



Consent for Sedation and Anesthesia

Owner/Owner Agent name(s) _____

Pet Name _____ Date _____

As the owner or legal authorized agent of above named pet, I understand that I am giving consent to Laguna Hills Animal Hospital to perform the following procedure(s) on above named pet:

_____ **Sedation:** Depending on the type of procedure your pet is receiving today, sedation may be necessary for your pet's safety and comfort. Certain procedures may also require additional general anesthesia. The attending veterinarian will inform you of any anesthetic or sedation protocol changes.

_____ **Anesthesia:** If full anesthesia is required for your pet, all measures will be in place prior, during and after the procedure; however, with any anesthetic procedure, there are inherent risks involved. The following safety measures will take place prior, during and after your pet going under any anesthetic procedure:

- A pre-operative physical exam
- Pre-operative blood work, urinalysis and electrocardiogram (as deemed necessary by attending vet)
- Shaving of the leg and the aseptic placement of an intravenous catheter*
- An endotracheal tube is placed as the pathway for oxygen and anesthetic gas
- The doctors and highly trained medical team member will closely monitor your pet using high-grade anesthesia monitoring equipment, and vitals will be recorded
- Pain medications, antibiotics, anti-nausea medication, and anesthetic induction agents will be given as needed under the direct supervision of the veterinarian

**IV catheters will allow your pet to receive necessary drugs, intravenous fluids, and is available as an access port in the unlikely event of an emergency situation. On occasion, there can be some minor skin irritation from shaving; however, it is very important that the skin is able to be properly scrubbed prior to catheter placement.*

Additional services: Please select any of the following elective options, if you wish, to have performed during your pet's procedure.

HomeAgain Microchip _____ Anal Gland Expression _____ Nail Trim _____ Ear Cleaning _____

I understand that my pet is going to be given sedation and/or anesthesia. I understand that, as with any anesthetic procedure, there are risks involved. Every safety measure is in place for my pet; however, in the unlikely event that my pet passes away during the care and treatment of my pet, I will be fully responsible for any fees incurred, including any emergency procedures.

Owner Signature _____ **Date** _____

Printed name _____

Doctor or Hospital Agent Signature _____