Radiograph Admission Form

Your pet is be	umber where I can be reached between $8:00 \text{ am} - 8:00 \text{ pm}$	
-	imper where I can be reached between 6.00 am – 6.00 pm	1
anesthesia, oc	eing admitted today for radiographs (X-rays). Although naccasionally sedation is needed for proper positioning and l	•
□ YES □	NO If anesthesia is required, I wish to receive a phone administered to my pet.	call BEFORE any anesthesia is
Please answ	er all of the following questions, including Microchipp Consent/ Waiver, so that we can better assist you and	
☐ YES	Microchipping pet Identification I want to protect my pet by having him/her permanently	
_	Microchip ID. (please see Microchipping handout for de	
\sqcup_{NO}	I do not wish to have a microchip ID for my pet	
guarantee that years of age	Pre- Anesthetic Testing Consent /W greatest concern is the well-being of your pet. Although t complications will not occur, we require pre-anesthetic and older and we strongly recommend screening for all p stions about any of these testing panels, please request a d	pre-anesthetic testing does not c blood testing for all pets 7 pets under 7 years old. If you
	ONE of the options below <u>IF anesthesia is needed</u> :	
	MINI SCREEN (Required for all pets over 7 years of age) PROFILE (Most complete in-house blood screening.)	Cost: \$ 97 Cost: \$126
NO P	re-anesthetic Testing	Ουμ. φ120
☐ Testin	g already performed prior to admission.	
YES DI	NO I request that an EKG be done on my pet for an ad	ditional cost. Cost: \$39
	OWNER RELEASE	if the Doctor feels it is necessary. I
understand tha	I understand the foregoing. I give permission to use anesthesia t all anesthesia involves some minimal risk to my pet and it is t also aware that continuous presence of veterinary staff is not p	thoroughly understood that I assume