

Owner's Name _____ Pet's Name _____ Date _____

Phone numbers where you can be reached today

1) _____ 2) _____ 3) _____

Spay - Dogs, recent heat cycle? Yes No Neuter Dental

Mass Removal – Would you like to biopsy the Mass? Yes No

Other Surgery/Sedated groom _____

Food eaten since midnight? Yes No

Has your pet had any medications in the last 24 hours? _____

_____ Initial. If PHC finds evidence of fleas we will administer flea control to your pet at cost to the owner. This is done to prevent infestation of our facility and other pets that may be exposed as a result.

_____ Initial. There is an exam performed before any procedure if the animal will allow. If the pet is deemed unsafe for surgery the owner is responsible for paying an exam fee even if surgery isn't performed.

_____ Initial. At Pet Health Clinic we are equipped to handle MOST emergencies but in rare cases have to refer pets for care. This care is at the discretion of, and at cost to the owner.

_____ Initial. I have read and signed the estimate that was provided for today's procedure. I understand that the total will not be more than the high end of the estimate, unless discussed and approved. I understand I am responsible for full payment.

_____ Initial. If this is a dental procedure a scaling, polishing and fluoride treatment will be performed. Any obviously diseased teeth will be extracted. Items such bone grafting, digital radiography and more advanced techniques are available at some other veterinary clinics. If you are interested in these we would be glad to refer to another local hospital.

Recommended: Only initial if you want these services. *Package pricing for multiple diagnostics*

Yes No - Would you like to MICROCHIP your pet? **\$52 with a surgical procedure**

Yes No - We recommend **Pre-op** blood screens for all pets before anesthesia. Diseases like anemia, liver or kidney disease can be detected on lab screens and affect surgical risk and recovery. **\$94.**

Yes No - **PT/PTT** is a blood test that can evaluate the ability to form blood clots. It measures the amount of time it takes for a clot to form. The PTT assesses the amount and the function of certain proteins called coagulation factors that are an important part of blood clot formation. **\$65**

Yes No - **For Cats** there is a test that measures a cardiac protein (ProBNP). This test diagnoses 85% of cats who have cardiac disease before they show any signs or symptoms. **\$55**

Please complete reverse side →

Wellness items for Dogs:

Yes No - Rabies - \$25.00

Yes No - DHPP - \$28.00

Yes No - Leptospirosis - \$25.00 or *\$8 when paired with DHPP 1yr

Yes No - Lyme - \$40.00

Yes No - Bordetella - \$28.00

Yes No - Heartworm Test w/Tick Profile - \$55.00

Wellness items for Cats:

Yes No - Rabies - \$25.00

Yes No - PureVax Rabies - \$33.00

Yes No - FVRCP - \$28.00

Yes No - FELV - \$35.00

Yes No - Felv/Fiv Test - \$55.00

Additional comments, questions, or concerns _____

I am the owner or authorized agent of the pet listed above. I consent to and authorize Pet Health Clinic to perform diagnostic, therapeutic, anesthetic and surgical procedures as necessary and advisable for the treatment and maintenance of my pet's wellbeing. While I expect all procedures to be performed to the best of the abilities of the staff, I understand no guarantee as to the outcome or results of any treatment can be given. If I am unable to be reached with reasonable effort I consent and authorize the doctor to proceed with treatment for the health of my pet. I expect reasonable precautions will be used to ensure my pet's safety and well-being while under the care of Pet Health Clinic. I understand that with any procedure there are risks which may not be predicted and I accept these risks, inclusive of my pet's death. I understand these risks exist during the course of any medical care.

Owner/Agent _____

Date _____

Printed Name _____