agent _____

Daytime Phones _____ or _____