



Dental Consent Form

Animal Name: _____ Owner: _____

Phone number at which you can be reached today: _____

- I, _____, am the owner of the aforementioned animal, and hereby consent to the procedure indicated above. The risks, benefits and costs of said procedure have been described to me to my satisfaction. Potential complications, while rare, include swelling, pain, infection, hemorrhage, temporary or permanent organ dysfunction, and death. Extensive efforts, including individualized anesthesia protocols and diligent surgical technique, while utilizing advanced patient monitoring technology, are made to dramatically minimize these risks.
- An intravenous catheter will be placed to allow for administration of appropriate anesthesia, rapid delivery of medications and/or fluids if needed during anesthesia.
- Relevant bloodwork will be analyzed before anesthesia to assess the body's overall health and ability to metabolize anesthetic agents.
- Additional charges may accrue for such necessary medications as antibiotics and pain medications given to ensure the patient's health and comfort.
- The placement of a microchip in your pet allows your pet to be identified and safely returned to you in the event he or she ever becomes lost or otherwise separated from you. The procedure is quick and painless and can be done while under anesthesia.

I request the placement of a microchip _____

Payment is required at the time services are rendered.

signature

date