

**Ocean's Edge Veterinary Clinic
Hospital/Surgical Consent**

Client Name _____
Patient Name _____
Doctor's Name _____

Today's Date _____
Patient's age _____
Today's phone # _____

As the owner or agent of the owner I hereby give my consent to Ocean's Edge Veterinary Clinic to perform the following procedure(s) _____

I understand unforeseen conditions may be revealed that necessitate an extension or variance in the procedure(s). I expect Ocean's Edge to use reasonable care and judgement in performing the procedure(s). The nature of the procedure and risks involved have been explained to me and I realize results cannot be guaranteed. I am also aware that unforeseen events resulting from the procedure(s) will not relieve me from any obligation to all reasonable costs incurred.

ALL ANIMALS ADMITTED MUST BE FREE OF EXTERNAL PARASITES. ANY ANIMAL FOUND TO HAVE FLEAS OR TICKS WILL BE TREATED AT THE OWNER'S EXPENSE.

LABORATORY TEST WAIVER

If your pet is to be anesthetized, rest assured that advances in anesthesia and surgery have made routine procedures relatively safe with a low rate of complications. Nevertheless, occasional problems can arise due to pre-existing conditions not evident during routine pre-anesthetic examinations. To avoid these problems, we recommend that all patients be screened.

** For patient's under 6 years of age we recommend major organ Blood screening & complete blood count at the cost of \$71.95. You will receive a call from the doctor the next day with the results

_____ I accept the above blood work.
_____ I decline the above blood work.

** We recommend an IV catheter in case of an emergency at the cost of \$35.75.

_____ I accept the IV catheter.
_____ I decline the IV catheter.

** A PAIN injection will be administered on all surgery patients for the cost of \$22.75.

** A SEDATION fee may be required for larger pets.

** We offer a microchip to be placed in your pet while under anesthesia. The cost is \$45.00 plus \$16.99 for activation/registration then \$16.99 per year.ASK FOR MORE DETAILS.

_____ I accept the microchip to be placed in my pet.

Signature of Owner/Agent _____