

Client Name:	Pet Name:
Telephone Numbers where you can be reached: _	
Procedure to be performed:	
physical examination. In addition to the physical examinat should have pre-anesthetic blood analysis and an IV	r to placing him/her under anesthesia we will perform a complete tion, we feel that every pet undergoing anesthesia/surgery catheter. We feel very strongly about post -surgical pain necessary and appropriate medication to control pain.
the presence of dehydration, anemia, infection, dia conditions may not be detected without a blood p	
which help to counteract hypotension (low blood should arise during surgery, an IV catheter also all	nous catheters during surgery/anesthesia allow fluids to be given pressure) produced by anesthesia. If an emergency situation ows immediate venous access so that drugs can be given during this will require a small area of hair to be dipped on the leg.)
becomes lost, we offer microchip implantation at registration of your pet within the pet registry data	ification and help ensure your pet's safe return in the event he/she the time of surgery. We will provide you with a form for the abase. (There is an additional charge for registration of your pet, t register your pet for the microchip to be registered within the database.
oral discomfort and/or ongoing infection of surrounding during such procedures for an additional fee. An antil	e or retained deciduous teeth that should be extracted to prevent bone. We will extract any loose or retained teeth found biotic may be prescribed to reduce the risk of infection following inhealthy canine teeth is the protrusion of the tongue to one side stults in a medical condition or issue.
injury, or even death, from both known and unknown cau implied as to result or cure. Your signature below constitu- the above, (2)the procedure(s) have been explained to you	rocedures being performed may involve risk of complications, uses and no warranty or guarantee has been either expressed or utes your acknowledgement that (1) you have read and agreed to ur satisfaction, (3) you have had the chance to ask questions, and consent to the performance of the procedure(s) and to the

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

Signature: