

Date: \_\_\_\_\_

ID No: \_\_\_\_\_



# PURPLE CAT

## Mobile Veterinary Clinic

Name: \_\_\_\_\_ Phone # (today): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cat Name: \_\_\_\_\_ Circle:  MALE  FEMALE

Color: \_\_\_\_\_ Hair length (circle one): Short Medium Long Age: \_\_\_\_\_

Has your cat shown any signs of illness? COUGHING  SNEEZING  VOMITING  DIARRHEA  CHANGE IN APPETITE

If yes, please explain: \_\_\_\_\_

Has your cat ever had a seizure? YES  NO  If yes, please explain: \_\_\_\_\_

Is your pet on any medications or supplements: YES  NO  If yes, please list \_\_\_\_\_

Has your pet had any previous reactions to vaccines, medications, or anesthesia? YES  NO  If yes, please explain: \_\_\_\_\_

Has your pet had any litters? YES  NO  If yes, how many? \_\_\_\_\_ When was the last litter? \_\_\_\_\_

When was the last time your pet ate? \_\_\_\_\_

My cat's lifestyle is (circle one): Inside only Outdoor Only Inside/Outside Feral Barn cat

My cat's personality is (circle any that apply): Friendly Shy Wild Might bite

Surgery fees, please circle: \$55 Feral/farm/colony cat; includes mandatory ear tip, rabies and 3-way vaccine

(Cash or \$65 Pet female cat, vaccines additional: \$10 rabies, \$10 3-way

Certified Check \$45 Pet male cat, vaccines additional: \$10 rabies, \$10 3-way

Only) \$35/\$55 Humane Society or Rescue, vaccines additional: \$10 rabies, \$10 3-way

How did you hear about our clinic? \_\_\_\_\_

Weight: \_\_\_\_\_

### ANESTHESIA/SURGICAL RELEASE FORM

Purple Cat Mobile Veterinary Clinic uses qualified staff and approved materials for all procedures performed. It is important for you to understand that the risk of injury or death, although low, is always present, just as it is for humans undergoing surgery. Please read the following and ensure you understand before signing your name:

- I, acting as owner or agent of the pet named above, hereby request and authorize Purple Cat Mobile Veterinary Clinic to surgically sterilize the animal named on the above portion of this form.
- I understand that the surgery I have elected presents some hazards, and that injury to, or death of, my animal may conceivably result, due to inherent surgical risks and the use of anesthetic drugs as required for this procedure.
- I certify that my animal has either been vaccinated within 3 years prior to this date or waive my right to protect my animal by having it vaccinated or request recommended vaccines at the time of surgery. I understand that it takes up to two weeks for vaccinations to protect my animal.
- I understand the inherent risks of failing to maintain current vaccinations and waive all claims arising out of, or connected with, the performance of this operation due to such failure. I understand that if my pet develops respiratory infection or another infectious disease after surgery, I am responsible for treatment at my own cost.
- I certify that my animal is in good health and has had no food since midnight the evening prior to surgery (except live-trapped cats).
- I understand that Purple Cat Mobile Vet may not perform a complete physical exam prior to surgery and that my animal will not receive pre-anesthetic bloodwork and waive my right to have these services performed prior to surgery at a full-service veterinarian.
- I understand that some factors significantly increase surgical risk, including, but not limited to, pregnancy, heat, and diseases such as FIV, FeLV, heartworm, and tick-borne diseases.
- I understand that my animal may be exposed to fleas and other contagious diseases. I understand that it is recommended that my cat receive a flea preventative within 3 weeks prior to surgery or 24 hours after surgery.
- I understand that if my animal is pregnant, the pregnancy will be terminated at the time of surgery.
- I understand that if my animal has an open umbilical hernia, it will be repaired at the time of surgery, if deemed necessary, by the veterinarian.
- I hereby release Purple Cat Mobile Veterinary Clinic, all veterinarians, assistants, volunteers & employees from any and all claims arising out of, or connected with, the performance of this procedure or any adverse reactions from vaccinations. I agree that I have not and will not claim any right of compensation from them, or any of them, or file action by reason of such sterilization or attempted sterilization of such animal or any consequences related thereto. Owner/agent hereby agrees to indemnify and hold Purple Cat Mobile Veterinary Clinic harmless for any damages caused during the transportation of the animal, or for any damages caused by any unforeseen events including fire, vandalism, burglary, extreme weather, natural disasters, and acts of God.
- Your animal will receive a small green tattoo on his/her underside to show that he/she has been sterilized.

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_