## Surgery Consent Form



## Consent for Anesthesia, Surgical Sterilization and Vaccination

I, being of legal age and responsible for the animal described below, have the authority to grant Merrimack River Feline Rescue (MRFRS) and its staff members, volunteers, or agents my consent to receive, transport, prescribe for, treat and/or perform sterilization surgery, tattoo, rabies vaccination (if applicable), FVRCP vaccination (if applicable), and flea treatment (if applicable) upon the animal named below.

I understand that modern techniques and trained staff will be used to care for all animals, and reasonable precautions will be used against injury, escape, or destruction of the animal. It is thoroughly understood that Merrimack River Feline Rescue and its staff, volunteers, and agents will not be held liable or responsible in any manner and <u>I assume all risks</u>.

I understand the above anesthetic and surgical, diagnostic or therapeutic procedures may involve risk of complications, injury or even death, from both known and unknown causes and no warranty or guarantee has been either expressed or implied as to result or cure. Furthermore, I authorize the hospital staff in an emergency situation, to follow through with such procedures as are necessary for the well being of my pet on a continuing basis until further communication with me.

If in the course of treatment a condition is discovered which requires medical attention or an additional procedure, such as hernia repair or the administration of IV fluids, the attending veterinarian may, in his/her absolute discretion, perform such procedure. I consent to these procedures.

I further understand that as long as, in the opinion of the attending veterinarian, the animal is an acceptable surgical candidate, sterilization procedures will be performed regardless of the animal's sex or medical condition, including pregnancy. If your cat is found to be pregnant MRFRS will still spay her. I understand that the attending veterinarian can refuse to perform any procedure on any animal for any reason. Such refusal is at the sole discretion to the attending veterinarian.

I understand that Merrimack River Feline Rescue is not responsible for any further treatment, after care or emergencies beyond today's above described procedures. I agree to be responsible for any after care urgent, or otherwise, that may be needed.

The presence of a heart murmur can put my cat at an increased risk for anesthesia and surgical complications. MRFRS will still perform the sterilization procedure, even if a murmur is detected during exam.

Initial here (if applicable): I refused to pursue recommended pre-surgical bloodwork:

I would like to purchase (for an additional fee): Flea Treatment:\_\_\_\_\_ Microchip:\_\_\_

Owner's Initials Required

The MRFRS is a nationally recognized, non-profit volunteer driven organization committed to ensuring the health and welfare of feral and domestic cats and kittens by promoting pro-active, compassionate, no-kill programs.

CATMOBILE

You can afford to give

your pets the healthy,

catmobile@mrfrs.org

happy lives they

1-978-465-1940

deserve.

63 Elm Street (Route 110) Salisbury, MA 01952 phone: 978-462-0760 fax: 978-463-6826 info@mrfrs.org www.mrfrs.org

Signature: \_\_\_

Has this cat received any medication in the last 14 days? (Including over the counter medications, flea and heartworm medications): O Yes O No	
f yes explain:	
Does this cat have any health conditions we should know about? O Yes O No	)
Cat Name: Owner's Printed Name:	
Number where you can be reached today during surgery:	