



110 Morgan Lane ✂ York, PA ☒ 17406
717-767-0180

Procedure Date: _____

Last name: _____, First name: _____

Pet Name: _____ Breed: _____

Color: _____ Age: _____ Sex: _____

I, the undersigned owner or designated agent, hereby authorize the staff of Shiloh Veterinary Hospital to perform the following procedure: _____

I authorize anesthesia and understand that although anesthetic complications are rare, there is always the potential for complications, including death. I also understand that, while the veterinarian will make every effort to contact me in the case unforeseen emergencies, if unable to reach me, the veterinarian will proceed with any necessary life-sustaining procedures.

Pain management: Our clinic strongly believes in compassionate, quality medical care for our patients. As a result, all surgical patients will receive pain management during surgery and recovery. Additional pain medication may be prescribed for use at home.

Preanesthetic bloodwork: Profile 1 (fee: \$66.50) selected _____ Already performed (date) _____
Profile 2 (fee: \$119.50) selected _____ Already performed (date) _____

Additional procedures: By signing this form, I agree to have the following procedures performed ONLY if they are necessary. I realize that there is an additional fee for each of these procedures. Fees may vary.

***Vaccines** may be given if your pet is not up to date.

***Ear Flushes** may be performed if we see evidence of ear infections and/or mites.

***Flea treatments** may be applied if fleas are noted to prevent an infestation of our hospital.

***Temporary (baby) teeth** will be extracted if they are present in pets greater than 5-6 months of age.

Microchipping: A microchip the size of a grain of rice can be injected under the skin to provide permanent identification for your pet if they ever become lost. This technology allows shelters and veterinarians to immediately contact the owner of a lost dog, even if they have lost their collar and ID tags. (fee: \$65.75)

I would like my pet microchipped today yes _____ no _____

Owner/Agent's Signature: _____ Date _____

You may contact me at the following numbers:

Order of call preference	Number	Home	Work	Cell	Between hrs. of...
Call FIRST:					
Call 2 nd :					
Call 3 rd :					

If a cell phone # is used, please indicate if we need to dial an area code, etc.

If you cannot be reached by phone, it may be necessary for you to call us every _____ throughout the day.



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Dear <first-name>:

This letter is to inform you that <animal> is scheduled for surgery or dental cleaning soon. Your pet is scheduled to be admitted to the hospital at: _____. If you have a pre-surgical appointment scheduled with a veterinarian, please refer to your scheduled appointment time. You also have the option of admitting your pet the evening before, if arrangements have been made beforehand.

Enclosed you will find a surgery release/anesthesia form. ***Please read and complete this form and bring it with you when you drop your pet off for surgery.*** Pre-anesthetic bloodwork gives the doctor an inside look at your pet's vital internal organs. We are especially concerned with the health of the liver and kidneys, as these organs help the body get rid of the medications used during anesthesia.

Pre Surgery Checklist

- ✓ Remove all food after 8:00 P.M. the night before your pet's procedure. (Your pet may have water available at all times.)
- ✓ Complete and sign the surgery release form.
- ✓ Give lots of extra pats and kisses!

All anesthetized patients at Shiloh Veterinary Hospital are closely monitored with state-of-the-art instrumentation, such as a pulse oximeter (measures oxygen carried in the blood), an apnea/tidal volume monitor (monitors the breathing rate), and an audio patient monitor (monitors the heart rate). These technologies, along with pre-anesthetic screening and intravenous fluids, reduce the risk of anesthesia to its lowest level. In addition, your pet may receive a pain relief injection (as deemed necessary by the doctor) to minimize any pain that may be experienced post surgery.

If you have any questions regarding pre-anesthetic blood testing or your pet's procedure, please don't hesitate to call.

We look forward to seeing you!

Sincerely,

The Staff at Shiloh Veterinary Hospital