

# PetWell Veterinary Healthcare

## SURGERY RELEASE

PetWell Veterinary Healthcare

1456 Northside Drive  
Suite B

Atlanta, GA 30318  
404-856-7500

Hospital Use  
Only

Patient  
Number: \_\_\_\_\_

Attach: \_\_\_\_\_

Owner: \_\_\_\_\_

Patient: \_\_\_\_\_ Age: \_\_\_\_\_ Species: Canine / Feline

Breed: \_\_\_\_\_ Sex: Male / Female Color: \_\_\_\_\_

I, the undersigned, do hereby certify that I am the owner (duly authorized agent for the owner) of the animal described above, and that I do hereby give Dr. Berger, his agents, servants, and/or representatives full and complete authority to perform the surgical procedure described as:

My pet has been fasted for at least 12 hours as recommended by PetWell: YES NO

Please list all medications that the above listed pet is currently taking. Please include heartworm prevention, flea prevention and tick prevention along with all supplements.

And to perform any other procedure that, at his discretion, may be useful to promote the health of the above described pet, and I do hereby and by present forever release the said doctor, his agents, servants, and/or representatives from any and all liability arising from said surgery on said animal. I acknowledge that complications can occur with any procedure related to anesthesia and/or surgery such as hypotension, hypothermia, hemorrhage, etc.

Signed: \_\_\_\_\_ Owner/Agent

Date: \_\_\_\_\_ Phone number to reach you today: \_\_\_\_\_

## ADDITIONAL SERVICES/MICROCHIP

While your pet is under anesthesia, we will also clean ears, trim nails, and express anal sacs if needed. In addition, we can microchip your pet for a fee of \$72.50. This is an ideal time to perform this procedure as the pet is under anesthesia and will feel no discomfort. If you would like to have your pet microchipped, please initial here: \_\_\_\_\_