

NORTHGATE ANIMAL HOSPITAL SURGICAL ADMITTING FORM

OWNERS CONSENT FOR ANESTHESIA AND SURGERY:

DATE: _____ CLIENT NAME: _____ PET NAME: _____

PROCEDURE: _____

I am the owner or agent of the owner of the above named pet and hereby authorize the performance of this procedure. I understand that unforeseen conditions may necessitate an extension of the procedure or a different procedure and therefore authorize such procedures as necessary in the professional judgment of the veterinarian. I authorize the use of appropriate anesthetics and medications. I have been advised of the nature of the procedure and I understand that while every effort will be made to provide the best care for my pet, results cannot always be guaranteed. We recommend that certain laboratory tests be performed on patients before general anesthesia to assess their risk category.

BLOODWORK: We recommend that pets under 9 years of age have pre-operative blood tests (mini-chemistry & PCV). It is not required, but if you would like to authorize these tests an additional fee of \$57.30 will be added.
I (check one) DO () DO NOT () want pre-operative blood tests.

Please note: Pets 9 years and over are required to have pre-anesthetic blood work (chemistry & PCV) and will be placed on IV fluids. The total costs of these procedures are \$158.00.

LASER SURGERY: Laser surgery reduces pain, swelling, and bleeding during and after surgery. This procedure is available for an additional fee of \$71.00. I DO () DO NOT () want laser. (ALL DECLAW SURGERIES ARE DONE WITH LASER)

Pain medication will be prescribed for your pet if needed and is an additional fee above the surgery cost.

TREATMENT: While your pet is here, if we see a problem that needs to be treated such as an ear infection, skin allergy, etc. do we have authorization to treat your pet. The additional treatments will be at additional costs based on what is needed. If you need to be notified first, please give us a current phone number.

OK TO TREAT () CALL FIRST () phone number _____

MEDICATIONS: Is your pet on any medications, supplements, or preventatives? When was the last dose given?
LIST MEDICATION AND TIMES GIVEN: _____

MICROCHIP: Microchipping your pet places an identification chip with coordinating number under the skin. The number is then registered to you through Home Again and if your pet is lost can assist in returning them home. The fee for the microchip is \$45.00 with a separate fee to Home Again Pet Recovery for \$19.99 to register your pet in the national database. The microchip fee is regularly \$50.00 but is discounted 10% for pets undergoing anesthesia. I DO () DO NOT () want my pet microchipped.

FLEAS: Pets with fleas will be treated with an in hospital product at an additional cost. If you have recently treated your pet for fleas, please inform us of what product used and when you applied it. _____

DOGS: Has your dog been tested for heartworms? If not, would you like that done today for \$30.40? I DO () DO NOT ()

CATS: Has your cat been tested for Felv/FIV? If not, would you like that done today for \$54.90? I DO () DO NOT ()

*Cat Carriers are **required** at release of all cats. If you do not have your own carrier we will release your pet in a cardboard carrier at an additional cost of \$8.00 plus tax.

HOW WILL YOU BE PAYING FOR SERVICES TODAY? CASH () CHECK () CREDIT CARD () CARE CREDIT ()

All fees must be paid in full at the time of release unless other arrangements are made in advance. I have read the above information; I understand and agree to the conditions and policies of Northgate Animal Hospital.

Signature of Owner _____ Date _____

Phone number where you can be reached today _____

You will be called if there is an emergency or further concern regarding your pet.

Would you like a text message (data rates will apply) when your pet is done with their procedure? I DO () I DO NOT ()