

PROSSER ANIMAL HOSPITAL
AUTHORIZATION FORM
ANESTHETIC OR TRANQUILIZATION

Lbs

Technician

NAME _____

PET'S NAME _____ DATE _____

Your dog has been admitted for an anesthetic or tranquilization procedure today. Please be assured that the staff at PROSSER ANIMAL HOSPITAL will use some of the safest anesthetics available and that your pet is constantly monitored throughout the procedure. But regardless of an animal's age or apparent health status, **all anesthetic and surgical procedures have an element of risk, including death and results cannot be guaranteed.**

A simple blood test can be performed on the day of the anesthetic. The test allows us to check the function of internal organs, such as liver and kidneys, and can alert us to some of the more common problems, allowing for extra precautions to be taken. While pets do not always show it, surgery is painful. Studies show that animals recover better & heal more quickly if pain relief is provided after a surgical procedure. We strongly recommend pain management to help manage pain during recovery. If your female pet is here to be spayed, she will have an Ovariectomy or an Ovariohysterectomy depending on which procedure is best for your pet.

Please sign below to indicate that you have read this form, authorized performance of the procedure, and accept the risks associated with your pet's anesthesia and surgery.

- ❖ YES ___ NO ___ I want to have my **dog spayed/neutered** (includes nail clip).
- ❖ YES ___ NO ___ I wish to have the **mini profile** (\$75) or **full profile** (\$100) blood test performed.
- ❖ YES ___ NO ___ I authorize a **post-surgical pain injection & laser therapy for my pet** (\$30.00).
- ❖ YES ___ NO ___ I authorize **pain medications** to be sent home (for spay/neuter \$ 15.00).
- ❖ YES ___ NO ___ I want a **micro chip** placed (\$35.00).
- ❖ YES ___ NO ___ I would like an **E-COLLAR** to take home (\$10-13).
- ❖ YES ___ NO ___ I want my dog to have a **combo (includes ear exam \$45.00) or Rabies vacc.** (\$20.00).
- ❖ YES ___ NO ___ I would like to have my pet's **ears checked** for mites and foreign bodies during this procedure. **I will be charged for the exam (\$20.00) and treatment (\$15.00 to \$40.00) if a problem is found.**
- ❖ YES ___ NO ___ I want my dog to have **de-worming medication.**
- ❖

Contact me by:	
Call	
Text	
Email	

Signature _____

A PHONE NUMBER WHERE I CAN BE REACHED TODAY _____
(PLEASE BE AWARE THAT IF WE CANNOT REACH YOU TO GET YOUR AUTHORIZATION THE PROCEDURE WILL NOT BE DONE AND YOU MIGHT NEED TO BRING THE ANIMAL BACK ANOTHER TIME.)