



## ANESTHESIA AND SURGERY CONSENT FORM

- I, the undersigned fully understand that there are several risks associated with any anesthesia and surgery including infections, accidental injury, nerve or muscle damage and even the possibility of death. Even a 'minor' surgery includes the risks of post-operative colic, hernia, bleeding, infections and other potentially fatal problems.
- In some cases, a serious problem might result in a need for expensive treatment if the animal is to survive.
- Surgical treatment DOES NOT include any guarantee of success, as there are too many factors related to each individual patient to assure the same outcome for every case. Surgery is ALWAYS done on a 'best effort' basis but sometimes fails to provide the intended outcome.
- I have read and completely understand the statements above and accept the risks of anesthesia and surgery for my horse.

Owner Name: \_\_\_\_\_

Horse Name: \_\_\_\_\_ Stable: \_\_\_\_\_

Microchip No: \_\_\_\_\_ Passport No. \_\_\_\_\_

I, the undersigned, confirm that I authorize Sharjah Equine Hospital to perform a surgical procedure on the above referenced horse. I have been informed of the nature, purpose and possible risks of the surgery and I agree to the proposed treatment plan.

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

( ) verbal consent to the above through WhatsApp message

