**ALL PETS MEDICINE, SURGERY, & REHABILITATION CLINIC, PA**

**PRE-SURGICAL AUTHORIZATION (CANINE SPAY/NEUTER)**

This is a big day for your Pet!!

It is our goal to make you and your pets’ experience as smooth and comfortable as possible. By carefully filling out the information on both sides of this sheet, you will help us to give exactly the level of care that your pet deserves.

Remember, our staff wants to help with any questions that you might have!

Pet’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_

Is your pet currently taking any topical or oral medications, supplements, or flea/tick/heartworm prevention?

If yes, please name medication and last dose?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surgical procedure(s) to be performed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please note that for the protection of our other patients:**

**\*All pets entering our surgery room or kennel facility must be current on**

**core vaccinations.**

**\*Any pet found to have fleas will be treated with Capstar and Frontline at**

**the owner’s expense.**

The following services can benefit your pet on his/her big day. Please keep in mind there will be additional cost associated with these options. Read them carefully and ask our staff any questions!

**Yes No** **($36.05) Radio / laser surgery**- this equipment significantly decreases

inflammation and blood loss during surgery which means less pain for your pet.

**Yes No** **($41.78) Pre-surgical blood screen** of liver and kidney function- this aids

the doctor in making the best choice of anesthetics for your pet. Kidney and liver problems require specific anesthetics, and these problems can exist in your pet at any age without causing them to act ill.

.

**Yes No** **($49.43)** **Microchip** Identification- helps assure that your lost pet will be

reunited with your family.

\*\*\* **Please note**: Your pet will be undergoing general anesthesia for this procedure. If he or she is 4 years of age or older (or by Doctor discretion) his/her leg will be shaved and an IV catheter will be placed for support under anesthesia.

**\*PLEASE FINISH ON BACK OF SHEET\* ☺**

|  |
| --- |
| **PATIENTS FOR SPAY SURGERY ONLY:**   * Has she been in heat recently? Yes\_\_\_\_ No\_\_\_\_ If your pet is found to be in heat at the time of surgery there will be an additional $23.01 charge due to the increase in surgery time. * If your pet is found to be pregnant during spay surgery we have two options: (check one)   □ **Continue with surgery**  There will be an additional $54.08 charge to spay a pregnant animal. A  pregnant uterus is larger in size and has an increased blood supply  which leads to longer surgery time.  □ **Stop surgery and let the pet continue with pregnancy.**  You will be charged for the anesthetic and surgery time to this point. |

**OTHER SERVICES:** Please check any of the following services you would like us to perform.

□ **Vaccinations □ Heartworm Test**

□ Distemper/Parvo **□ De-worming**

□ Lyme **□ Nail Trim (no charge)**

□ Rabies **□ Check Ears (no charge)**

□ Kennel Cough **□ Other (please explain)**

Phone number where you may be reached today: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How would you like us to communicate with you after surgery?

* Text
* Phone call

Pick up time: \_\_\_\_\_\_\_\_\_\_\_\_\_ (please schedule a time with the technician)

Owner’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Owner/Responsible Agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_