

Fort Wayne Pet Hospital Pre-surgical Consent Form

A complete physical exam will be performed on your pet prior to the surgical/dental procedure, but this may not identify systemic or metabolic problems. For this reason, we strongly recommend that all pets have a pre-anesthetic blood panel to ensure that your pet is in the low risk category prior to anesthesia. The latest technology has enabled us to run safe and accurate blood chemistries minutes before anesthetic induction. These tests are similar to those your own physician would run when you undergo anesthesia. In addition, the results will serve as a baseline reference value for future use should your pet become ill. **Pre-anesthetic blood work has 2 options below to assess the health of your pet. This is a significant discount on surgery patients ONLY.** If time allows prior to surgery day or if checking in the night before an Annual Health Panel is the most complete test and is a great value through Idexx.

At doc	Pain Managemen etors discretion, there	t, Nail Trim, & Ab are included in y may be additional	your procedure.	•	• ,		
	Please list	t Procedures/Vac	cs to be perfori	ned today			
	Heartworm Medication	n: □ YES □ NO	Flea/Tick Medication	ı: 🗆 YES 🗆] NO		
Updat	te Vaccinations: YES	☐ NO Fecal To	est (\$39) and/or Anal G	lands (\$12):	YES □ NO		
Flu	iids during surgery recor	nmended for pets 7+ ye	ears old or as recomm	ended (\$68): □	YES □ NO		
	Is Trazadone r	eeded for anxiety/sedatio	n post-operative? 🔲 🖠	YES 🗆 NO			
							
It is recom	mended that cats be tested				est □ \$49 □ No		
		ended Pre-Surgi		-			
Chemistry	Base Bundle 1 ((B1) Chem		Complete Bundle 2 (B2) CHEM 17			
Chemistry	ALB TP	Chem	ALB	TP	AMYL TBIL		
	GLOB GLU ALB/GLOB ALT		GLOB ALB/C	GLOB ALT	CA GGT LIPA		
	BUN/CREA ALKP BUN CREA		BUN/O BUN	CREA ALKP CREA	PHOS CHOL		
	□\$81		□\$108	8	_		
Electrolytes	Na+ K+ Cl- Na+/K+	Electr	rolytes Na+ Cl-	K+ Na+/K+			
	□\$32		□\$32		_		
CBC	Complete Blood Count □\$47	СВС	-	ete Blood Count			
	□ \$47 □ All Tests \$119		□\$47 □ AH /	Tests \$142	_		
	LAII IUSIS JII7		∟AII	1 CS18 D142			

CBC (Complete Blood Count) is a screening test used to diagnose and manage diseases. It can diagnose conditions such as anemia, infection, or problems with clotting. It also can show abnormalities in the production, life span, and rate of destruction of blood cells.

ELECTROLYTE PANEL is a test to detect a problem with the body's fluid and electrolyte balance.

CHEMISTRY is a test to assess the general health and function of the body and internal organs.

□ I DECLINE ALL RECOMMENDED PRE-ANESTHETIC BLOODWORK

Optional Surgical Suggestion:

MICR	OCHIPS are us	sed to permana	tently ident	tify your pet.	Shelters,	rescues,	officers,	and most v	et offices	will scan
all pets	taken in to help	p find owners.	Always upo	date any pho	ne or addr	ess chan	ges.			

\square YES	\square NO	Cost: \$45	TURN OVER TO COMPLETE -
_ 122	_ 1,0	σου. φ.υ	TURN OVER TO COMPLETE

I understand full payme	ent is due at discharge_	(initials)
I understand all surgica of the procedure(s)	_	\$500 require a deposit of \$500 prior to the start
Estimate may change b	ased on post surgical eva	duation.
\$ Estimated To	tal Today (initia	ls)
in hospital care and handling. I listed above and additional pets	hereby authorize this hospital to I present. I understand that vete	l outcome for your pet, and to provide for all possible safety receive, prescribe for, treat, or perform surgery upon the pet(s) rinary service may be provided during night time hours as uous presence of qualified personnel may not be provided.
is otherwise terminated, unless of 1.5% (18% annually) shall be responsible for all unpaid past of is filed, I will also be responsible	otherwise agreed to in writing. I e applied to all amounts not paid lue amounts, and if this account i	he time my pet is discharged from the hospital or the service further agree and acknowledge that a monthly finance charge when due. In the event of nonpayment, I agree that I will be s turned over for collections, regardless of whether or not suit uding court cost and reasonable attorneys' fees. I also agree to m my bank.
		late and do not notify you within that time period, you may ose of my pet as you deem best and/or necessary.
Print Name:	s	ign Name:
Chart Number:	Date:	Best contact Telephone #:
Address:	Held Card Zip Cod	le:Last 4 number of Social Security:
Staff Initials:		

Modified: 12/14/22 TURN OVER TO COMPLETE - 2