

Town & Country Animal Clinic
 1241 S. Houston Lake Road
 Warner Robins, GA 31088
 (478)-953-7297

Dental Consent Form

 Client

 Patient

 Date

Please carefully read and sign

\$72 Pre-Anesthetic Profile:
 (Under 7 yrs old)

PCV (anemia test)
 Blood Glucose
 Total Protein

SAP (liver function)
 ALT (liver function)
 BUN/ Creatinine (kidney function)

\$235 Dental Adult Profile:
 (Older than 7 yrs)

Comprehensive Blood Chemistry Panel (15 tests)
 CBC (Complete Blood Count)
 IV Catheter/fluids
 Electrolytes

Dental Cleaning and Polishing: **\$175 - \$265** depending on severity (includes the preoperative exam, gas anesthesia, and antibiotic injection).

Additionally, we offer digital dental radiology. It can be an extremely useful tool to determine the complete oral health. Significant visible signs of oral disease warrant dental radiographs. (This cost will not exceed \$145)

\$165 Full Mouth X-rays, \$85 Single View X-rays (+ \$10 ea. Additional)

I Decline X-rays

Estimates can be given and discussed prior to procedures (see back). Considerable variability exists and will be consistent with the time involved in cleaning, polishing, x-rays, extractions, oral surgery, and any other necessary treatments.

 Yes, please complete the recommended blood work, intravenous catheter/fluids (if indicated), dental x-rays (if indicated), cleaning/polishing and any necessary extractions or other treatments you deem to be appropriate for my pet. I agree to my financial responsibility for the procedures performed.

 No, due to financial constraints or other concerns I am only able to authorize the following be done:

(Please list) _____

Payment is due at time of pick-up

Signature: _____

Phone Number to be reached today: _____

NO FOOD AFTER 10 pm the night before your pet's procedure. LEAVE WATER AVAILABLE.