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**Patient Anesthesia/Surgical Form**

Pet Name: \_\_\_\_\_

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

Welcome to Bedford Animal Hospital! Your pet is here to have the following surgical procedure:

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*During normal surgical procedures, we routinely clip nails, clean ears, and extract retained deciduous (baby) teeth at NO ADDITIONAL CHARGE!!*

**Is your pet current on their vaccinations?                      YES                      NO**

**Would you like your pet's vaccinations updated while here?                      YES                      NO**

**If so, which vaccines?** \_\_\_\_\_

Pre-anesthetic blood work is helpful in determining your pet's ability to undergo anesthesia. This is important in patients with concurrent disease or in patients over the age of 8 years.

Bloodwork costs \$62.00. Would you like blood work done today?

**YES**

**IF VET ADVISES**

**NO/DECLINE**

IV fluids given during an anesthetic procedure or surgery help to maintain blood pressure and allow rapid administration of drugs, should an unexpected emergency situation arise. **We reserve the right to place an IV catheter and administer fluids if your pet is elderly, ill, or a veterinarian deems it necessary. This is included in the cost of the procedure.**

I hereby authorize the Bedford Animal Hospital staff to perform the procedure noted above and to administer anesthetics or other drugs as deemed advisable for my pet. I authorize Bedford Animal Hospital to provide appropriate care should an unexpected complication arise.

**I understand the nature of the procedures and the risks involved.**

Signature of owner/responsible party: \_\_\_\_\_

Phone number(s) that you can be reached at today: \_\_\_\_\_