



Bay Park Veterinary Clinic

Anesthesia, Surgical, and Medical Release



I, the undersigned, do hereby certify that I am the owner (or duly authorized agent for the owner) of the animal described. I have read and understand the reasons for and the risks of the authorized procedure(s). I also understand that no guarantee of successful treatment can be made. I do hereby give Bay Park Pet Clinic, their agents, servants, and/or representatives full and complete authority to perform the procedure described as:

Patient ID label

_____ **Initial**

I understand and acknowledge that Bay Park Veterinary Clinic strives to achieve a gold standard of medical care, and requires that all patients having sedation or anesthetic procedures receive blood testing, intravenous catheter and fluid therapy, pain management, and an Elizabethan collar *as deemed necessary by the veterinarian*. _____ **Initial**

I understand that during a dental cleaning it is not always possible to recognize the need for extractions until my pet is anesthetized. In the event that extractions are needed, I:
 Authorize necessary treatment without the need to contact me by telephone _____ **Initial**
 OR

Do not authorize any additional treatment without my express permission _____ **Initial**

I understand that Bay Park Veterinary clinic is **not** open 24 hours a day and is open and staffed 8:00 am – 6:00 pm Monday thru Friday and 9:00 am – 4:00 pm on Saturdays. Should I choose to leave my pet after-hours, I realize there will be no on-site care or supervision provided. _____ **Initial**

I assume all financial responsibility for the charges and services incurred to the described animal while under the care of Bay Park Veterinary Clinic, up to and including any emergency treatments deemed necessary by the attending veterinarian, and understand that payment is due at the time of service.

Signed: _____ Date: _____

Primary Contact Number: _____ Secondary: _____

These numbers allow us to contact you in case of emergency, updated treatment plan, or the need to update your estimate. Please be sure to be available at all times at one of these numbers to ensure the prompt and proper care of your pet. Thank you!