



Pet

MEDICAL CENTER
of San Antonio

7811 MAINLAND DRIVE
SAN ANTONIO, TX 78250
(210) 681-8333

Please read and sign below:

I do hereby certify that I am the owner or duly authorized agent for the owner of the pet described on this form.

I hereby authorize and direct the veterinarians of Pet Medical Center of San Antonio, and whomever s/he may designate as assistants, to perform the procedures described on this form.

If any unforeseen condition arises, I authorize the veterinarian to perform procedures in addition to or different from those now contemplated, as deemed advisable or necessary for my pet.

I consent to the administration of anesthesia to be applied by or under the direction of the veterinarians of Pet Medical Center of San Antonio, and to the use of such anesthetics deemed advisable.

The nature and purpose of the procedure(s) has been explained to me and no guarantee or assurance has been made as to the results or cure that may be obtained. I understand that there may be risk involved in these procedures.

I agree to indemnify and hold the veterinarians and staff harmless from and against any and all liability arising out of the performance of any of the procedures referred to above.

Owner/Agent:

Staff Member:

Date:

SEDATION / ANESTHESIA / SURGERY RELEASE FORM

In case of an emergency, please provide the best number where we can reach you directly today.

Client Name _____ Best number(s) to reach you today _____

Dog Cat Sex: M/n F/s M F Age: _____

Pet's Name _____

REQUESTED SERVICES

Anesthetic/Surgical Services

- Teeth Cleaning/Dentistry
- Surgery and other procedures

Other Services

- Nail Trim Express Anal Sacs
- Ear Cleaning

What time did your pet last eat? _____

DENTAL PROCEDURES

We recommend your pet receive proper dental care to preserve his/her health and extend the natural life span. If deemed necessary by the veterinarian, do you want to have your pet's teeth cleaned and polished? There is an additional fee for teeth cleaning; there may also be additional anesthetic fees.

APPROVE DISAPPROVE

ORAVET Dental Protectant

APPROVE DISAPPROVE

The condition of each tooth is evaluated and a decision is made as to the best course of treatment. If we determine that one or more teeth need to be extracted, please indicate as to how we should proceed: (initial your choice)

- _____ Please perform any extractions that are required.
- _____ Call me first. Do not perform any extractions without my authorization. (If and when we call, your pet will be under anesthesia. If you are unreachable, the infected or diseased teeth will be left in place. This will necessitate scheduling a second anesthetic procedure to extract the diseased teeth.)
- _____ Do not call and do not perform any extractions.

RESQ MICROCHIP

ResQ Microchip Identification Can Save Your Pet's Life

Microchip implantation is easily done while your pet is awake at anytime with minimal discomfort. If done while your pet is sedated, it is completely pain free. The fee for the ResQ microchip is \$45.50. Unlike other microchips, lifetime registration with a national registry is free and does not have any recurring annual fees! It is accepted worldwide when traveling overseas with your pet. Please give your approval or disapproval by initialing the appropriate box. If you have any questions about this procedure or how the ResQ system works, please do not hesitate to ask one of us.

APPROVE DISAPPROVE

PREANESTHETIC BLOOD SCREEN

For the protection of all our anesthetic patients, we will perform a preanesthetic blood screen to objectively evaluate kidney and liver function, and other body systems. Our anesthetic procedures will be based upon these test results. If the results indicate a problem that precludes the use of anesthesia, we will call you and explain in detail our findings and our recommendations.

PAIN MANAGEMENT

With some procedures we anticipate your pet may suffer mild to severe pain. For example, teeth cleanings will result in a mild level of pain; the repair of a broken bone may result in severe pain. Pain is not just uncomfortable for your pet, it also causes recovery from anesthesia to be delayed and sometimes traumatic.

In all cases, we insist upon using pain relievers for humane reasons. There is an additional fee if the Doctor feels that pain medications will benefit your pet.



LASER SURGERY CONSENT FORM

*We are proud to be in the top 8%
of veterinary hospitals offering
laser surgery nationwide.*



As part of our commitment to quality care, we are pleased to offer laser surgery as an option for safe, comfortable treatment for your pet. We feel that laser surgery provides the best possible care for your pet.

The benefits and advantages of laser surgery are:

Less Pain – the laser seals nerve endings as it “cuts”, so your pet may require fewer anesthetics during the operation, also reducing pain after the surgery.

Less Bleeding – the laser seals small blood vessels during the surgery, greatly reducing blood loss.

Less Swelling – the laser energy does not crush, tear, or bruise the tissue because there is no physical contact with the tissue.

Your pet will be treated with the utmost care using the latest state of the art CO₂ Surgical Laser available in Veterinary Medicine.

I understand that laser surgery is an option and I have been advised of the advantages the procedure will offer.

Yes, I want my pet to have laser surgery and understand the costs listed below are in addition to normal surgery costs.

- Level I: \$60.00 (spays, neuters, minor skin lesions such as warts, etc.)
- Level II: \$85.00 (oral surgery, eyelid repair, etc.)
- Level III: \$110.00 (declaws, tumor removals, etc.)
- Level IV: \$170.00 (mammary tumors, cosmetic procedures, soft palate, etc.)
- Level IV: \$210.00 (large tumor removals and surgeries requiring extended use of the laser)

No, I decline laser surgery for my pet.

Client Signature: _____

Date: _____