

West Tyler Veterinary Clinic

13910 Hwy 64 W Tyler, TX 75704 (903) 533-0031 Fax (903)533-1410

Consent to perform feline surgery

Date ____/____/____

Owner's name: _____	Pet's name: _____
Mailing Address: _____	City: _____ State: _____ Zip: _____
Home phone: _____	Cell/Alt phone: _____
Pet's age/DOB: _____	Breed: _____ Sex: _____ Color: _____

PLEASE **INITIAL** FOR PROCEDURES TO BE PERFORMED TODAY

- ____ 1) **Feline rhino/calici/panleuk/chlamydia & leukemia vaccination**
- ____ 2) **Rabies vaccination**
- ____ 3) **Feline leukemia & feline immunodeficiency virus test**
- ____ 4) **Fecal examination**
- ____ 5) **Gas anesthesia** (Safer than injectable, also required for some breeds)
- ____ 6) **Post-op analgesia prescription to reduce pain** (Recommended for 5-7 days)
- ____ 7) **Male feline castration** (neuter)
- ____ 8) **Female feline spay** (E-collar included) Additional charges will apply for estrus (heat) or pregnancy
- ____ 9) **Dental cleaning** (Additional cost for tooth extractions, if needed, and antibiotics)
- ____ 10) **Sedation**
- ____ 11) **Declaw front paws only**
- ____ 12) **Declaw all four paws**
- ____ 13) **Radiographs** (More than one view may be required at an additional cost)
- ____ 14) **Other procedures** _____

FOR SURGERY PATIENTS ONLY

If your pet is to be anesthetized, rest assured that the advances in anesthesia and surgery have made routine procedures relatively safe, with the low rate of complications. However, occasional problems can arise, due to pre-existing conditions not evident during routine pre-anesthetic examinations. To avoid these problems, we recommend: **PRE-ANESTHETIC COMPLETE BLOOD CELL COUNT & 6 CHEMISTRY PROFILE TEST AT AN ADDITIONAL COST OF \$60.75** Pre-anesthetic bloodwork is required on felines 7 years of age and older.

- ____ **YES** I DO WANT MY PET TO HAVE A PRE- ANESTHESIA BLOOD TESTING.
- ____ **NO** I DO NOT WANT MY PET TO HAVE PRE-ANESTHESIA BLOOD TESTING

*All animals admitted must be **current on their vaccinations** and free of external parasites. West Tyler Veterinary Clinic is a **flea-free environment**. A Capstar flea pill will be administered to every animal. If ticks are found, the pet(s) will be treated with Frontline at an **additional cost**.*

I understand that during the performance of this procedure, unforeseen conditions may be revealed that necessitate an extension or variance in the procedure(s) set forth above. I expect West Tyler Veterinary Clinic to use reasonable care and judgement in performing the procedure(s). The nature of the procedure and the risk involved has been explained to me and I realize results cannot be guaranteed. I am also aware the unforeseen events resulting from the procedure(s) will not relieve me from my obligation to all reasonable cost incurred regarding this animal.

SIGNATURE OF OWNER/AGENT: _____