

## Feline Surgery Form

**Patient** \_\_\_\_\_ **Procedure** \_\_\_\_\_

All Cats 4 months of age and older are required to have a Rabies vaccination. Cost is \$10.00 Accept \_\_\_\_\_ (Initial)

If live fleas are found a Capstar tablet will be administered for an additional \$6.25 \_\_\_\_\_ (Initial) We can also apply a dose of month long flea control for an additional fee if you would like Accept \_\_\_\_\_ Decline \_\_\_\_\_

All pets receive a physical examination prior to surgery at no additional cost to you however, all pets 7 years of age or greater are required to have pre-anesthetic labwork at an additional cost of \$46.00, this labwork may also be done on younger patients if requested. Accept \_\_\_\_\_ Decline \_\_\_\_\_

If ear mites are found on your cat, treatment can be administered. One time treatment performed in office is \$22.00 Accept \_\_\_\_\_ Decline \_\_\_\_\_ Or drops may be sent home for treatment for \$14.00 Accept \_\_\_\_\_ Decline \_\_\_\_\_

If your cat has an umbilical hernia, it can be easily repaired during surgery for an additional fee of \$20.00 Accept \_\_\_\_\_ Decline \_\_\_\_\_

If your cat has not been tested for feline leukemia, feline immunodeficiency virus, or heartworm disease this test can be performed for an additional \$33.00 Accept \_\_\_\_\_ Decline \_\_\_\_\_

If your cat is in heat or early pregnant, there is an additional fee of \$15.00, if the cat is late term pregnant the fee is \$40.00, and may include euthanasia of offspring. Accept \_\_\_\_\_

Post operative pain medication is highly recommended and is required on all declaws and orthopedic procedures. Cost is \$9.00. Accept \_\_\_\_\_ Decline \_\_\_\_\_

A dental sealant can be applied to your cats teeth to prevent future dental problems while under anesthesia for an additional \$10.00. Accept \_\_\_\_\_ Decline \_\_\_\_\_

I, the undersigned, do hereby certify that I am the owner(duly authorized agent for the owner) of the animal described, that I do hereby give the doctors and staff of Mountain View Veterinary Clinic full and complete authority to perform the surgical procedure described above. And I do hereby and by the presents forever release the said doctors and employees from any and all liability arising from said surgery on said animal.

Emergency contact number \_\_\_\_\_

Sign \_\_\_\_\_ Date \_\_\_\_\_