

Consent Form

Patient's Name: _____

Species: _____

Breed: _____

Sex: _____

Date of Birth: _____

I am the owner or the agent for the owner of the animal described above, and I have the authority to execute this consent.

I hereby consent and authorize Dr. _____ / staff to perform the following procedures or operations:

The nature of these operations or procedures has been explained to me, and I understand what will be done.

I have also been informed that there are certain risks and complications associated with any operation or procedure of this type. They have been explained to me as well. I further understand that during the course of the operations or procedures, unforeseen conditions may arise that may necessitate the performance of additional procedures.

I authorize the use of appropriate anesthesia and pain relief medication as needed before or after the procedure. I have been informed that there are risks associated with the use of any medication.

I understand that hospital support personnel will be used as deemed necessary by the veterinarian.

Signed: _____

Date: _____