

Edmonton West Animal Hospital & Spay/Neuter Centre

9962 170 St NW, Edmonton, AB (780) 488-0124

SURGICAL INFORMED CONSENT FORM

Surgical procedure: _____ Pet's name _____
Pet parent's first name _____ Last name _____
Best number to reach you at today _____ Secondary phone number _____
Last meal time: _____ Last drink time: _____ Other medications/concerns: _____

Edmonton West Animal Hospital performs multiple anesthetic procedures each day. While we strive to get your pet home to you as soon as we can, extenuating unforeseen circumstances such as emergencies, urgent walk ins, and surgical complications or delays on other procedures can delay the completion of your pet's procedure. If your pet is scheduled for a day procedure, it will be completed that day, however, we cannot guarantee what time your pet will be ready. Please plan to leave your pet with us for most of the day, and you will be contacted when your pet is ready for pick up.

PLEASE READ AND INITIAL IN FRONT OF EACH APPLICABLE STATEMENT IN THE SPACE PROVIDED

_____ I, the undersigned, owner or responsible party of the admitted patient, hereby authorize the veterinarians of the Edmonton West Animal Hospital & Spay/Neuter Centre (and whomever they may designate as assistants) to administer such treatments as necessary, and to perform surgical procedures and additional procedures as are therapeutically and/or diagnostically necessary as indicated by findings during medical evaluation. Since general anaesthesia or sedation is required in these surgical procedures, I understand and accept that there are always inherent surgical and/or anesthetic complication risks, including death of the patient.

The following options can help to reduce the risk associated with anaesthesia and maximize patient safety. We highly recommend these measures for every patient having a surgical procedure.

Pre-anaesthetic blood screen the risk of anaesthesia complication is higher in animals with health problems. We recommend pre- anaesthetic blood screen for every patient having a surgical procedure. This checks for subclinical disease (hidden problems) not apparent on physical examination. On the basis of this blood work we can tailor your pet's anesthetic, pain management and recovery protocols to her/his individual needs. The fee for pre-anaesthetic blood screen is \$120.00.

Please initial **one** of the following statements below:

Please **watch** the "Pre-Anesthetic Concerns" video (www.vimeo.com/102370458):

_____ I authorize pre-anaesthetic blood screen

I agree that I have watched the "Pre Anesthetic Concerns" video

OR

_____ I don't authorize pre-anaesthetic blood screen and accept the inherent associated risks

Intravenous fluids (Drip): Intravenous (IV) fluids are very important for all procedures that require general anaesthesia. Administration of IV fluids helps your pet recover more quickly from anaesthesia, maintains blood pressure, and increases circulation during anaesthesia. It also allows rapid administration of drugs should an emergency arise and can save vital time in the rare event of an anaesthetic complication. To place an IV catheter and fluids it is necessary to clip or shave hair from the site (forearm or back legs). The fee for placing an intravenous catheter with fluids is \$60.00.

Please initial **one** of the following statements below:

_____ I authorize IV fluids

OR

_____ I don't authorize IV fluids and accept the inherent associated risks

****PLEASE READ THE FOLLOWING STATEMENT ONLY IF YOU DECLINED INTRAVENOUS FLUIDS:**

Intravenous catheter: If you declined IV fluids, we STRONGLY recommend placement of an intravenous catheter. The intravenous catheter allows rapid administration of drugs should an emergency arise and can save vital time in the rare event of an anaesthetic complication. The fee for placing only an intravenous catheter without fluids is \$30.00.

Please initial **one** of the following statements below:

_____ I authorize placement of IV catheter

OR

_____ I don't authorize placement of IV catheter and accept the inherent associated risks

In cases where further work is required and is of non-emergency nature (non-life threatening), every attempt will be made by the doctor/staff to contact the owner by phone to discuss the case. Please be aware that if you decline any needed procedures at this time, or, we are unable to reach you within 5 minutes, your pet would need a second anaesthesia at another time in order for those procedures to be performed.

_____ Once the case has been discussed and verbal consent has been obtained, I understand and accept the nature of the procedure(s) that the Doctor in his/her professional judgment deems necessary and desirable, and grant authority for the purpose of remedying conditions that are not known at this particular time but which may become evident while the patient is in hospital. However, I understand that if efforts are unsuccessful to contact me at the phone numbers provided, no additional work will be performed and may have to be completed at a later date.

_____ I understand and accept that if my pet requires overnight hospitalization, there is no overnight staff on duty after the hospital closes, and that my pet will be attended to the following morning.

