

# Cinema Veterinary Centre

23460 Cinema Drive  
Unit L  
Valencia, California 91355

Tel: 661-253-9300  
Fax: 661-554-6431  
info@cinemavet.com  
www.cinemavet.com

Today's Weight (lbs / kgs) \_\_\_\_\_

I hereby authorize Cinema Veterinary Centre to perform \_\_\_\_\_.

I understand that some risks always exist with anesthesia and/or surgery, and I have been encouraged to discuss any concerns I may have about those risks with my veterinarian before the procedure(s) is/are initiated. Surgical and anesthetic risks include, but are not limited to, infection at the surgical site, unexpected blood loss, and anesthetic or surgical complications up to and including death.

## Pre Anesthetic Blood Work

\_\_\_\_\_ My pet has had pre-surgical blood work performed prior to his / her surgery

\_\_\_\_\_ I declined blood work for my pet prior to surgery

## Further Diagnostics

\_\_\_\_\_ I hereby authorize Cinema Veterinary Centre to perform any diagnostic, treatment or surgical procedures as deemed necessary for medical or surgical complications or otherwise unforeseen circumstances and authorize diagnostic costs up to: \$\_\_\_\_\_

\_\_\_\_\_ I do not authorize Cinema Veterinary Centre to perform any further diagnostic treatment.

\_\_\_\_\_ ***For Spay Procedures: If my pet is pregnant during the time of the surgical procedure, I understand that the pregnancy will be terminated. I understand that there will be an additional charge assessed if my pet is in heat or is pregnant. If my pet is on the surgical table and my pet is deemed pregnant, Cinema Veterinary Centre has my permission to terminate the pregnancy unless otherwise instructed by me.***

## Risk Assessment

While Cinema Veterinary Centre provides the highest quality of anesthesia monitoring and surgical services, I understand that there are rare complications associated with any anesthetic or surgical procedure. I fully understand these risks and understand that the veterinarians and hospital staff will try to minimize these risks. **I agree not to hold Cinema Veterinary Centre, the veterinarians or any staff member liable for any complications that may arise.**

In the unlikely event that my pet goes into cardiopulmonary arrest:

YES: Make every attempt to resuscitate my pet including closed chest compressions (CPR). (Please keep in mind this has an additional fee and may cost up to \$100 or more).

NO: Do not resuscitate.

## Pre- Surgical Food and Water Assessment

\_\_\_\_\_ My pet has not eaten anything past 8 pm last night nor has my pet had any water after 6 am this morning.

Anesthesia Release Checklist	Yes	No
Has your pet experienced any trauma in the past six months? (i.e.: hit by car, dog attack, invasive surgery, chemotherapy treatments, etc)		
Has your pet been vomiting, coughing, sneezing or having diarrhea?		
Is your pet allergic to any medications? If so, please list:		
Is your pet currently taking any medications? If so, please list:		
Were any medications administered this morning?		

No warranty or guarantee has been given to me as to the results or cure afforded by these treatments or procedures. My signature on this consent form indicates that any questions I may have were answered to my satisfaction.

Date: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Owner's Printed Name: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_