



**Heartland Veterinary Clinic**  
 933 W. Hwy 14 Bypass  
 Brookings, SD 57006  
 (605)697-5252

## Surgical and Anesthesia Consent Form

Owner's Name: \_\_\_\_\_  
 Pet's Name: \_\_\_\_\_  
 Procedure(s): Mass Removal

Where can we reach you today?  
 \_\_\_\_\_  
 Work Cell Home (circle one)

I understand that in performing the above procedure my pet will receive a general anesthetic. I understand that some risk of injury or death always exists with anesthesia and/or surgery, and I am encouraged to discuss any concerns I have about those risks with my veterinarian or a veterinary team member before the procedure is initiated.

**Mass Removals:** Would you like a biopsy of the mass sent to the laboratory for further testing? Yes or No *(Please circle one)*

Pre-Anesthetic Blood Work	Fluid Support
<p>Our on-site laboratory allows us to screen for hidden problems before your pet's treatment begins. These tests also provide a baseline for monitoring your pet during surgery and can indicate chemical imbalances that could affect your pet while under anesthesia. Pre-anesthetic blood work checks the function of the internal organs and blood counts. <b>It is a vital part of safe anesthesia.</b> Choosing to perform blood work before anesthesia or sedation helps us provide the best level of care for your pet. Pre-anesthetic blood work will help minimize the risks during anesthesia and surgery. This is a basic internal organ screening (liver, kidneys, etc.) with electrolytes and a full red and white blood cell count.</p> <p><b>We highly recommend blood work for all anesthesia patients, especially those over 6 years of age.</b></p> <p><input type="checkbox"/> <b>Blood Work:</b> Serum Chemistry with Electrolytes and Complete Blood Count (CBC) – \$92.00</p> <p><input type="checkbox"/> <b><u>I decline blood work and understand there are increased risks during anesthesia.</u></b></p>	<p>Fluid Support helps your pet recover faster from anesthesia. To give <b>Intravenous (IV) fluids</b>, we place a sterile catheter in your dog's vein during anesthesia to help maintain blood flow to the organs and keep blood pressure normal. <b>Subcutaneous (SQ) fluids</b> are administered under the skin and slowly absorbed while they are under anesthesia and recovering. Fluid Support greatly increases the safety of anesthesia. In addition, the administration of fluids helps patients expel the anesthetic from their bodies faster, allowing them to recover easily.</p> <p><input type="checkbox"/> <b>Canine Procedures:</b> IV fluids administered – \$50.00  <i>Note that some additional charges may apply due to the length of the procedure.</i></p> <p><input type="checkbox"/> <b>Feline Procedures:</b> Subcutaneous fluids administered – \$27.50</p> <p><input type="checkbox"/> <b><u>I decline fluid support and understand there are increased risks during anesthesia</u></b></p>

### Additional Services While Under Anesthesia

<input type="checkbox"/> Nail Trim – Complimentary	<input type="checkbox"/> Express anal glands – \$19.00
<input type="checkbox"/> Microchip Implantation – \$65.00	<input type="checkbox"/> Ear Cleaning – \$22.50
<input type="checkbox"/> Heartworm test – \$43.50 or	<input type="checkbox"/> Feline Leukemia/FIV test (Cats only) – \$43.00
<input type="checkbox"/> 4DX test (Dogs Only) – \$57.25	

**\*\* In addition, if any external parasites are observed on your pet, they will receive treatment at my (the owner's) expense. This is to ensure the health and safety of all our patients at Heartland Veterinary Clinic.**

**Appropriate pain medication is routinely given to patients after all surgical procedures.** The cost will be in addition to the procedure and dependent upon the weight of the animal.

### Authorization and Risk Assessment

I understand that during these procedures, great care is taken to ensure my pet's health, but unforeseen conditions may be revealed that necessitate an extension or variance in the procedure(s) defined above. **I authorize Heartland Veterinary Clinic to perform any additional diagnostic, treatment, or surgical procedure deemed necessary for medical or surgical complications or any unforeseen circumstances.** I understand the risks and understand that the veterinarians and hospital team will do everything possible to reduce any associated risks. I will **not** hold Heartland Veterinary Clinic, the veterinarians, or veterinary team members liable for any complications that may arise. I also understand that **I assume financial responsibility for all services rendered and that all charges are to be paid at the time of service.**

Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_