



**CountrySide Veterinary Clinic**  
**6038 Old Beattie Road**  
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**PRE-SURGICAL / ANESTHESIA CONSENT FORM**

**Animal's Name** \_\_\_\_\_

Because no surgery / anesthesia is without potential risk, it is advisable to perform the following before (or during) surgery / anesthesia to minimize that risk for your pet.

Anyone Leaving A Patient For Surgery / Anesthesia Must Read And Circle Appropriately:

- 1. Pre-Surgical Anesthetic Bloodwork:** Knowing how certain body organs, such as liver and kidneys, are functioning, is important when your pet has to undergo anesthesia. Therefore, we require certain minimal bloodwork be done on any animals 3-5 years of age, and animals over 5 years of age as follows:
  - Less than 3 years of age: Pre-Anesthetic Bloodwork: Cost \$38.00
  - 3-5 years of age: Pre-Anesthetic Bloodwork: Cost \$38.00 (required)
  - Over 5 years of age: CBC (\$32.00), Chemistry Panel (\$52.00) and Electrolytes (\$27.00) Cost: \$111.00 (required)

YES I want my pet to have pre-surgical anesthetic bloodwork  
NO I do not want pre-surgical bloodwork

- 2. Pre-Surgical Exam:** We require an exam prior to surgery for any animal that is receiving vaccinations and if:
  - <5 years of age: Have not received an exam in the past 3 months
  - >5 years of age: Have not received and exam in the past month

However, we will examine any animal at the owner's request. Cost: \$53.00

YES I want my pet examined prior to surgery / anesthesia  
NO I do not want my pet examined

- 3. Microchip:** A microchip is used for identification purposes and can be implanted while your pet is under anesthesia. Cost: \$35.00

YES I want a microchip implanted  
NO I do not want a microchip implanted

4. The estimate and surgical anesthesia consent form have been reviewed with me by a staff member of Countryside Veterinary Clinic. I understand total payment is due upon completion of treatment. Furthermore, I understand with anesthesia and surgery there are always potential risks which Countryside Veterinary Clinic has tried to minimize, but cannot totally eliminate.

5. Additional Surgical Instructions: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Telephone Number (To be reached at time of surgery): \_\_\_\_\_

Secondary Telephone Number: \_\_\_\_\_

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