

South Bay Veterinary Care

16116 S. Western Ave, Gardena, CA 90247

Phone: (310) 323-9555

Authorization Form for Dentistry/General Anesthesia

Your pet is being admitted to South Bay Veterinary Care for a general anesthetic procedure. Please initial each of the statements below indicating your agreement. **BE SURE TO LEAVE A TELEPHONE NUMBER AT THE BOTTOM OF THE PAGE.**

Procedures to be performed _____

(Initial)

My pet has not received food for at least the last 8 hours prior to the scheduled procedure. My pet last ate a meal at:
_____ a.m./p.m. (circle one)

(Initial)

I have received an estimate for the above procedure. I understand the estimated charges for my pet's procedure and understand that full payment is due by the time my pet is discharged from the hospital.

(Initial)

My pet is on the following medication(s) and were last given _____

(Initial)

I understand that any pet undergoing anesthetic procedures must comply with the Hospital's vaccination policy. Cats must be current of FVRCP and Rabies, and dogs must be current on DHPP, Bordetella and Rabies.

(Initial)

I agree to make myself available by telephone during the day of my pet's procedure at the following number(s):

(Initial) _____ OR _____.

I understand that my pet will be given a CAPSTAR flea pill if any fleas are observed on my pet during their stay in the hospital. I understand this will cost \$8.50 and I will be financially responsible for it.

(Initial)

Pre-Surgical Work-up

We will perform a physical exam and pre-anesthetic blood panel before administering anesthesia. This may help identify any preexisting problems which may not be evident physically, but could possibly lead to anesthetic complications. IV catheter and intravenous fluids are required for all animals under anesthesia. All anesthetized animals are closely monitored for changes in heart rate and blood pressure. **I understand that all anesthetic procedures have an inherent risk. I hold South Bay Veterinary Care harmless, in the absence of negligence, in the event of anesthetic complications. South Bay Veterinary Care uses the safest and most modern anesthetic protocols and my pet will be observed carefully for any sign of difficulty both during and after the anesthetic procedure.**

(Initial)

Extraction Authorization

A full examination of the oral cavity is not always possible until the pet is anesthetized. This means that unexpected extractions or other dental procedures may become advisable. Unanticipated procedures are not included in this estimate, and are charged according to their level of involvement. By initialing this statement, I agree to pay for such procedures deemed "not optional," even though they may not be reflected in the estimate presented to me. Our staff will try to reach you by telephone prior to their performance whenever possible. In addition, pain medication may be prescribed in the event of major extractions.

(Initial)

In the event that my animal arrests while hospitalized, I authorize the following CPR code, at additional cost:

(Initial) **Normal CPR:** Involving chest compressions, oxygen therapy and medications such as epinephrine, atropine, etc.

(Initial)

(Initial) **DNR:** No resuscitation

(Initial)

Signature of Owner or Agent

Date

Pet's Name

Telephone number (s) for day of procedure