



## Dental Procedure Consent (canine)

Client Name:  
Address:

Patient Name:  
Species:  
Breed:  
Sex:  
Color:

Phone Number:

Anesthetic procedure(s) to be performed: **Dental (canine)**

I, the undersigned owner or agent of the pet identified above, authorize the staff of Wilderness Animal Hospital to perform the above procedure(s).

In an effort to provide the best possible service for you and your pet, please take a moment to review and complete this admission form. Routine dental care for pets involves procedures similar to those your dentist performs on you. General cleaning includes pre-anesthetic exam, I.V. catheter with fluids, and blood testing if over 7 years old, dental cleaning, full mouth radiographs, scaling, polishing and application of Oravet, a dental sealant that last 2 weeks.

**During the oral exam and teeth cleaning, we may discover additional problems associated with your pet's teeth and gums that were not visible while your pet was awake.**

**Food/Medication:**

Last time your pet ate: \_\_\_\_\_ AM/PM Last time your pet received medication: \_\_\_\_\_ AM/PM

Name of medication(s): \_\_\_\_\_

**Pre-Anesthetic Blood Testing:** ☐ Accept ☐ Decline ☐ Already Done \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Blood testing to evaluate liver and kidney function and red blood cell count can help us better reduce the risk of anesthetic complications. This test is recommended, but optional for animals less than 7 years old and required for pets over 7 years old (unless blood tests ran within last 3 months were normal).*

**Dental Extractions (cost will vary):**

☐ Accept - The extraction(s) of teeth that may prevent health impairments in the future; including diseased, fractured, or loose teeth. Our goal is to preserve all teeth and extract only those that are severely diseased. *The doctor and technician will perform x-rays of your pet's entire mouth. This will provide a baseline for the overall dental health of your pet and determine if extractions are necessary.*

☐ Decline- I would prefer a referral to a dental specialist to try to save diseased teeth.

**\*\*Full-mouth radiographs are included in the cost of the dental procedure.**

**Additional procedures (additional fees apply):**

Physical Exam	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Vaccination	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> None Needed
Microchip	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Already Has a Microchip
Fecal testing	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Already Done ____ / ____ / ____
Anal glands	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Toe nail trim <u>(included)</u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Would you like to have a photo update of your pet? Yes ☐ No ☐

Pictures are sent through our app "PetDesk." Please ask Reception for more information or help to download our app

☐ **I understand that my pet's procedure will be performed in the morning OR in the afternoon.**

Our surgery staff will call you to set up a discharge time once your pet's procedure is completed.

**Pain medication: (based on size of pet \$40.00 - \$80.00):**

☐ I acknowledge that all pets under anesthesia will receive pain medication. If extractions are performed during my pet's dental, the doctor will administer a pain management injection. Pain medication will be sent home in the event extractions are performed.

**Antibiotic Therapy**

☐ I acknowledge that all pets with a Grade 2, 3 or 4 Dental will receive an antibiotic injection to protect against infection. This injection will last 12 hours. If my pet has gum disease or gets teeth extracted, the doctor will send home antibiotics for approximately one week.

**Post Surgical Care – Complimentary Two Week Recheck**

*Two weeks after your pet's dental cleaning, you have the opportunity to schedule a follow up technician exam at no charge. At this exam, we will recheck the dental work with you and show you how to brush your pet's teeth. You will also have the opportunity to pick up Oravet, a dental sealant that if applied weekly at home will help reduce tartar build up.*

**IV Catheter and Fluids - Included with all Dental Procedures**

*IV catheters significantly increase the safety of the anesthetic procedure. The catheter provides a route to administer emergency medicine in the rare cases needed, helps keep and is also a route to maintain blood pressure during the procedure which has been shown to improve and speed recovery and decrease reactions to anesthesia.*

**To maintain a flea free environment, any pet admitted to Wilderness Animal Hospital with evidence of fleas will be given a Capstar® tablet to kill the fleas at a cost to the owner.**

**Release:**

*I am the owner or caretaker of the pet and am over 18 year of age. I assume responsibility of care after surgery and authorize the doctors at Wilderness Animal Hospital to perform the surgery. While performing the surgery should the doctor find the procedures(s) to be more involved resulting in additional cost, I will be contacted at the phone number below. If I cannot be contacted, I authorize the doctor to perform the necessary procedure at his/her best discretion. I understand full payment is required when the patient is discharged.*

Signature of Owner: \_\_\_\_\_

Date: \_\_\_\_\_

Emergency phone number at which you can be reached today : ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Patient's Belongings:**