

Bellingham Animal Hospital, PC
112 Mendon St Bellingham, MA 02019

STANDARD CONSENT FORM

Owner: _____ Date: _____
Address: _____

Phone(s): _____

Patient
Date of Birth: _____
Breed: _____
Sex: U _____
Color: _____
Main Reason For Admittance: _____

I am the owner or agent for the above-described animal and have the authority to execute this consent. I hereby authorize and direct the veterinarians of Bellingham Animal Hospital, PC to perform the procedures and additional diagnostic and/or treatment procedures as deemed advisable and or necessary for my pet, Walk-IN. The nature of the procedure(s) has/have been explained to me and no guarantee has been made as to the results or cure. I fully understand that there are risks involved with such procedures and that unforeseen conditions may be found that necessitate an extension of those procedures and/or different procedure(s) than those set forth.

I authorize the use of appropriate anesthetics and other medication. I understand that hospital support personnel will be employed as deemed necessary by the veterinarian.

I agree to pay, in full, for services rendered, including those deemed necessary for medical or surgical complications of otherwise unforeseen circumstances. Any estimates or charges for the planned procedures are only approximations, and the final bill may be greater or less than these amounts. **All Services are strictly cash, credit card, or check and Must Be Paid Before Walk-IN Is Released. Some Procedures Require A Deposit Be Made Before Surgery.**

I have read, understood _____ and acknowledge that blood work may be done or fluids may be done on my pet's age and risk factors.

Owner's Signature: _____ Date: ___/___/___

Phone number(s) where you can be reached _____

We recommend intravenous fluids during the surgery to maintain blood pressure and ensure Walk-IN's post surgery comfort, especially if your pet is greater than 8 years of age or has an underlying health issue requiring this procedure. We offer this service to our surgical/anesthetic clients at the cost of approximately \$150.

Would you like your pet to receive IV Fluids during surgery?

Yes

No

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Additional Information:

Your pet is scheduled for surgery and/or anesthesia. Using the latest technology and techniques, our medical staff will take every precaution to ensure that your pet is safe and comfortable while under our care. In order for our hospital to minimize the risks to your pet during this procedure, it is important for us to perform pre-anesthetic blood tests. These tests will help our staff to assess any underlying health concerns that might affect the outcome of your pet's procedure, including kidney or liver disorders, hydration status, blood volume, sub clinical infection, and blood sugar levels.

Based on these findings, our staff will be able to ensure that your pet's procedure is completed in the safest possible manner. In order to obtain the greatest medical value from these tests, they will be performed just moments prior to your animal's procedure. If problems are detected on these lab panels, we will notify you before proceeding with any surgery/anesthetic procedure. We offer this service to our surgical/anesthetic clients at the cost of **up to \$150**, depending on the age and health status of your pet. Lab work for dogs and cats greater than 9 years of age is strongly recommended prior to sedation or surgery.

Accept (Initial Accept or Decline)
Please perform these blood tests on my pet prior to surgery/anesthesia

Decline
I understand that these blood tests may detect certain health conditions that can adversely affect the outcome of surgery/anesthesia, but I choose to decline having the tests performed and assume full responsibility for any increased risk to my pet.

****MUST INITIAL ABOVE****

I would like to have a **Home Again Identification** microchip at the cost of **\$75.00**, during my pets visit.

Yes

No

I give permission to remove any retained deciduous (baby) teeth while my pet is sedated for neutering. The additional charge may be in range of **\$30.00 - \$50.00** and is dependant on the difficulty and the time taken to perform the procedure.

Yes

No