

Owner or Owner's Representative Details:

Full Name _____ Address _____

Contact Number Today _____ Alternate Contact Number _____

Pet's Name: _____ **Dog/Cat/Other**

Age _____ Sex _____ Weight _____ Reason for Admission _____

Your pet is scheduled for a procedure that requires anaesthesia. No anaesthetic or surgical procedure is without risks. Our focus is on providing the very best care and safety for your pet while they are in our care. To achieve this, a Vet will perform a physical exam prior to the procedure and our Vets and highly trained Vet Nurses will be monitoring your pet.

Request for package option today: Please TICK

Standard

- ✓ Intravenous Fluids
- ✓ Pain Relief under G/A
- ✓ Pain Relief to Go Home With

INCLUDED IN COST

Gold

- ✓ Pre-G/A Blood Test
- ✓ Intravenous Fluids
- ✓ Pain Relief under G/A
- ✓ Pain Relief to Go Home With
- ✓ Elizabethan Collar

ADDITIONAL COST: \$120

Also Requested:

Vaccination

Microchip

Worming

Other _____

Elizabethan Collar ADDITIONAL COST

NOTE: Intravenous Fluids not placed for Cat Castrations due to very short Anaesthetic

I, the undersigned, hereby authorise Forrestfield/High Wycombe Vet Hospital to provide treatment, including suitable anaesthetic and surgery to the animal described above. I am aware that no anaesthetic or surgical procedure is without risks, even in apparently healthy animals. I accept that unforeseen conditions may arise during the procedure & I authorise the Vet on duty to provide necessary treatment in such an event.

Signature of Owner or Owner's Representative

Date