

Sherwood Family Pet Clinic – 20900 SW Olds Place Sherwood, OR 97140 – (503) 625-5664

Dr. Robert Merrill, Dr. Courtney Woodside, Dr. Mark Schlimgen, Dr. Leticia Wustenberg, Dr. Christina Sitton, Dr. Kaitlyn Rudie

Canine Spay/Neuter Release Form

Owner	Pet's Name	
Procedure(s)	Preferred Pick Up Time	
Best Number Where I Can Be Re	eached Today	
infection. If your pet cannot receive vac protection of other pets in the hospital.	ted or overdue for vaccines, we will immunize or reschedule the appoir coinations due to health reasons, your pet will be housed in our isolation. There will be a charge for any pet housed in isolation. your pet, we will treat with an appropriate flea medication. There will	n ward for their protection and for the
IV Fluids: These intravenous fluids hel with have an IV catheter placed and flu	elp ensure safe anesthesia and help patients have better post-operative rouds administered during the procedure.	ecovery. All pets undergoing anesthesia
	n: This testing will help the veterinarian to identify pre-existing conditions involving anesthesia. This is recommended for all pets undergoing	
My pet has had a blood screeningYes. I would like a pre-anestheticNo. I decline a pre-anesthetic bloo	within the past 30 days. \$81.00-\$2 blood screening run on my pet.	224.00
		gery has many benefits including less
	A microchip implanted under your pet's skin carries a unique number our pet can be reunited should it become lost. We recommend microchi \$58.00	
Nail Trim: Trimming toenails under ar Yes. No.	nesthesia is easier and less stressful for your pet. \$10.50	
Therapeutic Laser: The therapeutic lasafter surgery and before discharge.	aser helps relieve pain, decrease inflammation and speed healing of the	surgery site. This treatment is given
Yes. No	\$24.00	
Overnight care at SFPC is unsupervised where pets are not under direct supervised	d at times outside of normal business hours. For safety reasons, no contsion.	tinuous IV fluids are given during hours
staff to medicate, treat and hospitalize r have had the opportunity to have any qu against injury or escape and that risks a	r am responsible for it, and I hereby consent and authorize the Sherwood my animal. I have been advised as to the nature of the procedures or opquestions answered. I acknowledge that no assurance or guarantee has been disposabilities of complications exist in any surgery, anesthesia or mand assume all financial responsibility. PAYMENT IS DUE IN FULL	erations and the risks involved and een made except reasonable precautions edical treatment. I certify that I am the
Signature	Date	