



440 Chippewa Ave.  
Manistique, MI 49854

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\_\_\_\_\_, is scheduled for \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_.

There are several important items to clarify prior to any procedure.

**Anesthesia:** Your pet will require general anesthesia for the scheduled procedure. General anesthesia is usually a safe procedure; however, there can be unanticipated complications due to medical conditions or anesthetic drug sensitivities that can not be found on physical exam. To help minimize these risks, the following options are available:

**Pre-anesthetic lab** tests are recommended for all patients and are strongly encouraged for those 6 years and older and for those with documented pre-existing medical conditions. Laboratory tests screen for underlying diseases. These problems are uncommon in young animals and more of a concern in older patients. Cost for lab tests are \$118.00.

I would like my pet to receive pre-anesthetic lab tests    Yes    No

**Intravenous (IV) catheter and fluids** to help support blood pressure, and to facilitate emergency treatment if needed.

An additional fee of \$88 will be charged for IV catheterization and fluids.

I would like my pet to receive IV fluids    Yes    No

**Dental Procedures:** At time of your pet's dental procedure, severely diseased teeth may be encountered and may require extractions.

**I authorize extractions if any are necessary**    Yes    No

**IF NO - I would like to be notified prior to any extractions**    Yes    No

**\*\*If you answer no and we cannot reach you in a timely fashion your pet will be woke up from anesthesia and rescheduled for extractions. A new estimate can be provided for this 2<sup>nd</sup> procedure at your request. \*\***

**Analgesia: All surgeries are painful procedures** and pain can negatively affect your pets' healing and recovery. Analgesics (pain relievers) will be administered at the time of surgery with additional pain relievers dispensed to be given orally at home. **Cost ranges from \$14- \$35 depending on the size of your pet.**

*\*\*\*Antibiotics and/or flea control are sometimes needed and are addressed on a case by case basis. These items will be added to your invoice at an additional cost if needed. \*\*\**

**Histopath:** Yes / No

Current Medications: \_\_\_\_\_ Time of last dose: \_\_\_\_\_ am/pm

When is the last time pet has eaten? \_\_\_\_\_ am/pm When is the last time pet has had anything to drink? \_\_\_\_\_ am/pm

I would like an Elizabethan collar for my pet:    Yes / NO    (Also known as a "cone" cost is \$10)

Date of last heat cycle: \_\_\_\_\_    Pregnant? Yes / No

Additional requests (e.g. check ears/skin, update vaccinations, nails, etc.) \_\_\_\_\_

**By signing this form, you are indicating you have been informed of the risks involved with anesthesia, and you have had an opportunity to discuss these risks with a veterinarian. Your signature further indicates you accept these risks and give the Thompson Vet Clinic permission to anesthetize your pet. Thompson Vet Clinic will utilize all reasonable precautions against injury, escape, or death of your pet.**

Signature: \_\_\_\_\_