



CLINIC USE ONLY	
DATE:	ACCT: INITIALS:
IV cath. size:	Fluid rate + type:
ET tube:	Monitoring equip:
Preanesthetic:	Induction:
Anesthetic gas:	Antibiotics:
Pain Meds:	

Dental Special Release Form

****Dental special discount applies to dental procedures and dental products ONLY****

Pet Name _____ Age _____ Owner Name _____

Best Contact #: _____ Preferred Method of Contact: Call / Text

1. Did you withhold your pet's food/water for at least 12 hours? **Yes / No**

2. Is your pet on any medication? If yes, please list below: **Yes / No**

3. Are there any additional procedures we should perform while your pet is anesthetized?

4. Do we have permission to perform a pre-surgical screen on your pet? We recommend performing an EKG and a blood chemistry to evaluate the liver, kidneys, and heart prior to every anesthetic procedure. This will allow the staff to make informed decisions regarding the best anesthesia and post-operative care for your pet.

(\$132.00) for EKG + Chemistry Panel) Yes / No

5. Do we have your permission to perform dental extractions deemed necessary by the veterinarian? (Pain injection, antibiotic injection, take home pain medication and/or x-rays may be necessary. Ask about cost.)

..... **Yes / No**

6. Would you like full mouth dental x-rays? (evaluate for disease below gum line) **(\$129.00) Yes / No**

☐ Complimentary Pedicure + Bath (Value \$45.50 - \$100.00)..... **FREE**

☐ Apply Fluoride (strengthens enamel for 6 months) **\$12.60**

All patients must have a physical exam (past 12 months) at Animal Medical Clinic before anesthesia. (\$79.00) Vaccines required to stay in the hospital for any procedure: (surgery, boarding, bath etc.)

Canine- DA2PP (\$25.00) or DAP (\$25.00) and Bordetella (\$30.00) and Rabies (\$45.50)

Feline- FVRCP (\$27.00) and Rabies (\$45.50)

Date _____ Signature _____ Phone #: _____

2026 Dental Special

Attach to "Dental Release Forms / Records" line item (code DENT)