

Office use only:

Pet Weight _____
 Was pet fasted? Y / N _____
 Were meds given? Y / N _____
 Procedure _____
 Receptionist/Tech Initials _____

GREECE ANIMAL HOSPITAL

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 Rochester, NY 14612
 585-227-7100

Label
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CANINE SURGERY AND DENTAL CONSENT FORM

NEW PATIENTS

If this is your pet's first visit with us, there will be a charge for a full physical examination on your pet to insure that there are not existing health problems that could possibly lead to complications during the procedure you have scheduled. There will be a \$47.00 charge for this exam.

PRE-ANESTHETIC BLOOD TESTS, CATHETER and FLUIDS

Your pet will have an intravenous catheter placed and receive intravenous fluids during any procedure requiring general anesthesia. Prior to such a procedure a pre-anesthetic blood test, to screen for medical conditions that might affect anesthesia, will be performed if not done previously.

SEVOFLO ANESTHESIA

Currently we use Isoflurane anesthesia, an anesthetic with an excellent safety record. You may elect Sevoflo anesthesia for your pet. It is an anesthetic we now carry that is utilized for 95% of all human pediatric procedures in the US, which allows for rapid and smooth induction and recovery with no "anesthesia hangover". There is an additional cost of \$1.00 per minute of anesthesia time above the normal anesthesia charge

- [] YES I authorize the use of Sevoflo if it is appropriate in my pet's procedure and agree to pay the additional charge as above.
 [] NO I prefer the use of the standard Isoflurane anesthesia

PAIN MEDICATIONS

*Pain medications are administered to all surgical patients. The cost of pain medications for elective procedures will vary from \$19.80 - \$49.50, in addition to the surgical fee, depending on the size of the patient and the medications used.

RECOMMENDED TESTS

FECAL TEST For dogs that have not been tested within the past year.

- [] YES Please provide a fecal examination for my pet. I understand there is a charge of \$22.05 for this test.

HEARTWORM TEST: For dogs older than 6 months, and born prior to last October. For adult dogs that have not been tested within the past year.

- [] YES Please test my dog for Heartworm. I understand there is a charge of \$39.50 for this test.

VACCINES

We require that all pets are current on their Rabies vaccination and Distemper vaccination. (Cost: Rabies \$18.50 & Canine booster \$21.00)

There may be an exam charge if vaccines are given. (Cost: \$47.00)

YES, please administer only the following vaccines: [] DISTEMPER [] RABIES [] KENNEL COUGH

*Occasionally, a pet can have a reaction to the vaccines. The reaction can be as mild as a few hours of being a bit lethargic to, in very rare cases, death from anaphylactic shock. It is impossible to predict which pets are prone to vaccine reactions; however, every effort will be made to treat your pet, should a reaction occur. **If you are aware of your pet having had a vaccine reaction in the past, please let the doctor know so that precautions can be taken.**

DENTAL PROCEDURES

Occasionally intraoral radiography, tooth extraction, or repair is necessary due to advanced periodontal disease or severe damage to a tooth as a result of trauma or cavities. An additional fee would be incurred for these procedures. If you would like to be called to discuss any necessary extractions or repairs, please let us know now, and leave us a number where you can be reached.

Do you authorize tooth extraction(s) or repair without contacting you first? [] YES [] NO* *PHONE # _____

Pain medications may be administered with extractions. Prices range from \$19.80 - \$49.50, in addition to the surgical fee.

**If we cannot contact you regarding medically necessary extractions or fillings, then a second procedure will need to be scheduled to perform these procedures.*

PERMANENT IDENTIFICATION

We can implant a microchip into your pet for an ID that can't get lost! This simple procedure can be performed while your pet is here today. The cost for the surgical implantation of the chip is \$61.20. The owner will also incur a fee when they send in the national registration papers.

Does your pet have a microchip? Yes ___ No ___ Would you like a microchip implanted today? Yes ___ No ___

I hereby certify that I have read and fully understand this authorization for treatment. I am the owner or agent for the above-described animal and have the authority to execute this consent. I assume financial responsibility for all charges incurred to the above patient and agree to pay all such charges when the animal is released from the hospital. I understand that in the event of an emergency my pet will have treatment provided at my cost and I will be contacted as soon as possible. I understand that any procedure, especially anesthesia, involves some risks and that results cannot be guaranteed. I understand that if the animal is not current on the combination of distemper and rabies vaccinations, this will be done upon hospitalization and added to the cost of the above procedure(s).

Signature of Owner or Agent: _____ Witness to Signature: _____ Date: _____