



CLINIC USE ONLY
Account #: \_\_\_\_\_ Staff: \_\_\_\_\_
Date: \_\_\_\_\_

Surgery/Anesthesia

Pet Name: \_\_\_\_\_ Age: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Best Contact Phone #: \_\_\_\_\_ Best method of contact: Phone Call/ Text Message

Procedure to be performed: \_\_\_\_\_

- 1. Did you withhold your pet's food/water for at least 12 hours? Yes No
2. Please list any current medications and when the last dose was given:

3. Are there any health or behavior concerns we should know about your pet?

4. We recommend performing an EKG and blood work to evaluate the liver and kidneys before any anesthesia is administered. This pre-surgical work up allows us to make informed decisions about the best way to treat your pet. Do we have your permission to perform a pre surgical screen on your pet? (\$78.50) for EKG, Serum Chemistry Panel Yes No

5. We recommend using the AccuVet Laser on spays and soft tissue surgeries. The laser seals tiny nerve endings and pain receptors, which helps your pet recover with much less pain. The laser also seals small blood vessels which greatly reduces the amount of bleeding during surgery. Overall, your pet will recover quicker and safer. (\$50.00) Yes No

6. Would you like take home pain medication for your pet? Yes No

7. While my pet is anesthetized, please perform the following procedures:
[ ] Clean and Polish Teeth (please inquire about cost) [ ] Full mouth x-rays (\$87.00)

8. Do we have your permission to perform any extractions deemed necessary by the veterinarian? Yes No

[ ] Apply Fluoride (helps strengthen the enamel) \$8.00

[ ] HomeAgain Microchip (includes registration and 1st year membership) \$40.00

[ ] Pedicure FREE (\$14.80 VALUE)

All patients must have a physical exam (past 12 months) at Animal Medical Clinic before anesthesia. (\$52.50)

Vaccines required to stay in the hospital for any procedure: (surgery, boarding, bath etc.....)

Canine- DA2PP (\$16.30) or DAP (\$31.50) and Bordetella (\$19.40)

Feline- FVRCP (\$17.60)

Persons authorized to pick up your pet: \_\_\_\_\_

Signature: \_\_\_\_\_ Best Contact Phone #: \_\_\_\_\_