



## Anesthesia/Surgical Consent Form

Owner: \_\_\_\_\_ Pet's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Procedure(s): \_\_\_\_\_

Current Medications: \_\_\_\_\_

The best number to reach me at today is: \_\_\_\_\_

Woodland Veterinary Clinic uses state-of-the-art surgical monitoring equipment to monitor your pet's heart rate and rhythm, oxygen saturation of the blood, respiratory rate, blood pressure and temperature during surgery. We provide pain medication for pets before, during and after surgical procedures. In most cases an intravenous (IV) catheter will be placed to administer fluids while under anesthesia. Along with shaving the hair at the IV catheter site on the leg, we will also shave the surgical site for prepping and cleansing.

If a dental cleaning is being performed teeth that are damaged by dental disease may be extracted.

**Pre-anesthetic blood work is required for all procedures requiring general anesthesia.**

*Please note: All pets presented for surgery must be free of external parasites. If fleas, ticks or ear mites are found, the pets will be treated for these parasites at the owner's expense.*

I, being the responsible party for the above animal, authorize the performance of the procedure(s) outlined above by the professionals and staff at Woodland Veterinary Clinic. I understand that anesthesia always involves some amount of risk and that during the performance of this/these procedure(s) unforeseen conditions may be revealed that necessitate an extension or variance in the procedure(s) set forth above. I expect the staff of Woodland Veterinary Clinic to use reasonable care and judgment in performing the procedure(s) to the best of their abilities. I realize that no guarantee or warrantee can ethically or professionally be made regarding the results or cure. I am also aware that unforeseen complications resulting from the procedure(s) will not relieve me from any obligations to all reasonable costs incurred regarding the animal. (We will always attempt to reach you to obtain your consent prior to any additional procedures, however this may not always be possible.) Woodland Veterinary Clinic is not a 24 hour facility. I understand that any pet left overnight at the clinic will not be supervised and realize that I have the option of transferring my pet to the Emergency Clinic for overnight care if warranted.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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