

# SURGERY ANESTHESIA RELEASE FORM

Cobbs Ford Pet Health Center, P.C.

Owner: \_\_\_\_\_ Case No: \_\_\_\_\_  
Address: \_\_\_\_\_ Date: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Patient: \_\_\_\_\_ Breed: \_\_\_\_\_  
Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Color: \_\_\_\_\_

I, the undersigned, do hereby certify that I am the owner (duly authorized agent for the owner) of the animal described above, that I do hereby give George F. Seier Jr. D.V.M., his agents, and/or representatives full and complete authority to perform the surgical procedure described as:

\_\_\_\_\_ and to perform any other procedure that, at his discretion, may be useful to promote the health of the above described pet, and I do hereby forever release the said Doctor, his agents, or representatives from any and all liability arising from said surgery as long as reasonable care and precautions are maintained.

Any specific medical history we need to know about?

\_\_\_\_\_

Please indicate if you have been given a written estimate for the procedures(s) to be performed today:

YES                       NO

If you have not been given an estimate, and would like one, please indicate:

YES                       NO

For added safety, we recommend Pre-Anesthesia Blood Test at an additional charge of \$67.50. This includes a CBC and a mini-chemistry profile. Please check your permission:

YES                       NO

We now offer Laser Surgery as an option for some surgeries. Its major benefits are the same as with humans – less pain and discomfort after surgery, less swelling and quicker recovery. If applicable, there is an added charge, which varies depending on the exact procedure. We would be happy to give you a quote – just ask the receptionist or the attending Doctor. Please check your permission:

YES    Exact Added Cost \$ \_\_\_\_\_     NO

Telephone Number where you can be reached after surgery or prior to anesthesia if we have any questions for you: \_\_\_\_\_

PICK UP DATE \_\_\_\_\_ and TIME \_\_\_\_\_ AM or PM

If you can not pick up your pet, we must have authorization to release your pet to another person!

I authorize \_\_\_\_\_ to pick up my pet for me.

Signed \_\_\_\_\_ Staff Initials \_\_\_\_\_

(Title, First Name, Last Name) or Duly Authorized Agent