



Surgical Admission Form

Pet's Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Pre-Anesthetic Testing**

Your pet is with us today for a procedure that will require anesthesia. We will perform a physical examination on your pet before administering the anesthesia. We require pre-anesthetic blood testing to check your pet's organ function and blood count. These tests will be performed in order to insure that your pet is in a low risk category during anesthesia by ruling out pre-existing internal problems that may not be evident upon physical examination, but could possibly lead to complications. We will proceed with these tests unless you request us not to. The cost will be **\$68.20**.

**Intravenous Fluids and Catheter Placement**

In order to minimize complications/risks while under anesthesia, your pet will have an IV Catheter placed so that he/she can receive venous fluids. These fluids allow the liver and kidney to flush out any remaining anesthesia that is in the blood, maintain blood pressure at a safe level, and gives the doctor venous access to administer emergency drugs or blood if needed. We will place an IV catheter and administer fluids unless you request us not to. The cost will be **\$40.00**.

**Post Operative Pain Management**

After any surgical procedure, pets do experience some pain and discomfort for the first 48-72 hours. Pain medication will be given and dispensed to reduce pain and discomfort as well as inflammation after a surgical procedure has been performed. **The cost will vary** with the body weight of your pet.

**Dental Procedure/Extractions**

If your pet is having a Dental done today, a thorough dental exam can only be performed after anesthesia is administered. Often we discover problem areas like loose or broken teeth that cannot be identified while he/she is awake. It is best to address these during the current procedure. The cost of these procedures cannot be appropriately estimated until identified so an additional cost will be incurred when they are performed.

**PLEASE CHOOSE ONE:**

- Perform the necessary dental procedures deemed best for <animal>.
- Call with an updated estimate prior to performing any additional procedures.
- Do not perform any additional dental procedures today.

**\*\*\*\*\* PLEASE MARK APPROPRIATE BOXES\*\*\*\*\***

- Do**     **Do not** perform pre-anesthetic blood work on my pet, but please proceed with the scheduled anesthesia/surgery/ dentistry.
- Do**     **Do not** perform intravenous fluid replacement therapy on my pet, but please proceed with the scheduled anesthesia/ surgery/dentistry.
- Do**     **Do not** dispense post-op pain medication for my pet, but please proceed with the scheduled anesthesia/surgery/ dentistry.

**Additional Services:**

- Do**     **Do not** microchip my pet at a cost of **\$52.32**.
- Do**     **Do not** send off a sample of the lumpectomy tissue for Histopathology at a cost of **\$97.50**.

**\*\*\*\*\* An estimate of anticipated fees can be provided to you upon request. \*\*\*\*\***

I authorize the doctor to perform anesthesia and the following procedures/surgeries: \_\_\_\_\_, on my pet <animal>. I understand that all due caution will be taken, but there is always a risk that an adverse reaction or problem could occur by placing my pet under anesthesia.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone number where you can be reached while <animal> is in the hospital. \_\_\_\_\_