

SOUTH MESA VETERINARY HOSPITAL
3801 South Mason Street
Fort Collins, Colorado 80525

Consent Form for Dental Cleaning and Periodontal Treatment

Authorization:

Extent of Dental Services Desired (PLEASE CHECK ONE)

- I understand additional treatment may incur increased expense. If during the procedure, any unforeseen dental procedures become necessary and desirable in the veterinarian's professional judgment. I prefer that you proceed with all necessary dental procedures, including extractions of teeth.
- I prefer to be called before any additional procedures, other than emergencies, are performed. If I cannot be reached, I authorize you to proceed with all necessary dental procedures.
- If I cannot be reached by phone, I do not authorize any unforeseen dental procedures.
- A written estimate of fees has been offered, but I request not to receive one before procedure.

→ **I understand that hair will be shaved in order to place an intravenous catheter.**

→ **Photographs may be taken of your pet's procedure and used, anonymously, for educational purposes.**

I HAVE READ AND FULLY UNDERSTAND THIS DENTAL TREATMENT/ORAL SURGERY AND ANESTHESIA CONSENT FORM.

I authorize anesthesia and dentistry/oral surgery for my pet, as described above. The nature and risks of this procedure have been explained to me. I understand that some risks always exist with anesthesia and/or surgery, and I am encouraged to discuss any concerns I have about those risks with my veterinarian before the procedure(s) are initiated. Additionally, I authorize South Mesa Veterinary Hospital to perform any diagnostic, treatment or surgical procedures as deemed necessary for medical or surgical complication or otherwise unforeseen circumstances. While South Mesa Veterinary Hospital provides the highest quality of anesthesia monitoring and surgical services, I understand that there are rare complications associated with any anesthetic or surgical procedure. I fully understand these risks and understand that the veterinarians and hospital staff will try to minimize such risks. I will not hold South Mesa Veterinary Hospital, the veterinarians or any staff member liable for any complications that may arise.

No warranty or guarantee has been given to me as to the results or cure afforded by these treatments or procedures. South Mesa Veterinary Hospital treats cases based on evidence-based medicine. My signature on this consent form indicates that any questions have been answered to my satisfaction.

Signature of pet owner or agent

Date

Signature of parent/guardian if under 18 yrs.

Date

Phone numbers where I can be reached TODAY:

Residence _____

Office _____

Cellular _____