



Dental Surgery

Your pet is here for a comprehensive dental cleaning. This includes a complete oral examination, general anesthesia, and ultrasonic cleaning and polishing of the teeth. Please complete all questions on this form.

Place Label Here	<p>What procedure is your pet here for today?</p> <p style="text-align: center;"> <input type="checkbox"/> Dental Cleaning <input type="checkbox"/> Extractions Only </p> <p>Has your pet eaten any food or treats today?</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what time: ____ AM PM </p> <p>Would you like a complimentary nail trim during the procedure? (FREE)</p> <p style="text-align: center;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p> <p>Is your pet on any medications and when did you last administer meds?</p>
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Pre-Anesthetic Blood Panel: We highly recommend having blood work performed prior to anesthesia. This gives us information regarding your pet's overall health, gives us a baseline of normal values to compare to in the future, and helps detect early signs of disease such as diabetes or kidney issues. If there is a concern moving forward with surgery, we will contact you with results first.

Would you like a pre-anesthetic blood panel? Yes No

Dental X-Ray: Radiographs (X-Ray) are an important tool in early detection and prevention of tooth related disease such as tooth root abscesses or resorptive tooth roots. We recommend every dental be accompanied with films in order to have a complete picture of your pet's overall dental health.

Would you like Xrays performed today? Yes No

Dental Extractions: During your pet's oral exam, we may discover teeth fractured, loose, have exposed roots, or are otherwise nonviable. If the veterinarian decides these teeth are affecting the health and quality of life of the your pet, they will be extracted at an additional cost.

The final price may reflect extraction costs.

Vaccinations: If your pet is due for vaccinations, we can administer while in the clinic. If records are not provided prior to drop off or you select yes, these vaccinations are administered. Dogs: Dapp, Rabies, LEPTO // Cats: FVRCP-Leuk, Rabies

Would you like any due vaccinations updated? Yes No

Personal Wishes: It's very important for our staff to know how to immediately respond to an unexpected and potentially life-threatening situation. In the event of cardiac or

	No , I do NOT wish for resuscitation efforts to be performed on my pet. (DNR)
	Yes , I wish to have any/all efforts at resuscitation performed. Techniques may include (but are not limited to) basic CPR, IV medications, ventilations, and/or surgical techniques. I realize that additional costs may be incurred and I agree to pay these costs in full during time of treatment.
Please Initial	Sedation or general anesthesia will be required. I understand that my pet's procedure may require general anesthesia and /or sedation. All precautions will be taken to ensure the safety of my pet. However, I have been informed of the possible risks associated with anesthesia / sedation, and that I am responsible for associated charges. I officially release Valley Veterinary Clinic of any liability pertaining to this procedure (before, during, or after surgery).

Client Signature: _____ Date: _____

Printed Name: _____ Phone: _____