

Pre-Surgical/Anesthesia Admission Form

Owner: _____ **Pet:** _____

Procedures Scheduled: _____

1) Does your pet have a chronic illness? (i.e.: diabetic, heart murmur, etc.)

Yes____ No____ Please list if **yes**: _____

2) Please list any prescriptions your pet is currently taking:

3) Did your pet receive ANY oral medications this morning?

Yes____ No____ Please list if **yes**: _____

4) Was your pet's food taken away at 10 p.m. or earlier last night?

Yes____ No____

5) If your pet is receiving a dental procedure today, do you give SCAH permission to extract teeth as per instructed by the doctor? *A simple extraction is \$9-\$18.90. A complex extraction is \$59.*

Yes____ No____

6) If your pet has retained baby teeth, do you give us permission to remove them?

Yes____ No____ ***The cost of the extractions could be \$9 or \$18.90 per tooth.***

7) If deemed necessary, do you give SCAH permission to send home medications (i.e.: pain medicine, antibiotics) with your pet?

Yes____ No____

8) Do you give SCAH permission to update your pet's vaccinations if they are due/overdue?

Yes____ No____ **Vaccines Due:** _____

9) Do you give SCAH permission to update your pet's heartworm test or fecal test if they are due/overdue?

Yes____ No____ ***The cost of a heartworm test is \$41. The cost of fecal testing is approx. \$39.***

10) Would you like for your dog's nails to be trimmed with a dremel while under anesthesia? The charge is \$20. (Canine patients only)

Yes____ No____

11) In an effort to identify stray cats, we will put a green ink line in the spay incision unless you specify no.

No____ **(Feline spay patients only)**

12) If there are any particular problems you would like the doctor to examine while your pet is here, please list below:

YOUR PET WILL BE TREATED FOR ANY EXTERNAL PARASITES NOTICED BY THE DOCTORS OR STAFF OF SUGAR CREEK. ANY EXPENSE INCURRED WILL BE THE RESPONSIBILITY OF THE OWNER.

I have read the above and agree. Please sign below:

_____ **Date:** _____