

**DISCHARGES ARE PROCESSED
BETWEEN 9AM AND 11AM OR
BETWEEN 2PM AND 5PM**

**PATIENT
LABEL
HERE**

SURGICAL CONSENT FORM

DATE: _____

PROCEDURE: _____

PHONE NUMBER WHERE YOU CAN BE REACHED TODAY:

HOME: _____ **WORK:** _____ **CELL:** _____

MY PET HAS/HAS NOT EATEN SINCE 8PM LAST NIGHT.

- ALL PETS PRESENTED FOR SURGERY MUST BE CURRENT ON **RABIES** AND **DISTEMPER** VACCINATIONS. A COPY OF A CURRENT RABIES CERTIFICATE OR CONFIRMATION BY TELEPHONE FROM THE VETERINARIAN ADMINISTERING THE VACCINATION IS REQUIRED. **A RABIES TAG IS NOT ACCEPTABLE.**
- DOGS MUST HAVE BEEN VACCINATED FOR **KENNEL COUGH** WITHIN 6 MONTHS OF ADMISSION.
- ANY ANIMAL FOUND TO BE HARBORING EXTERNAL PARASITES WILL BE TREATED AT THE OWNER'S EXPENSE.

THE FOLLOWING TREATMENT OPTIONS ARE AVAILABLE AT AN ADDITIONAL COST:

- **PREANESTHETIC BLOODWORK.** There are potential risks associated with both anesthesia and surgery. Preanesthetic bloodwork is a means of reducing these risks by testing kidney and liver functions to see if your pet can tolerate anesthesia. This bloodwork is required for all pets over 6 years of age. This testing is available at a cost of \$55.00.
- **I ACCEPT/DECLINE PREANESTHETIC BLOODWORK.** _____
Please Initial
- **POST OPERATIVE PAIN MANAGEMENT.** The following options are available for controlling post-operative pain:
 - Single dose injection of post-operative pain medication **ACCEPT: _____**
 - Oral pain medication dispensed (dogs only) **ACCEPT: _____**

Application of a transdermal fentanyl patch is included in the costs of declaw surgery.

I DECLINE ANY POST OPERATIVE PAIN MEDICATION FOR MY PET. _____
Please Initial

The final determination as to whether pain medication is necessary will be made by the Veterinarian after surgery. If in his/her opinion your pet is suffering, pain medication will be administered and you will be charged accordingly. _____
Please Initial

If you are unsure of the best options for your pet's needs, please ask the admitting Veterinarian.

**The following procedures may be easily performed while your pet is sedated: ___NAIL TRIM \$21.00
___MICROCHIP \$31.00 ___EXPRESS ANAL GLANDS \$25.00 ___DREMEL NAILS \$33.50**

DATE: _____ **OWNER'S SIGNATURE:** _____

**IF YOU WOULD LIKE TO CHECK THE STATUS OF YOUR PET, PLEASE
CALL AFTER 2pm.**