

# Andover Animal Hospital

233 Lowell Street, Andover, MA 01810  
978-475-3600

Client Name: \_\_\_\_\_

Patient: \_\_\_\_\_ Client#: \_\_\_\_\_

Procedure(s): \_\_\_\_\_ Date: \_\_\_\_\_

## Feline Surgical Consent Form

\*Please initial your choice from the following:

**1. Pre surgical blood screens:** Blood work already done \_\_\_\_\_

\_\_\_\_\_ **Tier I** - Consists of PCV/TS, Blood Urea Nitrogen and Blood Sugar. **Cost \$25.00.**

For healthy cats under 3 years, undergoing elective surgical procedures.

Screens for anemia, dehydration, kidney problems, and blood sugar abnormalities.

\_\_\_\_\_ **Tier II** - Consists of a PCV/TS, and Chemistry Profile. **Cost \$80.00.**

Recommended for any cat 3-7 years old requiring anesthesia. In addition to the above information, this will give us a better idea of internal organ functioning.

\_\_\_\_\_ **Tier III** - Consists of a Chemistry Profile and a Complete CBC. **Cost \$138.00.**

Recommended for older or very sick animals. Shows organ function as above plus provides platelet and white blood cell counts.

**2. Fluid Administration During Surgery:**

\_\_\_\_\_ **IV Fluids:** recommended and **required** for pets over 7 years of age, sick pets, or pets who will be under anesthesia for an hour or more. This is the best way to keep blood pressure normal and keep internal organs healthy and hydrated during anesthesia. Intravenous fluids given through a catheter cost **\$35-\$70.**

\_\_\_\_\_ **SQ Fluids:** recommended for young healthy pets to prevent dehydration and speed recovery. cost **\$15-\$30.**

\_\_\_\_\_ I decline all fluid administration.

**3. FELV/FIV Testing:**

\_\_\_\_\_ Feline leukemia and feline immunodeficiency virus testing is recommended within one year prior to anesthesia for cats who go outdoors. Indoor cats must have had this test done and have negative results in their medical records. We will test your cat if there is no prior documentation. Cost **\$50.00**

**4. Post-Operative Pain Medications:**

Pain medication is used with every procedure and aids in a more comfortable and swifter recovery. For most surgical procedures we will send home pain medication for you to give your pet at home.

\_\_\_\_\_ I understand I will be receiving pain medicine(s) to give to my pet at home.

\_\_\_\_\_ I do not want my pet to have additional post-operative pain medication.

**5. Dental Procedures:**

\_\_\_\_\_ **Dental Level 1 and 2-** I am aware that extractions are rare but may be necessary. A maximum of two extractions and with x-rays will be an additional cost of \$100.

\_\_\_\_\_ **Dental Level 3 and 4-** usually have extractions (\$30-\$90) and x-rays(\$50-\$140) as quoted.

\_\_\_\_\_ I approve full mouth baseline x-rays at \$140 additional.

**6. Emergencies:**

\_\_\_\_\_ I hereby authorize treatment in the case of an unforeseen emergency. I understand that I will be notified as soon as possible.

\_\_\_\_\_ Do Not Resuscitate my pet (DNR). I wish to be notified prior to treatment of an unforeseen emergency. I understand that the delay in treatment could result in serious complications, including death.

\*I hereby give my consent and authorize the **use of general anesthesia** on my pet. I understand that there are still possible reactions, allergies and other sensitivities, that may result in **complications** including death of the patient. These reactions are uncommon, but still occur in a small percentage of patients.

I am also accepting that risks and complications are an inherent part of any surgical or medical procedure.

**I understand my pet is not supervised 24/7.**

Signature of Owner or Authorized Agent \_\_\_\_\_