



# CANINE SURGICAL RELEASE

Client's Name: \_\_\_\_\_ Patient's Name: \_\_\_\_\_

Surgical Procedure: \_\_\_\_\_ Fasted for 8 hours? **YES/NO**

Please list all medications that your dog is currently taking (including heartworm and flea/tick prevention):  
\_\_\_\_\_

Please list all medications that your dog received this morning: \_\_\_\_\_

Microchip Implantation & Registration (+\$41): \_\_\_\_\_ Rabies vaccine (+\$18): \_\_\_\_\_ Dremel Nails (+\$12): \_\_\_\_\_

Other treatments/vaccines/tests: \_\_\_\_\_

### Surgical Packages (please initial next to the package you would like):

**1. Gold/Comprehensive** \_\_\_\_\_

This package includes a comprehensive physical examination, the surgical procedure, extensive pre-operative blood work (CBC and Chemistry panel), intravenous catheter, intra-operative IV fluid therapy, dedicated anesthesia assistant and intensive anesthesia monitoring, complimentary nail trim, post-operative pain injection, and seven days of post-operative pain medication.

**2. Silver/Standard** \_\_\_\_\_

This package includes a limited physical exam, mini pre-operative blood work (includes 4 values), intravenous catheter, intra-operative IV fluid therapy if needed, the surgical procedure, dedicated anesthesia assistant and intensive anesthesia monitoring, complimentary nail trim, post-operative pain injection.

**Add:**

\_\_\_\_\_ **7 days of oral pain medication (+\$30-50)**

**3. Bronze/Clinic** \_\_\_\_\_

This package includes a limited physical exam, the surgical procedure and a post-operative pain injection that lasts for up to 24 hours. **\*\*By signing here, I decline the recommended pre-operative blood work and IV catheter.** \_\_\_\_\_

**Add:**

\_\_\_\_\_ **7 days of oral pain medication (+\$30-50)**

\*\*For dogs that are pregnant or in heat there will be an additional charge due to extra surgery time, anesthesia, and extra suture material. Additional charges will be as follows: Please initial each line.

\_\_\_\_\_ **In heat (+\$50)**

\_\_\_\_\_ **Pregnant (+ \$125)**

By signing below, I understand that all surgical and anesthetic procedures have inherent risks and that Coats Veterinary Hospital will use all reasonable precautions against injury, escape, and death of my pet. Furthermore, I accept these risks and will not hold Coats Veterinary Hospital or its doctors liable or responsible in any manner should an adverse event occur. **By signing below I will pay all charges upon my dog's release from the hospital. After carefully reading the above, I have signed in agreement.**

\_\_\_\_\_  
Owner or responsible party

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone number where we can reach you today

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\_\_\_\_\_  
Owner or responsible party