



## DENTAL ANESTHESIA RELEASE FORM

**PRE-ANESTHETIC BLOOD SCREEN:** Your pet is scheduled for a procedure that will require anesthesia. The safety of anesthesia has greatly increased with new technology and anesthetic agents. However, there is always some risk with anesthesia. We will perform a complete physical examination before your pet is anesthetized. Some conditions such as liver, kidney and certain blood disorders may not be detected without blood analysis. For these reasons we strongly recommend a preoperative blood screening, including a complete blood count, be performed. This may help us detect an underlying problem that could lead to anesthetic complications. With our in-house blood analysis capabilities we can have these results within minutes, which enable us to evaluate potential surgical risks.

**Yes**, I would like a pre-operative blood screen performed on my pet and understand there will be an additional fee.

**No**, I understand a pre-operative blood screen is recommended for my pet; however I choose to decline at this time.

**ORAVET:** Oravet Barrier Sealant creates an invisible barrier that prevents plaque and tartar from attaching to the teeth. We will apply Oravet as the last step in your pet's dental cleaning. You then apply Oravet prevention gel once per week at home. It's the easy alternative to daily brushing. By using Oravet on your pet's teeth you will see a reduction of tooth extractions, fresher breath, and better overall health.

**Yes**, I would like to have Oravet applied to my pet's teeth and the gel kit sent home and understands there will be an additional fee.

**No**, I understand the benefits of Oravet for my pet, however I choose to decline at this time

**EXTRACTIONS:** Extractions are sometimes a part of a pet's dental procedure. Sometimes teeth are very loose, have fractures, or even major root exposure. These teeth a lot of times require removal due to the problems they may cause to your pet in the future/ (i.e.: tooth root abscess, etc...) Extractions will be done based on the veterinarian's best judgment. We can assure you that only teeth needing to be extracted will be. Having extractions done will have a beneficial effect on your pet's health and less complications in the future.

**Yes**, I authorize Shenandoah Veterinary Hospital to perform any extractions deemed necessary during today's dental procedure.

**No**, I do not wish to have any teeth extracted during today's dental procedure.

I understand, although all reasonable precautions and due care will be taken during treatment of my pet(s), there is always a potential risk in anesthesia. I accept these risks, and authorize Shenandoah Veterinary Hospital, INC to perform such treatment as seemed necessary. I further realize that I am responsible for payment of the procedures and treatments performed on my pet at the time he/she is discharged.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

DAYTIME PHONE # \_\_\_\_\_