



Dentistry Admissions Form

Client Name _____ Date: _____

Pet(s) Name _____

Procedure _____

*Phone Number(s) _____

****Please note, it is very important to reach you at the time of the procedure to help in the decision in what is best for your pet's health.***

I do hereby authorize the Briarcliff Animal Clinic to perform a dental and/or anesthetize my pet, and declare that I am the legal owner or authorized custodian of this animal. I release the Briarcliff Animal Clinic, Dr. Peter J. Muller and all his agents or representatives of all legal responsibility for this animal.

I am aware of the risks involved in anesthesia and realize my pet could die due to anesthetic problems or other complications.

Pre-Anesthetic Screening & Pain Management

In order to evaluate your pet's basic physiologic condition and to help ensure a safe anesthesia, pre-anesthetic testing is performed on procedures requiring anesthesia. The pre-anesthetic screening will help us to determine if we need to take extra precautions with your pet or the screening may indicate that we should avoid a procedure altogether until a discovered problem can be corrected. The pre-anesthetic screening is not a guarantee against complications with a procedure, but it will help us determine the safest protocol for your pet. Pain management will be provided on certain dental procedures as deemed necessary by the doctor.

During the procedure, additional problems may be discovered.

Permission is granted to:

1. Check **one** of the following:

- Take dental x-rays and evaluate them to determine if any treatment is necessary. (*recommended*)
(Full Mouth Radiographs are currently \$109.15)
- Take dental x-rays only if an abnormality is detected on oral exam.
- Take no dental x-rays regardless of findings.

2. Please apply Oravet dental sealant after the dental cleaning for a charge of \$18.35. Yes No

3. Please place a microchip in my pet during sedation. I understand that a fee of \$64.70 will apply. Yes No

Signature _____

Date _____