

Anesthesia Free - Preventive Care Dental Cleaning Form

Client Information

Owner Name : Pet Name :
 Drop off Time: : Pet Age :
 Surgical Procedure :

I, the undersigned owner or agent of the owner of the pet identified above, certify that I am eighteen years of age or over and authorize the veterinarian(s) at this practice to perform the above procedures. I understand that some risks always exist with anesthesia free dental cleaning and that I am encouraged to discuss any concerns I have about those risks with the attending veterinarian before the procedure is initiated.

Is your pet on any supplements or medications? Please list all below:

Pre-Anesthetic Blood Testing: Our greatest concern is the well being of your pet. We will be using pulse Oximetry/ECG/BP/temperature to monitor your pet during surgery. This technology along with pre-anesthetic blood screening reduces many of the risks of surgery. Before putting your pet under anesthesia, we will perform pre-anesthetic blood work. Many conditions including disorders of the liver, kidneys and blood may not be detected unless blood testing is performed. For these reasons, the complete blood work is part of your dental/anesthesia package. If any abnormalities are detected in the blood work the procedure will be postponed and you will only be charged for the blood work. The total costs of these tests are: \$ 125.00

I agree to perform blood test Initial

Procedure: Highly trained, dental technicians, under the supervision of a veterinarian, perform this unique and cost effective service. The technician holds your dog or cat in her lap, while compassionately taking steps to reassure and soothe your pet. Then all surfaces of your pet's teeth are scaled to remove plaque and tartar and polished to a shine. This specialized technique is gentle, meticulous, and drug-free. The cleaning itself takes approximately 30-45 minutes. Non-anesthetic dental cleanings are a great tool to help manage bad breath and plaque accumulation, and spot the early signs of progressive periodontal disease.

Note: If the technician discovers oral problems that require further attention such as fractures, lesions, or loose teeth, our veterinary team will examine your pet and discuss with you recommendations for pursuing further dental care to treat more serious issues.

I, being responsible for the above animal, have the authority to grant you my consent to receive treatment, prescribe for and/or operate upon my pet as noted above. You are to use all responsible precautions against injury, escape or death of my pet, but you will not be held liable or responsible in any matter, as I thoroughly understand and I assume all risks. I agree to pay for in full for the services rendered.

Signature : Date :
 In Case of an emergency where can we reach you?
 Phone : Cell :