

SCOTTSDALE
Arizona
SPAY & NEUTER CLINIC

DATE _____

Client called for p/u: _____

Account# _____
Technician: _____

OWNER INFORMATION

Name _____ Cell/ Home Phone _____
 Last First
 Address _____ Other # _____
 Street _____
 Day Phone _____
 City State Zip
 Do we have a **current email address** on file for reminders and bloodwork updates? _____
 Does your pet have insurance? YES NO Insurance Info: _____
 Have you been here in the past with any animals? YES NO
 May we contact you via text? YES NO Text # _____
How did you hear about us? Internet Big Fix Program Drive-by Friend Tempe Tack & Feed Other:

PATIENT INFORMATION

Name _____ Age or Date of Birth _____
 Circle all that apply: Dog Cat Rabbit Male Female Previously: Spayed/Neutered
 Breed _____ Color _____
 Do you have an e-collar at home? Yes or No, if you do not have one would you like to purchase one from us? Yes / No
 When was your pet's last heat cycle / last pregnancy? _____
During your pet's spay if we find them pregnant do you authorize us to continue spay? YES NO CIRCLE ONE)
 Is your pet current on Heartgard medication? _____ Is your pet on any other medication? _____
 Any signs of illness? _____ Has your pet's Behavior changed in any way recently? _____
 Circle all that Apply: Vomiting Diarrhea Coughing Sneezing Appetite Change Lethargy
 Has your pet had any previous reaction to vaccinations, medication, or anesthesia?
 Has your pet eaten in the past 12 hours? Yes No (circle one please)
 Is your pet current on vaccines? Yes No Unvaccinated (circle one please)
 Does your pet have recent blood work? Within the last 14 days? _____, We do recommend that all pets prior to have anesthesia have blood work, **we only require bloodwork after 5 years of age** would you like us to do this today? The charge is \$78.00 Yes or No If No **Please Sign Bloodwork waiver**

PE-(:)	W (lbs.)	Temp	Anesthesia Given:		
	P	R	Anesthesia Induction-	Completion Time:	
			Et Tube Size _____	Eyes Lubed - ____	
General Appearance	N/AB				
Mm- Pink/Pale			Surgery Notes:		
Eyes/Ears	N/AB				
Musculo-Skeletal-	N/AB				
Dental-	N/AB				
Heart/Lungs	N/AB				
Digestive-	N/AB				
Integumentary-	N/AB				
Surgery Vitals: Pulse/Res	(:)	Pulse/Res	(:)	Pulse/Res	(:)
Surgery Vitals: Pulse/Res	(:)	Pulse/Res	(:)	Pulse/Res	(:)
Post-Op TEMP/PULSE/RESP		Recovery Status- Normal		E-collar Size - XS S MED LG XLG #	
Vaccinations Given SQ:	Distemper/Parvo	Bordatella Oral	Lepto Fvrpc	Felv-Fvrpc Felv	Rabies Serial # Exp Date: 1yr / 3yr
Medications Given SQ:	PEN (300 ku/m)	Ketoprofen (100mg/ml)	meloxicam (5mg/ml)	Convenia (80/mg/ml):	Cerenia (10mg/ml)
Nutracal Given Po Before surgery:	_____	Nutracal Given after sx : _____		Reschedule Dental in: 6 months 9 months 1 year (circle one)	
Rx Dispensed:					
Testing Done:	FELV _____	FIV _____	HW/TF/L _____	Fecal _____	Parvo _____ Ear Mites _____ Skin Scrape _____
Fluids Given:	IV / SQ / Rate _____	Total Volume: _____	Deworming: _____	Suture/Staple Removal _____	Days
Procedures Done:	Microchip Implanted _____	Anal Glands Expressed _____	Ears Cleaned _____	Nail Trim _____	
Carprofen Injection given sq. (50mg/ml)		Vetprofen- mg #	start	give	Tablets by mouth once daily for _____ days
Veterinarian Signature:					



Please Circle Services Authorized
The basic plan does not include a spay or neuter.
Medical waste Fee per animal is \$3.00

