

Fort Wayne Pet Hospital Pre-surgical Consent Form

Pet Name: _____

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 recommend that your pet 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 were you to undergo anesthesia. In addition, the results will serve a reference values for future use should your pet become ill.

Pre-anesthetic blood work to assess the health of your pet with a \$40 discount on surgery day ONLY

	Recommended for younger pets (<1yr)		Recommended for older pets (>1yr)	
Chemistry	ALB	TP	ALB	TP
	GLOB	GLU	GLOB	GLU
	ALB/GLOB	ALT	ALB/GLOB	ALT
	BUN/CREA	ALKP	BUN/CREA	ALKP
	BUN	CREA	BUN	CREA
			AMYL	CA
		LIPA	PHOS	
		CHOL	GGT	
		TBIL		
	CHEM 10	\$68	<input type="checkbox"/>	
				CHEM 17
				\$88
				<input type="checkbox"/>
Electrolytes	Na+	K+	Na+	K+
	Cl-	Na+/K+	Cl-	Na+/K+
		\$23	<input type="checkbox"/>	
				\$23
				<input type="checkbox"/>
CBC	<u>Complete Blood Count</u>		<u>Complete Blood Count</u>	
		\$40	<input type="checkbox"/>	
				\$40
				<input type="checkbox"/>
Bundle	<u>All Tests</u>		<u>All Tests</u>	
		\$89	<input type="checkbox"/>	
				\$108
				<input type="checkbox"/>

Please list procedures to be performed today

It is recommended that cats be tested for Feline Leukemia Virus prior to surgery.

- FelLK/ FIV/ HW Test** **\$42**
- I DECLINE ALL BLOODWORK**

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

Would you like your pet to have absorbable sutures in the skin, eliminating the need for a return visit for suture removal?

- YES NO Cost: \$13

To make your pet more comfortable during the first few days after surgery, we strongly recommend our Surgical Pain Package. This package includes oral medication and a laser treatment at the surgical site to help with inflammation, pain and swelling.

- YES NO Laser Therapy Only (if already have pain medication at home)
- Cost: Canine: \$16 Feline (Under 6 lbs): \$16 Feline (6-10 lbs): \$22
- Pain Medicine Is REQUIRED for all declaws* Feline (10+ lbs): \$22 + Simbadol Injection/lb

We offer microchipping as a way to permanently identify your pet.

Fort Wayne ACC scans all pets taken in to help find owner I.D.

- YES NO Cost: \$45

I understand full payment is due at discharge _____ (initials)

I understand all elective surgical procedures more than \$500 are paid prior to the procedure _____ (initials)

I understand every effort will be made to achieve a successful outcome for your pet, and to provide for all possible safety in hospital care and handling. I hereby authorize this hospital to receive, prescribe for, treat, or perform surgery upon the pet(s) listed above and additional pets I present. I understand that veterinary service may be provided during night time hours as necessary in the judgement of the veterinarian in charge. Continuous presence of qualified personnel may not be provided.

I agree fees for services rendered will be due and payable at the time my pet is discharged from the hospital or the service is otherwise terminated, unless otherwise agreed to in writing. I further agree and acknowledge that a monthly finance charge of 1.5% (18% annually) shall be applied to all amounts not paid when due. In the event of nonpayment, I agree that I will be responsible for all unpaid past due amounts, and if this account is turned over for collections, regardless of whether or not suit is filed, I will also be responsible for all costs of collection, including court cost and reasonable attorneys' fees. I also agree to a service fee of \$25.00 for each check that is returned unpaid from my bank.

If I neglect to pick up my pet within 5 days of the discharge date and do not notify you within that time period, you may assume that my pet is abandoned and you are authorized to dispose of my pet as you deem best and/or necessary.
agreement.

Signer: _____ **Date** _____ **Best contact Telephone #:** _____

Address _____ **Held Card Zipcode** _____ **Last 4 number of Social Security** _____

Staff Initials: _____
Modified 1/4/2021