



All Feline Hospital

General Surgery/Anesthesia Consent Authorization

Owner: _____ Number Where We Can Reach You Today: _____

Pet Name: _____ When did your cat last eat? _____

Is your cat? Indoor / Outdoor / Both Sex: Female / Male Spayed / Neutered / Intact Declawed? Yes / No

Personal items: Collar, blanket, toy, bed, medications, food. List others: _____

Reason For Surgery Today: _____

Please write any history or additional information we should be aware of before performing your cat's surgery.

ANESTHESIA ELECTIVES

Available as options, may be required on advanced surgeries:

- Pre-anesthetic blood work – required on all cats 10 years of age and older *Checks safety of anesthesia.*
- Intubation (artificial airway) *Allows for greater control over breathing, including artificial respirations if needed.*
- IV catheter placement *Allows for instant venous access in the event of an anesthetic or surgical complication.*
- Fluid therapy w/IV catheter placement *Helps to protect kidneys and to keep blood pressure up to prevent tissue damage during surgery.*

Advanced monitoring equipment during surgery:

- Basic monitoring – ECG, SPO2, Temperature, Respirations *(Requires intubation)*
- Electrocardiogram (ECG) only Blood pressure
- Pulse Oximetry (SPO2) only Core Body Temperature only

OTHER HEALTH PROCEDURES NEEDED TODAY?

- Purevax Rabies Vaccination Defensor Rabies Vaccination Distemper/Respiratory Combo Vaccination
- Leukemia Vaccination Micro Chipping *(Offered at a \$5 discount when placed during surgery)* De-worming

Owner must present proof that cat is current on rabies and distemper vaccinations, or the cat will automatically be vaccinated upon entry if healthy enough. If fleas or parasites are found, treatment will be applied.

I, being responsible for the above described pet, grant you my consent to receive, prescribe for, treat, anesthetize, operate upon, and/or radiograph my pet. All Feline Hospital is to use all responsible precautions against injury, escape, or death of my pet, but I will not hold All Feline Hospital liable or responsible in connection therewith as it is thoroughly understood that I assume all risks. I understand all charges including boarding costs are my responsibility and shall be paid upon release from the hospital.

I understand that regardless of options checked, the doctor may use additional options other than those checked to ensure the safety of my cat during surgery at their discretion, and that I may be responsible for additional charges. I also understand that all precautions will be taken to ensure the safety of my cat, but that complications can occur, and I will not hold All Feline Hospital liable for any potential complications.

Signature: _____ Date: _____

PAYMENT MUST BE PAID IN FULL AT THE TIME OF SERVICES

ALL FELINE HOSPITAL, PC
2300 S. 48th St. * Suite 3 * Lincoln NE 68506
Phone (402) 467-2711 Fax (402) 261-3736

METACAM WAIVER

The FDA has recently required the makers of Metacam (Meloxicam) to put a more strongly worded label on Metacam. This label now reads:

Warning: Repeated use of Meloxicam in felines has been associated with acute renal failure and death. Do not administer additional doses of injectable or oral Meloxicam to felines. See Contraindications, Warnings and Precautions for detailed information.

The injectable Metacam (Meloxicam), that we use in felines, for pain control, is FDA approved for one-time use in felines. The oral Metacam (Meloxicam) is not approved for use in felines. Metacam (Meloxicam) is a non-steroidal, anti-inflammatory medication similar to Ibuprofen or Aleve (Naproxen). It is licensed for repeated oral usage in most countries outside of the United States.

It is the opinion of all of the veterinarians here at All Feline Hospital; Dr. Rebecca Arnold and Dr. Shelley Knudsen that the benefits of **every other day, low-dose** use of oral Metacam (Meloxicam), far outweigh any risks associated with this medication. We feel that no medication is 100% safe and Metacam (Meloxicam) is no more dangerous than any other medication used in felines.

However, if you would prefer not to use Metacam (Meloxicam) as a pain reliever in your feline, we can offer you alternative medications in the form of narcotics. If you are willing to use Metacam (Meloxicam), we ask that you please sign below.

I have been informed of the risks caused by repeated use of oral Metacam (Meloxicam) in felines. I authorize administration of this medication to my feline despite FDA warnings. I will not hold All Feline Hospital liable should any adverse events occur as a result of administering oral Metacam (Meloxicam) to my feline.

Signature: _____ **Date:** _____