

ALOHA DOG & CAT HOSPITAL PC

17335 SW Tualatin Valley Highway, Aloha, Oregon 97006
phone 503.649.5611 fax 503.649.5961 email adchospital@aol.com

Client Name _____ Pet Name _____ Chart # _____

PRE-ANESTHETIC EVALUATION & AUTHORIZATION

A complete physical exam will be performed on your pet prior to the anesthetic procedure, but this may not identify all systemic or metabolic problems. For this reason, we recommend that your pet have a preanesthetic blood panel to evaluate major organ functions, and an ECG to assess heart rate and rhythm prior to anesthesia.

For young animals, under five to six years, preanesthetic diagnostics are strongly recommended, but not required. If the animal presents symptoms such as weight loss or gain, increased thirst or urination, loss of energy or other uncharacteristic behaviors, then preanesthetic diagnostics would be essential.

For geriatric animals, over six to seven years of age, preanesthetic diagnostics are critical as the risks of various organ and heart problems are heightened at this life stage.

Please indicate your decision regarding preanesthetic testing below:

I want to have a preanesthetic blood panel run	Yes	No
I want to have a preanesthetic ECG run	Yes	No
I want to have a microchip implanted	Yes	No

Pain Management: We believe in compassionate, quality medical care for our patients. As a result, all patients will receive pain management during surgery and post-operative recovery as deemed necessary by the veterinarian overseeing each case. Providing pain relief also means that additional medication may be dispensed for use at home.

Flea Treatment Policy: All animals found to have fleas will be treated with an appropriate flea product.

Dental Procedures: It is not unusual to find abscessed or damaged teeth after an animal has been anesthetized. These teeth may require extraction and additional medication for healing. This will cause an increase in the price of the procedure.

The nature and purpose of these procedures and treatments, the associated major risks and available alternative treatments have been explained to me. I acknowledge that no guarantee has been made as to the results that may be obtained, and understand that there may be risks involved with anesthesia and that complications, including death, may arise. I will not hold Aloha Dog & Cat Hospital, PC, the doctors or the staff liable for any complications or unforeseen results.

Payment is expected at patient discharge, unless other arrangements have been made in advance. A written estimate will be provided upon request.

Signature of Owner or Authorized Agent _____ Date _____

Daytime Phones _____ OR _____