Consent for procedures

Date: Click here to enter a date.

Owner’s name: Click here to enter text.

Address: Click here to enter text.

Patient name: Click here to enter text.

Patient species: Click here to enter text.

Patient breed: Click here to enter text.

Patient colour: Click here to enter text.

Details of the Procedure: Click here to enter text.

**Including (tick as appropriate):**

Ultrasound scan

Sedation

General anaesthesia

Clipping of hair

Blood sampling

Urine sampling by needle󠇪

Needle biopsy

Use of unlicensed medicines  details: Click here to enter text.

I hereby give permission for the procedures detailed on this form together with any other procedures which may prove necessary in an emergency.

* The nature of these procedures and of other such procedures as might prove necessary has been explained to me.
* I understand that there are some risks involved in all procedures.
* In the event that the veterinary surgeon is unable to contact me on the numbers provided, I understand the veterinary surgeon will act in the best interests of my animal.

Signature: Click here to enter text.

Date: Click here to enter a date.