PLEASE READ AND *INITIAL* THE FOLLOWING *ONLY* IF YOUR PET IS GETTING SPAYED OR NEUTERED

_____ I understand that there will be additional fees in surplus of the base surgical cost of spay/ neuter, if my animal is:

Cryptorchid (absence of one or both testes from the scrotum) - cost \$150

In heat - cost \$40 Pregnant: up to 6 weeks - cost \$80 more than 6 weeks - cost \$250

_____ If my pet is found to be pregnant or in heat, I understand that I will not be contacted during the procedure, and I authorize the doctors of Edmonton West Animal Hospital to proceed with the spay surgery. I assume full responsibility for the above fees associated with this patient.

_____ I acknowledge that I have read and understood the attached spay/neuter dismissal instructions.

Optional but recommended services: please initial under each column which options you authorize

| Options | Cost | I authorize | I do not authorize |
|--|-------------------------|-------------|--------------------|
| Additional pain medication | \$7-\$12 per day | | |
| E-collar (cone) | \$15-\$40 | | |
| Microchip | \$50 | | |
| Vaccines - please specify which ones are needed | \$25 per vaccine | | |
| Nail trim | \$10 | | |
| | | | |

If you would like anything additional done at the time of surgery (e.g. baby teeth removal, hernia repair, dewormer, etc), please describe in the box below. Additional cost estimates, where applicable, will be provided to you before these services are carried out, and are at the discretion of the attending veterinarian.

Additional Procedures

If you wish to take your pet to a board certified veterinary surgeon, there is only one clinic in Edmonton, Guardian Veterinary Centre, where they work on a referral basis. Do not initial the following blank and inform a staff member if you wish to be referred.

_____ I hereby certify that I have read and fully understand the above authorization for medical and/ or surgical treatment. I am aware that Edmonton West Animal Hospital does not employ any board certified surgeons, and authorize the general certified veterinarians of this facility to perform the above surgical procedure on my pet. I also certify that the procedure has been explained to my satisfaction, and that no guarantee or assurance has been made regarding the results that may be obtained. I acknowledge that any post-surgical or post-anesthetic complications may require additional veterinary care or medications. Further, I assume full financial responsibility for all charges incurred to this patient.

Total estimated fee: _____ plus GST

Date _____

Pet Parent Signature: _____

DVM/RVT initials: _____

Spay & Neuter Dismissal Instructions

- 1) Your pet will likely be groggy and uncoordinated for the next 24 hours. Please monitor your pet around stairs, slippery floors, ice, etc. For cats, try to limit their access to high places as their balance may be affected by the anesthesia.
- 2) You may offer your pet a small amount of food when you get him/her home. Nausea and vomiting is common following anesthesia, so feed your pet multiple small meals for the next 24 hours. They may not be interested in food while they recover. Your pet may have free access to water.
- 3) The sutures in your pet's incision are buried under the skin and are absorbable. No suture removal is required. Cat neuters do not have any sutures and the very small incision will seal and heal on its own.
- 4) Monitor your pet closely to make sure s/he is not licking the incision. If you have opted for a cone, you may need to leave it on for up to 10-14 days, as it can take that long for the incision to fully heal. Please check the surgical site daily; excessive redness, swelling, discharge, or odour are all signs of infection. Contact us if you notice any of these signs.
- 5) In order to properly prepare and sterilize your pet's skin for surgery or IV placement, we use multiple solutions that will temporarily remain on your pet's skin and fur. They are pink and brown in color. This color will wear off over the next few days and should not be removed (i.e. do not bathe your pet).
- 6) Sterile surgical technique requires us to shave your pet's fur in an area large enough to accommodate the surgeon's incision. Although we try to minimize any complications as much as possible, your pet may experience some mild skin irritation (razor burn), or, in the case of females, the nipples may get nicked by the clipper blades. These minor irritations heal quickly on their own and do not require any extra treatment.
- 7) If you have opted for additional pain medication, please read and follow the instructions on the label. It is to be given once daily (every 24 hours), and should be given with food. Stop the medication if your pet has any vomiting or diarrhea.
- 8) Please read through your invoice for complete discharge instructions.
- 9) If you have any questions or concerns you can reach us via phone or text at 780-488-0124. We are open 365 days a year.

Our temporary COVID-19 hours are:

Monday - Friday 7:30 AM - 8:00 PM

Weekends and holidays 9:00 AM - 6:00 PM