



Spaying or neutering your pet is a safe, responsible, and relatively inexpensive procedure. Benefits of this surgery include preventing pregnancy, reducing or eliminating the risk of many types of cancer, reducing roaming and fighting, reduced marking behavior, and others. To encourage spaying/neutering of pets, we keep the cost of our basic surgery low. Please help us and your pet by filling out the following form concerning surgery and options for additional services beyond the basic spay/neuter. A staff member will be made available if you have any questions or require help.

PATIENT QUESTIONS

_____ My name

_____ My pet's name

YES NO

My pet has a known medical condition.

(If yes) Please explain:

YES NO

My pet has seemed healthy lately.

(If no) please explain:

NOTE: If your pet is not considered a routine spay/neuter due to age, obesity, pre-surgical exam findings, etc., some tests or procedures may be required at the doctor's discretion to ensure your pet's safety. If needed, the cost is typically below \$75.

Perform tests or procedures as necessary. YES NO

Please contact me before proceeding if additional testing is deemed necessary. YES NO

OPTIONAL SERVICES/PROCEDURES

Microchipping (AKC) — This procedure is safe, easy, and provides permanent identification for your pet for a one-time fee. Recommended for any pet that could escape, become lost, or travels frequently.

Please microchip my pet. (\$55) YES NO

Pre-anesthetic blood work — Spay/Neuter is a routine and safe procedure. Blood testing is not required for healthy animals of appropriate age. In rare instances, however, blood work can reveal hidden health issues and prevent surprise and/or life threatening complications during surgery.

I want to be as safe as possible.

Please run a pre-anesthetic blood panel on my pet. (\$30) YES NO

PREVENTATIVE CARE

Please test my dog for heartworms. (\$29) YES NO

Please test my cat for feline leukemia (FeLV)/Immunodeficiency virus/heartworms. (\$40) YES NO

Please update my pet's vaccinations. YES NO

Please perform a fecal examination to test for intestinal parasites. (\$13) YES NO

Toenail trim with filing. (\$5)* YES NO
*(Price is for "during the surgical session" only)