

Veterinary Center of Buckhead

DENTAL/ANESTHESIA RELEASE FORM

All animals at the Veterinary Center of Buckhead who are scheduled for surgery undergo a routine **pre-anesthesia blood test** to check the health of the **kidneys and liver as well as to check for anemia and dehydration**. This test insures that your pet has the greatest chance of having a problem free surgery and quick recovery. The testing is done in-house the day of the surgery at a cost of **\$38.00**.

If your pet is **greater than eight years of age** it will be necessary to **evaluate a complete blood count and a chemistry profile**. This sample will determine the status of the major organ systems, as well as indicate the possibility of an underlying infection. This test is done in-house the day of the surgery at a cost of **\$78.00**.

Additional blood work may be done at the Doctor's discretion at extra cost. Pain medication may also be given at the Doctor's discretion at extra cost. If during the procedure the Doctor discovers diseased teeth or gums, extractions or medications may be necessary. These procedures will result in extra costs.

Please understand that there is no such thing as "routine surgery". All surgery involves some risk. Anesthesia alone affects the animal's entire metabolic state. It is thus our goal to minimize that risk and provide your pet the best chance to recover completely from surgery. Our surgery suite is equipped with modern anesthesia and cardiac monitoring equipment. We use the safest anesthetic drugs available. Most animals receive intravenous fluids during anesthesia to provide cardiovascular support. Even with all of these precautions, there is still some risk to any surgical procedure.

Please sign below stating that you have read the above and understand the risks involved with anesthesia and surgery, and that you give us permission to perform surgery on your pet.

****BALANCE MUST BE PAID IN FULL AT TIME OF PICKUP!!!!**

****WE DO NOT BILL!!!!!!**

ESTIMATED COST: \$_____

DO YOU WANT A MICROCHIP: (\$63.00) YES / NO

Client _____ Name

(please print)

Signature _____

Phone number today _____ Date
