

Southway Animal Clinic
705 16th Ave. Lewiston, ID 83501
743-0280

Spay/Neuter Form

Owner's name _____ Date _____

Pet's name _____ Phone # _____

(Where we can reach you today)

Your pet is being admitted for a procedure requiring anesthesia today. Be assured that the Veterinary staff at *Southway Animal Clinic* will use proven safe anesthetic agents for your pet's procedure and he/she will be monitored throughout the procedure. Regardless of your pet's age and apparent health status, all anesthetic procedures have an element of risk.

Preanesthetic Bloodwork:

This simple blood test evaluates *kidney function and liver function as well as check for diabetes, anemia and dehydration*. These are common problems which can greatly affect the outcome of the anesthesia. If any of these tests suggest a problem, we can adjust the anesthetic protocol or may elect to cancel the procedure.

The Charge for preanesthetic bloodwork is \$74.

_____ I authorize and understand the above-mentioned test.

_____ I decline the preanesthetic blood test on my pet.

Intravenous (IV) Catheterization/Fluids:

In case of an emergency while your pet is under anesthesia, an IV catheter will allow us to administer life-saving drugs immediately. Fluids allow your pet's blood pressure to remain stable during surgery, which could ultimately help them recover from anesthesia faster.

_____ I authorize IV catheter placement and fluids. (\$74)

_____ I authorize IV catheter placement **ONLY**. (\$42)

_____ I decline IV catheter placement and fluids.

Microchip:

A microchip is a safe way to permanently identify your pet. Smaller than a grain of rice, it is inserted under the skin between the shoulder blades of your pet. We will register your pet locally with the animal shelter, and give you information to conveniently register your pet nationally free of charge. **The charge for a microchip is \$53.**

_____ I authorize microchip placement.

_____ I decline microchip placement.

By signing below, I understand the risks and costs associated with my pet's anesthesia and authorize my pet to have surgery today.

Signature _____ Date _____