Lincoln Veterinary Clinic

275 Magnolia St S
Lincoln, Al 35096
205-763-8387

Date: _____

Drop off between 8:00 am – 9:00 am
No food after midnight, ok to give water

Surgical Release Form

Owner's Name on Account: _____

Pet's Name: _____

WE REQUIRE AN UP-TO-DATE RABIES AND BORDETELLA VACCINE FOR ANY PATIENT STAYING IN OUR FACILITY.
Rabies with Brief Exam -$63.87, Bordetella-$27.82
CATS ARE ONLY REQUIRED TO BE UP TO DATE ON A RABIES VACCINE – Rabies with Brief Exam $63.87

- *If your pet has been vaccinated elsewhere, it is your responsibility to provide proof of current vaccines. If proper vaccine records are not provided at the time your pet is dropped off, we will update the required vaccines while your pet is in the clinic.*

Please be advised that if your pet is in heat at the time of service, an additional fee of $40.18 will be applied. If your pet is pregnant, an additional fee ranging from $81.38 to $102.00 will apply, depending on the stage of pregnancy as determined by the attending veterinarian.

Pre- Anesthetic Blood Work:
Pre-anesthetic blood work checks the internal organs and blood count for conditions affecting the liver, kidneys, or blood and is a vital part of safe anesthesia. Pre-surgical blood work is important to reduce the risk of complications during anesthesia. If any abnormalities appear, the doctor will contact you with a treatment plan.

- o Yes, I want Blood work ($110)
- o No

Post Surgical Laser Therapy:
*The latest technology that facilitates healing without the use of medication. Laser light therapy will be administered immediately after the procedure for the purpose of reducing swelling, inflammation and discomfort, help prevent infection and speed the healing process. *CAN **NOT** BE DONE ON GROWTH REMOVALS**

- o Yes, I want Laser Therapy ($24.73)
- o No

Additional Services/Procedures: Check If desired:

- o E-Collar – to prevent licking of incision site ($17)
- o Pain Medication (5-day Supply) (approximately $22)
- o Sedative - aids in keeping your dog calm during recovery period (approximately $17)
- o Microchip ($45) (this is not a tracking device; this is to help identify if your pet is lost or stollen.)
- o Nail Trim: Under 40 pounds ($26.27) ~ 40 to 69 pounds ($27.82) ~ 70 + pounds ($32.97)
- o Ear Cleaning ($31.75)
- o Express Anal Glands ($29.88)
- o Heartworm Test [Dogs only] - required to dispense heartworm prevention ($40.18)
- o Leukemia/FIV Test [Cats only] ($54.86)
- o Fecal Flotation- check for intestinal parasites ($36.06)

Flip Over

Is your pet on Heartworm and Flea Prevention?

- o Yes; List product and last date given_____
- o No

Is your pet currently taking medication?

- o Yes; list medication _____
  Last dose given: _____
- o No

Any known medical allergies?

- o Yes; please list allergies_____
- o No

<u>This question ONLY for Mass/Growth/Tumor Removal Surgery: Histopathology</u>
Histopathology (microscopic scan of the tissue) to determine if malignant or benign

- o YES, I want the sample sent for a Histopathology *(the price is depending on the size of the sample, sample prices start at $173.05)*
- o NO

Additional information we may need to know while your pet is in our care:
(anxiety, behavior/socialization issues, physical limitations, current or previous health conditions):

_____

Comments/Questions: _____

I understand that there are risks associated with sedation and anesthesia, if any of these unforeseen complications should arise, I authorize the veterinarians of Lincoln Veterinary Clinic to perform necessary lifesaving procedures.
I certify that I am the owner or authorized agent of the owner of this/these listed animal(s). I accept full financial responsibility for these pets and the services they receive. I understand that any animal left 10 days or more after designated discharge date shall be considered abandoned by me and will become property of the clinic. I understand that the financial obligation will remain my responsibility no matter the outcome. Should it become necessary to collect through an attorney or outside agency, I agree to pay all costs. Full Payment is expected at time of pick up.

Print name: _____

Signature: _____ **Date:** _____

Today's Contact Phone Number: _____ **Text or Call: Preference(circle)**

Is anyone else authorized to pick up your pet today?

- o **Yes: Name**_____ **Phone**_____
- o **No**

Email address: _____