

SURGERY AND ANESTHESIA CONSENT
MOUNTAINVIEW VETERINARY SERVICES

90 Southern Drive 309 Virginia Avenue #2
Keyser, WV 26726 Petersburg, WV 26847
304-788-6602 304-257-5711
FAX 304-788-6607 304-257-5719

OWNER: _____ DATE: _____

PATIENT: _____ PET'S AGE _____

Procedure performed today: _____

For Dentals: Please indicate if we have your permission to perform extractions, if necessary. There will be additional charges for each extraction.

___ Yes ___ No

Like you, our greatest concern is the well-being of your pet. Many conditions, including disorders of the liver and kidneys are not detected unless blood testing is performed. We highly recommend blood screening before anesthesia. Please indicate whether you would like your pet to have this important blood test. Cost of this test is \$60.00.

___ Yes ___ No

While undergoing surgery, your pet will receive anesthetic drugs that prevent pain. Additional medications are available that enable us to safely and effectively control your pet's discomfort after surgery. Since pain has been shown to lengthen your pet's healing time, pain medication is highly recommended. Please indicate whether you would like post-operative pain medication for your pet. The cost of this medication is \$22.00-\$40.00, depending on the size of the patient.

___ Yes ___ No

An I.V. catheter with intravenous fluids may also be administered during your pet's anesthetic procedure in order to keep the patient hydrated, maintain blood pressure, and to have intravenous access. The cost of this is \$49.00.

Yes No

The micro-chip is a device that is placed under the skin of your pet and is a way to identify your pet if it is ever lost or stolen. The cost of this procedure is \$50.00.

Yes No

Please indicate if you would like a heartworm test performed on your pet. Please note this test is only for dogs over 6 months of age. The cost of this test is \$15.00 for the Heartworm only test, \$30.00 for the Heartworm, Lyme, and Ehrlichia test.

Yes No

Please indicate if you would like a feline leukemia/feline immunodeficiency virus test performed on your pet. Please note this test is only for cats. The cost of this test is \$40.00.

Yes No

The following procedures are at no cost to you. Please indicate if you would like these performed while your pet is under anesthesia.

Nail trim: Yes No Ear cleaning: Yes No

I, the undersigned, do hereby certify that I am the owner of the animal described above, and that I authorize and direct Mountainview Veterinary Services and its agents and/or representatives full and complete authority to perform the above mentioned surgical procedure and/or do any other therapeutic procedure that in their judgment may dictate to be advisable for the patient's well being. I understand the risks and nature of the operation and no warranty or guarantee has been made as to the result or cure.

Signature: _____ Date: _____

Telephone number where you can be reached today: _____