



Surgical Release Form

Consent:

Parkway Animal Hospital requires all pets admitted to our facility be currently vaccinated for Rabies as well as core canine (including Bordetella and Leptospirosis)/feline vaccines. If vaccinations cannot be verified or they have not been given. They will be administered upon check in at the owners expense. To protect our patients, we reserve the right to treat any animal in our hospital for fleas and ticks at an additional cost.

I agree to pay, in full, for services rendered, including those deemed necessary for medical or surgical complications or any unforeseen circumstances. Any estimates or charges for the planned procedures are only approximations, and the final bill may be greater or less than these amounts.

I understand that my pet is scheduled for a procedure that requires anesthesia. It is my understanding that patients at Parkway Animal Hospital will have an IV catheter placed and receive intravenous fluids throughout their surgical procedure. I request the use of anesthetics (medications and inhalants) for the relief and protection of my pet from pain during and after said procedure(s). I do hereby release said doctor and staff from any, and all liability arising from said surgery on said animal.

I have read and understand the above written. I do hereby certify that I am the owner (authorized agent for the owner) of the animal described above. I do hereby authorize the veterinarian(s) of Parkway Animal Hospital and attending staff full and complete authority to perform the surgical procedure indicated below.

Patient Name: _____ Date: _____

Procedure(s) To Be Performed: _____

Signature of Owner/Authorized Agent: _____

Phone Number: _____

Contact Preference: ☐ App Chat ☐ Text Message ☐ Phone Call





Pre-Anesthetic Blood Profile

In order to reduce the risk of complications during surgery, it is advised that a pre-anesthetic blood panel be performed prior to administration of any anesthetic agents. This profile will help rule out any pre-existing internal problems that may not be evident during a physical examination, but could lead to complications. In our patients less than 7 years of age it is optional, but for our patients 7 years of age and older it is a requirement.

_____ **Yes**, perform the recommended/required bloodwork (**Cost: \$111.79**) on my pet.

_____ **No**, I have decided to decline the bloodwork at this time. I fully understand and accept the risk of performing this procedure without the recommend bloodwork.

Anesthetic Choice

Parkway Animal Hospital offers the choice of two extremely safe inhalant anesthetics Isoflurane (Iso) and Sevoflurane (Sevo). Iso is the most widely used inhalant anesthetic in veterinary medicine. Sevoflurane has minimal effect on the heart, respiration, and it offers a smoother anesthetic induction and recovery. For this reason, Sevo is the preferred anesthetic inhalant at Parkway Animal Hospital. For our patients 7 years of age and older or with known medical health conditions Sevoflurane is a requirement. Sevoflurane for most procedures is an additional fee of **\$56.18**. The final decision will be made at the doctor's medical discretion.

Based on the information given, I select the use of:

_____ Sevoflurane (**Cost: \$56.18**)

_____ Isoflurane

Home Again Microchipping

Parkway Animal Hospital offers microchipping for your pet. With your pet having a microchip veterinarians and animal shelters are able to help reunite you with your pet should they ever become lost. The cost for implantation and registration is **\$76.35**.

_____ **Yes**, please microchip my pet. (**Cost \$76.35**)

_____ **No**, do not microchip my pet/my pet is already chipped and registered.



Dental Consent

As part of your pet's dental COHAT, we will chart their oral health and add it into their patient chart. At this time, we may find teeth that require additional work or gingiva in need of additional therapy. If the need should arise for an extraction to be made or a treatment applied. We (a Parkway staff member) will attempt to contact the owner only once between the hours of **9 am-2 pm**. This is due to subjecting the patient to prolonged anesthesia.

If contact is not made with the owner/authorized agent, the final decision treatment will be made at the doctor's medical discretion. In the event an extraction needs to be made it is my understanding that pain medication and/or antibiotics may need to be sent home.

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