

## Los Robles Animal Hospital "Providing Gentle Medicine for all Stages of your Pet's life since 1986"

## Sedation Release Form

Owner Pet's Nar	ne		Date
Procedure to be performed today:			<del></del>
All anesthetics carry an inherit risk, and adverse effe any such event. Please read the following paragraph		e all possible	precautions to prevent
I consent to the administration of such anesthetic ag procedure. I understand there are risks involved and			
Some pets may have pre-existing internal problems on physical exams. In some cases, we are unable to we will run blood work while they are under sedation Animal Hospital and their staff liable in any manner this procedure.	o examine a patient prio n/anesthesia. I understa	or to the actua and that I will	al procedure. In that case not hold Los Robles
Pre-surgery questionnaire:			
* Has your pet eaten this morning?		yes	no
* Has your pet received any medications this mornin If yes, what kind?		yes	no
* Has your pet recently experienced vomiting, diarrh	ea, coughing, sneezing	g? yes	no
* Is your pet allergic to any drugs?  If yes, what drugs?		yes	no
* In case of an unforeseen emergency, do you want	us to perform CPR?	yes	no
Elective procedures to be performed while under an estimate given):  Anal gland expression Remove warts/skin growths. PLEASE MAR	RK LUMPS WITH WHI	TE OUT or SI	HARPIE.
Location:			<del></del>
Brush and clip mats Microchip placement			
I do not want any elective procedures done	on my pet		
Research has indicated that while some pets appear postoperative pain. Pain medications will be given to discomfort after surgery. In some cases, pain medical discomfort. Please use these medications as prescriptolonged by your pet's discomfort.	safely and effectively ations may need to be	control the level sent home wi	vel of your pet's the your pet for ongoing
Important! Please provide us with a phone numb the day of surgery. Contact Phone Number		r representati	ive can be reached on
Would you like an estimate for today's procedure?	yes no al	lready provide	ed
Name (please print)	Signature		Date