

Northwood Vet Service LLC
310 County Rd A
Black River Falls, WI 54615
715-284-4424



PRE-ANESTHETIC CONSENT FORM

I realize that any anesthetic procedure involve certain risks. To better evaluate my pet's ability to undergo anesthesia, certain laboratory test may be useful in determining potential risk factors that could endanger my pet. I understand that pre-anesthetic blood work does not guarantee the absence of complications. It may however, reduce the risk of anesthesia by alerting us to certain conditions prior to undertaking the procedure and help to avoid foreseen complications or lead us to postpone the procedure if necessary. The blood work is required for all pets over 7 years of age and is optional for pets under 7 years.

The cost is \$60 which includes a CBC and Comprehensive Diagnostic Profile which evaluates organ function.

Please indicate if you want the Pre-anesthetic blood work performed prior to surgery today.

_____ Yes, I want my pet to have a pre-anesthetic blood work for \$60

_____ No, I decline the pre-anesthetic blood work

We recommend that all animals have permanent identification with a microchip, helping rehome pets.

Please check if you want this preformed today for a reduced cost of \$30 with the surgery.

_____ Yes, please microchip my pet today for \$30

_____ No, I decline the microchip

_____ Pet already has microchip

By signing I have read the above information and understand the importance of pre-anesthetic blood work and agree to pay for all procedures requested when my pet is discharged.

Signature _____ Date _____