

Creekside Animal Clinic Ltd.
5001 - 24th Street, Vernon, BC V1T 8X7

T250.549.3533 F 250.549.1351

Pre-Anesthetic Testing Consent

Your name: _____ Date: _____

Your pet's name: _____ Age: _____ Procedure: _____

Your pet is scheduled for a procedure that requires anesthesia. We would like to take this opportunity to recommend pre-anesthetic testing and explain why it is important to the health of your pet.

Like you, our greatest concern is the well-being of your pet. Before placing your pet under anesthesia, a veterinarian will perform a complete physical examination to identify any existing medical conditions that could complicate the procedure and compromise the health of your pet.

Because there is always the possibility that a physical exam alone will not identify all of your pet's health problems, we strongly recommend that a pre-anesthetic profile (a combination of tests) be performed prior to anesthesia. The tests we recommend are similar to and equally as important as those your own physician would run if you were to undergo anesthesia.

It is important to understand that a pre-anesthetic profile does not guarantee the absence of anesthetic complications. It may, however, greatly reduce the risk of complications as well as identify medical conditions that could require medical treatment in the future.

The combination of blood tests we recommend for the apparently healthy younger pet is listed below:

- ✓ BUN, Creatinine, ALKP, ALT, Glucose, Total Protein
(kidneys, liver, diabetes/sugar, hydration)
 - ✓ CBC *(anemia, infection, clotting)*
 - ✓ Electrolytes *(dehydration)*
- **I would like to discuss pre-anesthetic testing with a veterinarian prior to making a decision.**
 - **Please complete the recommended testing prior to administering anesthesia to my pet. If abnormalities are found, please contact me at the phone number below:**

Signature of owner or their agent _____ Date _____

- **I decline the recommended pre-anesthetic tests at this time and request you proceed with anesthesia. I understand that a medical condition may exist which would be impossible to identify during a physical exam alone. I understand that my pet's health could be at risk if such a condition goes undetected when my pet is placed under anesthesia.**

Signature of owner or their agent _____ Date _____

Dr. M.A. Flock Dr. B.W. McOnie Dr. S Rijnen
Dr. K. Johnson Dr. J. Veronneau