Surgery Intake

*Please bring this completed form with you the morning of your pet’s surgery.

Pet Name:
___________________________________________________________________________________________________

Procedure(s) Planned: __________________________________________________ __________________________
If we are removing a tumor or growth, please describe its location:
___________________________________________________________________________________________________

Are there any additional non-surgical procedures you’d like us to perform while your pet is under anesthesia? (Please note, there may be an additional charge if not included on estimate)

☐ Nail trim (no additional charge)
☐ Ear cleaning ($25)
☐ Anal gland expression ($19)
☐ Microchip ($45)
☐ other: __________________________________________________________

Has your pet had any issues or concerns recently? Examples include vomiting, diarrhea, weight loss, anorexia, seizures, etc.
___________________________________________________________________________________________________

When did your pet last eat?
___________________________________________________________________________________________________

To the best of your knowledge, has your pet experienced any previous anesthetic complications? Or is this their first adventure under anesthesia?
___________________________________________________________________________________________________

Does your pet have any allergies?
___________________________________________________________________________________________________

What medication(s) is your pet currently on? Please include the last time each medication was administered:
___________________________________________________________________________________________________
___________________________________________________________________________________________________
___________________________________________________________________________________________________

Do you need any medication refills? This may also include monthly preventatives for fleas/ticks and heartworm.
___________________________________________________________________________________________________

Do you have a preference for medications to go home?
☐ Liquid
☐ Tablet/Capsule
☐ either!

*Please note: For larger dogs, liquid medications may be much more expensive than tablets/capsules.
For small dogs, certain medications may only be available in liquid form.
We will adhere to your preference as much as possible; some medications are only available in specific forms.

Our surgical team highly recommends the use of an Elizabethan collar (a “cone of shame”) at home for at least 2 weeks post-op. This prevents your pet from being able to lick/chew at an incision along their body as well as kick/scratch at their face/head.
☐ Send my pet home with one today
☐ I already have one at home!