

Pre-Surgical Check-In

General Information

Client Name: _____

Client Date of Birth: _____

(Required by law for our controlled-substance drug log)

Pet's Name: _____

Phone Number where you can be reached TODAY: _____

It is very important we have a phone number with which you can be reached all day while your pet is under our care. If this is impossible, please consider rescheduling your appointment to a time you can be reached.

Pre- and Post-Surgical Information

Pre-Surgical Bloodwork: Best practices recommend pre-surgical blood work, done in-house on the day of surgery, to identify any medical conditions that may complicate anesthesia that are not otherwise identified on a physical exam. The pre-anesthetic profile does not guarantee the absence of anesthetic complications. This blood test includes: BUN and Creatinine (kidney function), ALT and ALKP (liver function), Blood Glucose, Total Protein (hydration).

Growth Removal: If a growth(s) is being removed, would you like the growth(s) biopsied?

_____ YES

_____ NO

_____ AT THE DOCTOR'S DISCRETION

E-Collar: In most cases, we recommend an e-collar for aftercare. You may purchase one or provide your own (they are \$5 to \$18, depending on size).

_____ PURCHASE

_____ PROVIDE MY OWN

Consent for Surgery: *I understand and give my consent to the Doctors to prescribe, treat and operate on my pet.*

Client Signature: _____