



Ventral Bulla Osteotomy Release Form

Owner: _____ Patient: _____ Date: _____

Referring Hospital: _____ Veterinarian: _____

Surgery to be performed: _____

I have discussed the aforementioned surgery and the importance of pre-surgical blood testing with the referring veterinarian. I understand that there are risks and hazards involved with the recommended surgical procedure, including anesthetic risk. I realized that no guaranty or warranty can ethically or professionally be made regarding the results or cure.

I authorize the surgeons and/or associates (Drs. Harper and Franklin) of Texas Specialty Veterinary Services, PLLC to perform surgery on my pet. I am also aware that Dr. Harper is board certified in large animal surgery only but have retrained in small animal surgery as well, therefore, offers their services to small animal clients and their animals. I have also been made aware that Dr. Franklin is small animal surgery residency trained, but has not become board certified at this time. At this time Dr. Franklin's title is Practice Limited to Surgery. I understand that there are other board-certified surgeons in small animal available in the area.

Your pet has been diagnosed with an inner ear infection, tumor, or polyp that needs surgical treatment. You have elected to have a procedure called a ventral bulla osteotomy. This surgery involves entering the inner ear through a small hole in the bone on the bottom side of the skull. The tumor or infection is cleaned out and sometimes a drain is placed. After fully discussing the planned surgical procedure and associated risks with your doctor or the surgeon, please sign the consent for surgery below:

The undersigned owner or authorized agent of admitted patient _____ hereby authorizes the admitting veterinarian (and his/her designated associates or assistants) to administer such treatment as is necessary to perform the below-mentioned procedure. The nature of the procedure(s) has been explained to me and no guarantee has been made as to results or cure. I understand that there may be risk involved in these procedures. I consent to the administration of such anesthetics or tranquilizers as are necessary.

Anesthetic Risks: (Although every effort is made to make anesthesia as safe as possible including vital sign monitoring and use of the most up to date anesthetic agents and equipment, understand that anesthesia has inherent risks). The incidence of complications from anesthesia is extremely low and we do not anticipate any in your pet but on rare occasions the following can occur:

1. Allergic reaction to the anesthetic agents
2. Heart rhythm abnormalities
3. Untoward reactions to the gas including drops in blood pressure or respiratory difficulties
4. Just like in humans, on very rare occasions, general anesthesia can result in death.

We are prepared and will treat any anesthetic reactions if they occur, but general anesthesia is never completely without risk, just like driving a car.

I consent to the following surgical procedure(s): Ventral Bulla Osteotomy

Surgical Risks Include:

1. Residual inner ear infection which may require additional testing and medication at an additional cost.
2. Facial nerve injury which can be temporary (50%) or permanent (5-10%)
3. Horner's syndrome, a nerve condition which affects the eye (temporary occurs about 85% of the time, permanent is rare)
4. Pain upon opening the mouth which usually resolves in two weeks
5. Vestibular syndrome which involves balance problems (more common if your pet has a head tilt before surgery)
6. Recurrence of polyp (the cure rate is about 80% with this surgery)

Strict adherence to post-surgical care and medicating of your pet will minimize these potential complications and serious problems are very uncommon in most cases.

Texas Specialty Veterinary Services (TSVS) occasionally features patients on its Facebook page, YouTube channel, other social media sites, and in publications (print or online). With your permission, we may share your pet's picture, video or story. We may mention your pet by name, but never the owner's name. TSVS would be grateful that you'll be helping other pets by educating pet owners, veterinary technicians and veterinarians.

Please initial to allow TSVS to mention your pet _____

Date

Pet Owner/Agent Signature

Phone I Can Be Reached At Today

Telephone (800) 707-0167/(210) 706-0167

Email: tsvsinfo@tsvs.net