



Date: ____ / ____ / ____

Dental Consent Form

Patient's Name: _____ Client's Name: _____

Before putting your pet under anesthesia, we will perform a full physical examination. However, many conditions, including disorders of the liver and kidneys, are not detected unless blood screening is performed. Pre-Surgical blood screening will check the status of your pet's liver and kidney functions as well as their glucose level and any bleeding disorders.

I authorize the pre-surgical blood screening for an additional \$120.

****REQUIRED FOR PETS OVER THE AGE OF 7****

★ Yes _____ No _____ ★

Pain medication will be administered and/or sent home at the doctor's discretion. Price may vary with size of your pet and the type of procedure performed.

★ Owner's Initials _____ ★

★ Occasionally during dental cleanings, we will find teeth that, due to decay or damage, need to be removed for your pet's continued health. The total price for the extraction(s) will vary depending on which teeth, the number of teeth and severity of decay. The cost is in addition to the cost of the dental cleaning. By signing below you authorize any extractions to be made that are in the best interest of your pet. Please understand that we only extract teeth that are medically necessary. ★

Owner's Signature _____

I am aware of the risks involved with anesthesia and understand the information presented in this Dental Consent Form. I give Hannibal Veterinary Clinic veterinarians and staff permission to proceed with the surgical procedure. Further, I understand that I am financially responsible for all costs incurred during this surgery, treatment and hospitalization. I understand that all veterinary services are to be paid for at the time such services are provided.

Should unexpected life-saving emergency care be required in my absence, I want the doctors and staff to:

★ Resuscitate my pet DO NOT resuscitate my pet ★

See Attached for Dental Estimate

Owner/Agent Signature: _____ Date: _____

Phone number where you can be reached **DURING** the surgery: _____