

Azalea Lakes Veterinary Clinic

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PAYMENT EXPECTED AT TIME OF SERVICES

Surgery Consent Form

Client Name:
Phone Number:

Patient:
Species:

I, the owner or authorized agent of this pet, give permission for the following anesthesia procedure(s). I understand that during the procedure unforeseen conditions may be revealed that necessitate an extension of the procedure(s). I consent to and authorize the performance of such techniques as necessary in the veterinarian's professional judgment.

Spay/Neuter Mass removal Declawing Sedated exam Other _____

We are proud to provide laser surgery (a \$40.00 value) and therapeutic laser therapy post-surgery (a \$20.00 value). The benefits of laser surgery include: less pain and swelling, a quicker recovery, and less bleeding which simplifies surgery and creates less physical trauma.

The benefits of post-surgery therapeutic laser therapy are the induction of a biological response in the cells which leads to reduced pain, reduced inflammation & increased healing speed when performed immediately after surgery.

The following procedures are recommended:

A pre-anesthesia blood profile will help the doctor(s) rule out any pre-existing internal problems that may not be evident physically but that could lead to complications. The tests include:

1. Complete blood count that checks for bleeding disorders, anemia, infection, inflammation and hydration.
2. Mini-health Profile that assesses blood glucose, kidney and liver function, and electrolytes.

YES I accept. **NO** I decline.

An IV can be placed and fluids administered before and during the procedure. Benefits of including IV fluids are: 1) Maintains hydration during fasting. 2) Helps regulate blood pressure while sedated. 3) Increases blood flow to the kidneys while sedated. 4) Pets wake up faster from sedation.

YES I accept. **NO** I decline

For mass removals only – would you like a sample to be submitted for histopathology? There is a fee for biopsy samples to be reviewed by pathologist.

YES I accept. **NO** I decline

*****I understand that if my pet has live fleas/ticks present at the time of check in, he/she will be given a dose of flea/tick prevention at my expense.*****

Signature: _____ **Date:** _____
Phone number(s) that you can be reached today (please note cell): _____

Permission to text with updates: **YES** I accept. **NO** I decline

Would you like your pet microchipped while he/she is sedated? We offer **microchipping** of pets which includes the microchip itself, implantation of the chip, and the first year registration with Home Again. Microchipping is an effective method of permanent identification in case a pet gets lost or stolen.

YES I accept. **NO** I decline Already has a Microchip