

CHINA GROVE VETERINARY CLINIC ANESTHESIA/SURGICAL RELEASE FORM

I AM THE OWNER/AGENT OF _____ I UNDERSTAND THAT
I AM AUTHORIZING PERFORMANCE OF THE FOLLOWING PROCEDURE(S):

I CONSENT TO THE ADMINISTRATION OF THE FOLLOWING VACCINES TO
UPDATE MY PET TO CURRENT STATUS:

I WOULD LIKE THE FOLLOWING ADDITIONAL ELECTIVE PROCEDURES
PERFORMED:

- PAIN MEDICATION (\$30.00 – DOG / \$17.00 – CAT)
 PRE-ANESTHETIC LABWORK (\$70.00) – TESTS KIDNEY AND LIVER FUNCTION,
 RED AND WHITE BLOOD CELL LEVELS, GLUCOSE LEVEL
 HEARTWORM TEST (\$28.00)
 FELINE LEUKEMIA / FIV TEST (\$43.00)
 DECIDUOUS TOOTH EXTRACTION (\$15.00/TOOTH)
 MICROCHIP IMPLANTATION (\$42.00) – INCLUDES REGISTRATION
 NAIL TRIM (COMPLIMENTARY WITH ANESTHETIC PROCEDURE)

FURTHERMORE, I UNDERSTAND THAT DURING THE PERFORMANCE OF THE
PROCEDURE(S) THAT I HAVE AUTHORIZED, UNFORESEEN CONDITIONS MAY
ARISE. THEREFORE, I HEREBY CONSENT TO AND AUTHORIZE THE
PERFORMANCE OF SUCH PROCEDURES AS ARE NECESSARY IN THE EXERCISE
OF THE VETERINARIAN'S PROFESSIONAL JUDGMENT. I ALSO DO HEREBY
ACKNOWLEDGE THAT I UNDERSTAND THAT THERE ARE NO GUARANTEES
EITHER EXPRESSED OR IMPLIED THAT THE PROCEDURES AUTHORIZED WILL
BE WITHOUT COMPLICATIONS FROM UNEXPECTED EVENTS BEYOND THE
VETERINARIAN'S AND HOSPITAL'S CONTROL.

ALL PETS WILL BE TREATED FOR FLEAS WITH A CAPSTAR PILL UPON ENTERING
THE CLINIC FOR \$7.00.

**THERE WILL BE AN ADDITIONAL \$67.00 CHARGE FOR ANIMALS THAT ARE
PREGNANT AND ARE UNDERGOING A SPAY SURGERY.**

SIGNATURE _____ DATE _____

PHONE NUMBER: _____