

SCOTTSDALE
Arizona
SPAY & NEUTER CLINIC

DATE _____

Client called for p/u: _____


Technician: _____

Account# _____

Paid _____

Trapper Info: _____ Cell Phone# _____
 First Last
 ADDRESS: _____
 City State Zip Code

Is This Cat Part of the Spay Neuter Hotline? YES Or NO If Yes what is APP # _____
 May we contact you via text for reminders and surgery updates? YES NO Text # _____
 Do we have a **current email address** on file for reminders and bloodwork updates? _____



Circle Services authorized for today on the back of the form.

PET'S INFORMATION – Please Fill Out as much as possible

Name/Trap # _____ Age or Date of Birth _____
 Circle all that apply: Cat Male Female Previously: Spayed/Neutered
 Breed _____ Color _____

CIRCLE AUTHORIZED SERVICES
on front and back please

Cat Spay \$45.00 Cat Neuter \$45.00 Pain Injection 19.00 FELV/FIV Test \$42.00
 Rabies \$24.00 Feline Leukemia \$24.00 Feline Distemper \$24.00 Felv- Fvrpc Combo Vaccine \$48.00

PE-(:) W (lbs.) Temp unable feral Anesthesia Given : Telazol 100 **MG/ML 0.** CC - IM, ET or Mask Bottle# _____
 P R Anesthesia Induction- _____ Completion Time: _____

Actual Weight: _____ Lbs. Temp taken during surgery prep: _____ Et Tube Size _____ Eyes Lubed - _____ Surgery Notes Below:
 General Appearance N/AB
 Mm- Pink/Pale

Eyes/Ears N/AB
 Musculo-Skeletal- N/AB
 Dental- N/AB Check for ear mites _____
 Heart/Lungs N/AB Check for microchip _____
 Digestive- N/AB Check for fleas _____
 Integumentary- N/AB Ear Tip Left Ear _____

Surgery Vitals: Pulse/Res/ Iso % (:) Pulse/Res/ Iso % (:) Pulse/Res/ Iso % (:)

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Post-Op TEMP/PULSE/RESP _____ Recovery Status- Normal _____ E-collar Size - XS S MED LG XLG # _____

Vaccinations Given SQ: Fvrpc Felv-Fvrpc Felv Rabies Vaccines Due: 1yr 3yr 3-week booster

Medications Given SQ: PEN (300 ku/m) Meloxicam Inj (5mg/ml) Onsiar Injection (20/mg/ml): Cerenia (10mg/ml)

Oral Metacam 1.5mg/ml Given Po _____ ml Oral Metacam 1.5mg/ml: start _____ give pre-measured (_____ ml) syringe by mouth once daily for _____ days for pain.

Pregnant _____ Lactating _____ Previous altered _____ other: _____

Testing Done: FELV _____ FIV _____ HW _____ Fecal _____ Ear Mites _____ Skin Scrape _____

Fluids Given: IV / SQ / Rate _____ Total Volume: _____ Deworming: _____ cc PPM2 / PYRANTEL PO Suture / Staple Removal _____ Days

Procedures Done: Microchip Implanted _____ Anal Glands Expressed _____ Ears Cleaned _____ Nail Trim _____

Veterinarian Signature: _____



Please Circle Services Authorized
The basic plan does not include a spay or neuter.

Medical waste Fee per animal is \$3.00

CIRCLE AUTHORIZED SERVICES

<p>Ask About Vaccines for your feral cat today!</p>	<p>BASIC PET PLAN</p> <p>NO Surgery</p> <p>\$65.00</p>	<p>CAT</p> <p>INCLUDES:</p> <p>FVRCP FELV Rabies Deworming</p>

Dental with other surgery	\$177.00
Dental 5 years and younger	\$212.00
Dental 6 years and older	\$298.00
Bloodwork Required 6 years and older	\$98.00
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	
Authorize up to \$_____ amount in extractions before call.	

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.

Signature of Legal Owner or Authorized Person

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

I want the feral cats left ear tipped? Yes or no
 (if not answered we will tip any cats ear in a trap)

Any other services wanted for feral cats need to be circled and or explained to technicians.

Pain Injection	\$19.00
E-Collar	\$15.00
Cat Spay	\$45.00 Code: sncs
Cat Neuter	\$45.00 Code: sncn
Rabies	\$24.00
Feline Leukemia	\$24.00
Feline Distemper	\$24.00
Felv- Fvrcp Combo	\$48.00
FELV/FIV Test	\$42.00
Pregnant or in Heat	\$10.00-50.00

Cryptorchid	\$25.00-100.00
Antibiotic Injection	\$14.00- 60.00
Mass Removal/ Wart	\$60 and up plus Anesthesia & E Collar
Anesthesia	\$62.00 every 30 minutes
Tooth Extractions	\$25.00 - 200.00 per tooth
Umbilical Hernia (depending on size)	\$40.00-60.00
IV Catheter & Fluids	\$48.00
SQ Fluids Only	\$30.00
Declaw Front Paws Only	\$197.00 plus e collar = \$212.00
Microchip	\$52.00
Deworming	\$18.00
Ear Mite / Cleaning	\$24.00 – 48.00
Fecal Float	\$77.00
Antibiotics	\$28.00- 48.00
Nail Trim \$11.00 w/ surgery	\$20.00 without Surgery
Nail Trim under sedation	\$85.00 without Surgery
Heartworm/Tick Fever Test	\$36.00
Physical Exam	\$40.00
Saturday Fee	\$20.00
Anal Glands Expressed	\$28.00
Dewclaw Removal	\$30.00 -60.00 per dewclaw
Health Certificate with Exam	\$65.00
Outside Prescription requires Exam	\$10.00 script / \$40.00 exam
Bloodwork Depending on Panel	\$81 and up
NexGard Flea/Tick Control	\$18.00-20.00 Per Month
HeartGard Medication	\$38.00-49.00 Per 6 months
Cherry Eye/ Eye Procedure	\$175.00 per eye and up
Other Service Not Listed:	_____ \$ _____
Additional Services Wanted:	

***** I have received a copy of my pet's aftercare instructions:** Initials: _____
Feral Cat aftercare.