

***RICHMOND ROAD VETERINARY CLINIC***

***Anesthesia, Dentistry and Surgery For Your Pet***

Your pet's safety and comfort are very important to us. So that we can help insure their health, all pets undergoing anesthesia, dentistry and surgery here must be examined by one of our doctors. If we have examined your pet within the past year, the pre-surgical exam will be performed at no charge. For the safety of all of our patients, all pets being hospitalized must also be current on the preventive immunizations recommended for them. If needed, we can update those protective vaccines.

Several services that we provide to enhance your pet's safety and comfort are detailed below.

**Pre-Anesthetic Blood Screening** evaluates those organ systems most directly affecting the safety of anesthesia, (the liver and kidneys) and tests for anemia and dehydration. It can help us plan the anesthetic procedures that are the best for your pet. It can be done the same morning of the surgery.

For our older patients, we recommend a more comprehensive **Complete Blood Profile**. This is a diagnostic health check which provides valuable information for both safety and future health care. It can be done the morning of the surgery.

If Blood Screening results are not within the normal range, we will discuss our findings with you. We may need to adjust the medication or the procedure in the best interest of your pet's safety. Occasionally we may postpone the surgery until any medical problems are resolved.

For certain patients undergoing general anesthesia, we recommend intravenous fluids during the procedure. This helps to maintain blood pressure, oxygen perfusion, assist the body in processing anesthetics, and provides immediate access to administer medications in case of an emergency.

We recommend **Pain Management** medication following surgery to help ensure your pet's comfort.

**PLEASE CHECK THE SERVICE THAT YOU WOULD LIKE FOR US TO PROVIDE:**

Pre-Anesthetic Blood Screen     Complete Blood Profile     I prefer no preanesthetic tests

I request a Pre-Op EKG     I decline a Pre-Op EKG     I request Pre-Op X-rays     I decline X-rays

I hereby authorize and direct Richmond Road Veterinary Clinic to perform the procedure(s) noted below and to administer anesthetic or other drugs as deemed advisable for my pet. I understand the nature of the procedure(s) and the relative risks involved. I authorize the Richmond Road Veterinary Clinic or its agents to provide any appropriate care should an unexpected complication arise.

**PROCEDURE(S):** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PET'S NAME:** \_\_\_\_\_ **DOCTOR:** \_\_\_\_\_

**OWNER'S NAME:** \_\_\_\_\_ **TODAY'S PHONE #** \_\_\_\_\_

**SIGNATURE OF OWNER/RESPONSIBLE AGENT** \_\_\_\_\_