

Would you like your pet vaccinated? Y___ N___

Would you like your pet microchipped? (\$20.00) Y___N___

Would you like a complimentary nail trim? Y___ N___

PRE-OPERATIVE BLOOD WORK

If your pet is in for anesthesia/surgery, there are inherent risks that are unavoidable. We will perform a full physical examination on your pet before administering the anesthesia. However, we highly recommend a pre-op blood profile to be performed for the purpose of ensuring that your pet has normal major organ function before anesthesia. This includes indicators of anemia, infection, dehydration, kidney function, and liver function. By performing this pre-op blood profile, we will be better able to rule out pre-existing internal problems that may not be evident physically but could lead to serious complications. There is an additional \$70.00 fee for these important procedures.

Pets present today for an anesthetic procedure that are 7 years of age or over is REQUIRED to have this performed. There is increased risk in older patients and we require base line blood work within the last 3 months before putting an older pet under anesthesia. For younger animals, you may decline this if you wish to do so.

___ Yes, Please complete the blood work ___ No, I decline the recommended blood work.

INTRAVENOUS FLUIDS

During surgery a pet's natural reaction to general anesthesia is for blood pressure to drop. This drop may be life threatening or also lead to damage to their kidneys. In an effort to prevent this from occurring we offer the administration of IV fluids to help support kidney function and regulate blood pressure. At Willamette Valley animal hospitals, our standard of care includes the placement of an IV catheter for all surgical procedures. In addition to the IV catheter, you can elect for the administration of IV fluids as an additional safety measure. The cost is \$65.00.

___ Yes, Please establish IV fluids for my procedure. ___ No, I decline

****In the event of an emergency, IV fluids may be administered and the charge will be applied.****

POST-ANESTHETIC NAUSEA TREATMENT

We know that after anesthesia many of our patients experience vomiting, nausea or a slow return to normal appetite. A new anti-nausea medication has been shown to reduce nausea and vomiting by 90% and speed a return to normal appetite after surgery (6 hours vs. 20 hours in a recent study). The cost of the injection is for cats and dogs up to 25lbs the post-anesthesia nausea treatment is \$40, Dogs 25.1-80lbs \$53.50, and Dogs 80.1lb and above the post-anesthesia nausea treatment is \$77

___ Yes, I would like my pet to receive a post-anesthesia nausea treatment

___ No, I decline a post-anesthesia nausea treatment

ELIZABETHAN COLLAR

Surgical Procedures result in incisions that must be closed with sutures. While most surgery patients leave this area alone some patients bite and pull at the sutures and pull them out. While an elizabethan collar will provide a measure of protection this is not a guarantee that the pet will not remove the sutures. If this should happen the fees necessary to repair/re-suture the incision site will be your responsibility. To assist in preventing this from happening we offer elizabethan collars for purchase from \$5 to \$25 depending on size. If your pet was adopted from Oregon Dog Rescue and is here for spay or neuter, this cost is covered by them.

Yes, I would like to purchase an elizabethan collar **No**, I decline an elizabethan collar

SEDATIVE/ANTI-ANXIETY MEDICATION

It is important to limit your pet's activity for 10-14 days after their surgery to minimize risk of incisional complications post-operatively. This can be difficult for some dogs. We can provide a sedative/anti-anxiety medication to help keep your dog calmer during this 10-14 day period. To assist in preventing this from happening, we offer sedative/anti-anxiety medication for \$7-\$25 dependent on the size of the dog.

Yes, I would like my pet to be sent home with sedative/anti-anxiety medications **No**, I decline sedative/anti-anxiety medications

*** In the event my dog is in heat there is an additional fee of \$50-131, by initialing I would like the procedure to be done _____ Initial**

*** In the event my pet is pregnant there is an additional fee; CATS- \$30 - \$76 DOGS- \$65 - \$151, by initialing I would like the procedure to be done. _____ Initial**

**** If my pet's temperament proves to be hazardous, absorbable sutures will be used for an additional fee of \$16, by initialing I agree to pay the additional charge. _____ Initial**

If your pet has fleas we will need to treat him/her in order to avoid contamination to others, your pet will only be treated should your pet have fleas. Unless you prefer another product your pet will be treated with CAPSTAR (\$9.00) _____ **Initial**

All surgeries will be checked in between 8:00 and 9am so a proper surgery schedule can be established and patients can be given necessary pre-surgery treatments before their procedure. I understand that the pick up time for my pet depends on their recovery. The clinic will do their best to call with the earliest pick up time. Routine procedures are typically able to be discharged in the afternoon. However, I do understand if unforeseen circumstances (i.e. emergencies, or longer than anticipated procedures) arise, it may cause my pet to have a later pick up time. **I will be here to pick up my pet by 6pm Monday-Friday or a late fee of \$18.00 will be added to my bill.**

I authorize Willamette Valley Animal Hospitals to perform the above procedures on my pet today, and I understand that there may be risks, especially with anesthesia. I expect all procedures to be done to the best of the abilities of the professional staff. I realize that no guarantee or warranty can ethically or professionally be made regarding the results or care. I also authorize the hospital staff to provide veterinary services as requested or in emergency circumstances to follow through with such procedures as necessary for the well being of my pet. I understand that they will contact me as soon as possible with the number provided below in an emergency to discuss cost, but if I am unavailable or it is time critical to help your pet, emergency procedures or resuscitation procedures are authorized (additional costs apply). Upon picking up my pet(s), **I understand that payment is due in full. This facility accepts cash, debit, Visa, Mastercard, Discover, & Care Credit (the card holder must be present to sign), but DOES NOT ACCEPT CHECKS OR AMERICAN EXPRESS.**

Is your pet currently taking daily medication(s) or supplement(s)? **Yes** **No**

If you marked yes, what medication(s) or supplement(s) are they taking? When were they given? _____

I understand and accept that any surgical difficulties due to age or advanced reproductive status may incur additional fees.

Client Signature: _____

Emergency Contact Phone Number: _____