DOG INCLUDES: DHPP Bordatella Rabies Deworming	BASIC PET PLAN \$57.00	CAT INCLUDES: FVRCP FELV Rabies Deworming
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Dental with other surgery	\$167.00
Dental 7 years and younger	\$197.00
Dental 8 years and older	\$275.00

I authorize extractions up to a certain Dollar Amount: \$ _____

I would like a call before extractions: Yes / No

If I do not answer my phone, please do extractions without a verbal consent: Yes / No

Best Number to reach for extractions: _____

I Decline All Extractions: Yes / No

I understand that Arizona Spay and Neuter Clinic will take all reasonable precautions against injury, Escape or death of my pet, but will not be held liable or responsible in any way in connection therewith as it is thoroughly understood that I, the owner, assume all risks. I am aware that this facility is not a 24-hour care facility. I also give Arizona Spay Neuter Clinic permission to use my pet's photo/video for client education or social media purposes.

X
Signature of Legal Owner or Authorized Person (I am at least 18 years of age)

Arizona Spay and Neuter Clinic recommends that ALL Pet's that are getting spayed, neutered, declawed, & mass removals go home with a **E-COLLAR** so that they will not bother surgical sites. If you chose to decline e-collar you are assuming all risks/costs associated with repair of surgical sites.

Initials: _____

Unauthorized (Not Circled Services Will Not be performed)
 We need all services authorized to be circled by owner.

CIRCLE AUTHORIZED SERVICES

Go Home Pain Medication	\$15.00-25.00 (dogs)
Pain Injection	\$12.00
Tramadol Sedative/ Pain Med	\$25.00
Dog Spay < 50 lbs	\$84.00
Dog Spay 50-100 lbs	\$120.00
Dog Neuter < 50 lbs	\$74.00
Neuter 50-100 lbs	\$97.00
Scrotal Ablation (Removal of Scrotum)	\$60- 120.00
Cat Spay	\$58.00
Cat Neuter	\$41.00
Cherry eye repair	\$175.00 per eye
Mass / Wart depending on size	\$60 and up plus anesthesia
Rabbit Spay	\$156.00 w/pain meds
Rabbit Neuter	\$136.00 w/ pain meds
Tooth Extractions	\$21.00 - 200.00 per tooth
Umbilical Hernia (depending on size)	\$30.00-60.00
IV Catheter & Fluids	\$32.00
SQ Fluids Only	\$30.00
NexGard Flea/Tick Control	\$18.00-20.00 Per Month
HeartGard Medication	\$38.00-49.00 Per 6 months
Pregnant or in Heat	\$10.00-50.00
Cryptorchid	\$25.00-100.00
Antibiotic Injection	\$14.00- 60.00
Declaw w/ pain medication	\$174.00 with spay/neuter
Declaw w/ pain medication	\$194.00
Rabies	\$18.00
Feline leukemia	\$18.00
Feline Distemper	\$18.00
Felv- Fvrpc Combo	\$36.00
Distemper Parvo	\$18.00
Bordatella Oral (Kennel Cough)	\$18.00
Lepto Vaccine	\$25.00
Microchip	\$52.00
Deworming	\$18.00
Ear Mite / Cleaning	\$24.00 – 48.00
Fecal Float	\$30.00 – 60.00
Antibiotics	\$28.00- 48.00
Convenia Injection – last 2 weeks	\$65.00
Nail Trim \$11.00 w/ surgery	\$20.00 without Surgery
Heartworm/Tick Fever Test	\$36.00
Heartworm Only	\$18.00
FELV/FIV Test	\$36.00
E-Collar	\$15.00
Physical Exam	\$40.00
Saturday Fee	\$20.00
Anal Glands Expressed	\$28.00
Dewclaw Removal	\$30.00 -60.00 per dewclaw
Anesthesia	\$62.00 every 15 minutes
Health Certificate with Exam	\$65.00
Outside Prescription requires Exam	\$10.00 script / \$40.00 exam
Bloodwork Depending on Panel	\$78 and up

***** I have received a copy of my pet's aftercare instructions:
 Spay/Neuter, Dental, Declaw, Mass Removal, Vaccines, Other.**

Initials: _____