

**Parkwood Animal Hospital  
4849 NC 55 Hwy.  
Durham, NC 27713**

Patient Name \_\_\_\_\_

Date of Procedure \_\_\_\_\_

**CONSENT FOR DENTAL PROCEDURE**

➤ **Pre-Anesthetic Blood Screening**

Like you, our greatest concern is the well-being of your pet. Before administering anesthesia to your pet, we will perform a full physical examination; however, many conditions including disorders of the liver or kidneys are not detected unless blood testing is performed. Such tests are especially important before any kind of surgery. For these reasons we highly recommend blood screening before such procedures. This pre-surgical blood screening is a chemistry blood screen diagnostic profile and the cost for this is \$61.00. Our laboratory is fully equipped and staffed to perform this important blood test. Results will be immediately available before anesthesia.

\*\*Please indicate your choice by circling the appropriate response below

**YES** I want my pet to have the pre-anesthetic blood screen recommended for pets of his/her age.

**NO** I do not want my pet to have the pre-anesthetic blood screen recommended for pets of his/her age.

➤ **Extractions**

During your pet's dental it may be necessary to extract teeth that have become abscessed, non-functional, or a source of pain. Extracting teeth may result in additional charges of \$37.00 to \$240.00 per tooth depending on which tooth needs to be extracted and the condition of the surrounding teeth.

Please initial: \_\_\_\_\_ yes, please extract teeth as determined by the doctor.

\_\_\_\_\_ please call me before any extractions. The telephone number you **must be** available at \_\_\_\_\_

\_\_\_\_\_ No, I do not want any extractions, even if recommended by the doctor.