

Broadway Veterinary Clinic
2340 W. Broadway
Idaho Falls, ID 83402
208-522-2557

Owner:
Phone #:
Pet:

ANESTHESIA CONSENT FORM

I authorize the doctors at Broadway Veterinary Clinic to perform an anesthetic procedure upon my pet. I understand that even under the best circumstances, there is a risk associated with anesthesia. Risks include, but are not limited to, low blood pressure, irregular heart rate, irregular respiration, aspiration of fluids, or even sudden death. I consent to the anesthetic procedure and authorize any life-saving measures deemed necessary by the doctor. I understand that additional expenses may be incurred and that results are not guaranteed.

In order to best assess the current state of your pets health, we recommend the following laboratory work. Please accept or decline treatment in space provided:

		Accept	Decline
1. Pre-anesthetic blood chemistry:	\$35.00	<input type="checkbox"/>	<input type="checkbox"/>
2. Or Full Chemistry /CBC:	\$110.00	<input type="checkbox"/>	<input type="checkbox"/>
3. Intravenous Catheter for Fluids (Required 10yr & older)	\$35.00	<input type="checkbox"/>	<input type="checkbox"/>
4. Pain Meds for qualifying procedures	~\$	<input type="checkbox"/>	<input type="checkbox"/>
5. I allow teeth to be extracted during dental procedure		<input type="checkbox"/>	<input type="checkbox"/>

There is a \$35.00 additional charge for animals that are in heat or pregnant. If your pet is pregnant, may we continue with the procedure? Yes No

Patients over the age of 8 years old, injured patients, and those with disease, are highly recommended to have an intravenous catheter.

Procedure(s) to be performed are as follows:

By signing this form, I assume full financial responsibility for <animal> and understand that payment is due in full at time of discharge unless other arrangements have been made in advance.

Signed: _____
Phone Number: _____

Date: _____