



# Canine Surgery (0-6 years of age) Surgery Consent Form



Owner's Name: \_\_\_\_\_ Patient (Dog's) Name: \_\_\_\_\_

\*Phone #(s) where we may contact you for further information or in case of an emergency:  
 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

What type of surgery is your pet scheduled for today\*? (Please circle all that apply)

Spay (female) Neuter (male) Tumor Removal Dental Procedure Other (please specify) \_\_\_\_\_

Additional Services	Description	Cost	Accept	Refuse
<b>Pre-Surgical Blood Screen</b>	Prior to anesthesia we highly recommend a blood work-up to tell us how well your pet's organs are functioning at this time and to make sure your pet is ready for anesthesia.	\$105		
<b>HomeAgain Microchip Permanent ID</b>	1 in 3 pets will get lost; Without ID, 90% won't return home. <i>If you desire, we can place a <b>Home Again microchip</b> at a reduced cost (\$5.00 off) while your pet is under anesthesia.</i>	\$50		
<b>Intestinal Parasite Testing</b>	We recommend an intestinal parasite screen to ensure your pet is free of intestinal parasites such as roundworms, hookworms, etc.. If your dog is going to be boarding or in daycare this test needs to be completed every 6 months.	\$35		
<b>Biopsy for patient having lumps removed</b>	If your pet is having a lump removed today, we recommend that the lump be sent to the lab for a histopathology (a test to tell us what type of lump it is). We will have results in 5-7 business days.	\$140 to \$230		
<b>Annual Heart worm and tick-borne diseases blood test</b>	All dogs should be tested annually for Heart worm disease. This is a deadly disease that is spread by mosquitos. This test also tests for several tick-borne diseases including Lyme disease	\$46		
<b>Vaccinations</b>	Initial the vaccines below that you would like your dog to have today: ___ DAP4L (Distemper, Adenovirus, Parvovirus, Lepto 4 strains) \$27 ___ Bordetella (Kennel Cough vaccine) \$24 ___ Rabies Vaccine (1 yr. or 3 yr.) \$22 - \$26 ___ Lyme Vaccine \$37 ___ Canine Influenza Vaccine (Required for boarding/daycare/grooming) \$30	See box to left		

\*If Fleas are present on your pet during the time of surgery, your pet will be given a dose of medication that will kill the fleas for 24 hours; this fee will be added to your total invoice. \_\_\_\_\_

I understand that during the performance of the foregoing procedure or surgery, unforeseen conditions may be revealed that necessitate an extension of the procedure or surgery, or of different procedures or surgeries than those set forth above. Therefore, I hereby consent to and authorize the performance of procedures or surgeries, as deemed necessary by the veterinarian. I have been advised as to the nature of the procedure(s) or surgery and the risks involved. I realize that results cannot be guaranteed. I am the owner or agent of the above-described animal(s) and have the authority to execute.

this consent. I am also aware that unforeseen events resulting from the procedure(s) will not relieve me of any obligation to all reasonable costs incurred regarding the animal.

I also understand that these charges will be paid for at the time of release and a deposit may be required.

For elective procedures all dogs must be up to date on all core vaccinations. Spring Meadow Vet Clinic will not be held responsible for any sickness incurred during your dog's stay; your dog should be current on all vaccines, for best results all vaccines MUST be given at least 2 weeks prior to the hospital stay.

I hereby consent to and authorize the performance of the procedure(s) listed/circled above.

\_\_\_\_\_  
Signature of Pet owner

\_\_\_\_\_  
Date