## My Kids Have Paws Veterinary Services DOG SURGICAL INTAKE FORM 706-671-1104

706-671-1104	Intake: Meloxicam:	
	Input:	
Client ID:	Propofol:	
Patient ID:	Lid:	
Owners Name (First and Last):	Phone Number: Date:	
Street Address: Cit	y: State: Zip:	
Email:		
Animal's Name: Animal's Age/DOB:	Male or Female	
Animal's Breed: Animal's Colors:		
1) Has your dog been to the vet in the last 30 days?		
	plain:	
2) Has your dog had any previous surgeries?		
3) Has your dog been drinking/eating normally for the past two wee		
No Yes Explain:		
4) Is your dog on any current medications or had any injections in the supplements or over the counter medications given.	le last 30 days? Including heartworm/fiea prevention and any	
-		
5) Does your dog have any current health issues?		
	Diarrhea Lethargy Vaccine Reaction	
Allergies Other:		
6) Has your dog ever had a reaction to any medications or vaccines?  No Yes Explain:	, 	
7) If female, when was the last heat cycle for your dog?	<del>-</del>	
8) If female, has your dog had puppies before? Yes No If yes, date of last litter:		
Surgery Pricing (Includes nail trim, e-collar & pain meds)  Services for Dog Owners:		
Male	Highly recommended items	
remaie	(Check/Highlight all that are needed)	
2-40lbs - \$95	, , , , , , , , , , , , , , , , , , , ,	
71-100lbs - \$115 71-100lbs - \$100	DA2PP (\$15) DA2PP+Lepto (\$15)	
101-120lbs - \$125	Bordetella (Kennel Cough - \$15)	
121-140lbs - \$135	K9 Influenza Vaccine (\$30)	
141-160lbs - \$145 161-180lbs - \$155 161-180lbs - \$140	Rattlesnake vaccines (\$30)	
101100103 71-0	Lyme Vaccine (\$30)	
**NO pregnancy or in heat fee **Additional fee if pet is cryptorchid from \$10-\$50	Lepto Vaccine (\$15)	
Additional Fees:	Heartworm Test (\$15)	
Vaccines required for all pets undergoing surgery:	VCHeck Heart Disease Test (\$35)	
Rabies 1 year (\$15)	SNAP 4DX Test (\$35 -tests for Heartworms & lyme disease)	
Rabies 3 year (\$25, must have proof of unexpired 1 year)	Bravecto (3 month flea/tick prevention - \$55)	
Proof of rabies received (Staff Initials:)Credelio (1 month flea/tick prevention - \$18 to \$22)Flea Assassin (1 month flea prevention - \$5)		
	Intercentor Plus (Heartworm Prevention - \$8 to \$11)	
Pre-Anesthetic Bloodwork (\$110) available at the Dalton clinic only	lverheart Max (Heartworm Prevention - \$5 to \$10)	
Pre-anesthetic bloodwork is recommended for dogs older	Microchip (\$12) (REQUIRES EMAIL ADDRESS)	
than 7 years or with underlying conditions.	Anal Gland Expression (\$20)	
	Bitter Apple Spray (\$10, helps to keep pet from licking incision)	

\_ Transportation fee for any surgery done outside of

**Dalton (\$10)** 

\*\*Continued On Back\*\*

- I, being lawfully authorized to make decisions on behalf of the animal described above, hereby request My Kids Have Paws Veterinary Clinic, LLC (MKHPVC) and each of their employees & veterinarians to perform an operation for sterilization and or vaccinate, prescribe and treat with any services I have selected.
- To my knowledge, the animal listed above is in good health.
- I understand that the operation I have elected presents some hazard & that injury to, post-operative infection, or death of the animal may conceivably result, for there is always some risk involved in such procedures. I understand that general anesthesia will be used throughout the surgery.
- I understand that a pre-surgery exam will be performed on my pet when possible, but that there are times when such an exam may only be performed after an animal is sedated or anesthetized.
- I understand that some factors significantly increase surgical risk, including, but not limited to pregnancy, heat, & diseases.
- I understand that if the pet is an acceptable surgical candidate, sterilization procedures will be performed regardless of pet's gender and/or medical condition, including but not limited to pregnancy. I understand that if the pet is pregnant, the pregnancy will be terminated at surgery.
- I understand the risks of not keeping my pet up to date on vaccinations and waive all claims to any illnesses postoperatively that my pet may contract. I am responsible for treatment at my own cost.
- I understand that if my pet has fleas, a flea product (including but not limited to Nitenpyram Lufenuron or Revolution) will be given to the animal. I agree to the \$3/\$5 fee for this treatment.
- I understand that if the animal is not the gender that was initially presented and the animal is already under anesthesia, the surgery will move forward for the safety of the animal. I am responsible for any additional fees associated with the procedure.
- I agree that my pet's photo may be taken and used on social media or other promotional purposes.
- I understand that MKHPVC has the right to refuse service and/or procedure for any animal for any reason, included by not limited to situations where surgery is deemed a health risk. Such refusal is at the sole discretion of the veterinarian.
- I agree not to hold the participating veterinarian or MKHPVC liable or responsible to me in any matter.
- I am at least 18 years of age, have read this agreement carefully and in its entirety and I understand the contents of this agreement. I voluntarily sign this agreement of my own free will. I also understand the fees associated with the services that I have requested and agree to pay them at the time of service unless other arrangements are made ahead of time.

Signature:		Date:		
For Clinic Use Only:				
Weight:	P? # IH? PP?			
Any additional services? Fluids:mls Price:				
Capstar/Lufenuron/Revolution Given? Yes No Price: \$3 \$5				
Other Recommended Services:				
Service Recommended	Owner Approved/Declined	Initial when Completed		
Notes:				