

# Surgery Consent Form

Owner's Name \_\_\_\_\_ Pet's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZipCode \_\_\_\_\_

Email Address \_\_\_\_\_

Breed \_\_\_\_\_ Color \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

I understand there is always a risk associated with any anesthesia episode, even in apparently healthy animals. I assume all risks with this procedure and related post-operative and follow-up care. I will not hold Operation SOS or it's employees responsible under any circumstances for any injury, escape, or death of my animal. I understand my pet must be picked up by me or my agent **NO LATER THAN 4PM TODAY.**

I agree, **FAILURE TO BE AVAILABLE** for discharge discussion will be considered abandonment and will result in impoundment at the nearest Animal Control facility. I will be responsible for impoundment, board and other related fees or citations. **I WILL ANSWER MY PHONE AT THIS NUMBER.** \_\_\_\_\_

You must agree, **by initialing**, you understand our services are low-cost, partially due to services that are NOT provided on our van but are provided at a full-service Veterinary Hospital. By initialing, you accept the additional anesthetic risk to your pet by not receiving these services.

- 1) We do not provide: Preanesthetic lab work, IV Catheters, or Fluids. \_\_\_\_\_
- 2) We do not provide follow up care. \_\_\_\_\_
- 3) I understand that my pet will receive a green linear tattoo as proof of sterilization. \_\_\_\_\_
- 4) I have received my After-Care instructions. \_\_\_\_\_

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

Name of Person that is picking up Animal \_\_\_\_\_ Phone# \_\_\_\_\_

## Surgery Consent Form Questionnaire

Has your pet eaten today? (circle one) NO YES

Has your pet been sick lately? NO YES (please explain): \_\_\_\_\_

Is your pet on any medications? \_\_\_\_\_

Has your pet had any previous surgeries? \_\_\_\_\_

Is your pet on Heartworm Prevention? \_\_\_\_\_

Is your pet on Flea Control? \_\_\_\_\_

Do you have a primary care veterinarian? YES NO

If you have a female and she pregnant we will proceed with an abortion.

By **initialing**, I accept the increased risk of surgery if my pet is pregnant. \_\_\_\_\_

### **Please circle:**

Does your pet need:(**Required**) 1 YR RABIES(\$10)

Additional Services:(\$10 Each) MICROCHIP DISTEMPER E-COLLAR(CONE)