



NON ANESTHETIC DENTAL CONSENT FORM

Pets Name: %%patients.patient name%%

Date: _____

Owner: %%clients.first name%% %%clients.last name%%

Canine AND Feline

The Canine and Feline Non-Anesthetic Dental Cleaning costs include Teeth Cleaning, Teeth Polishing, Full Oral Assessment, Antibiotics and Sedation.

BLOODWORK

Blood tests are used to screen for medical problems that may not be apparent on physical examination. More involved tests provide more information but incur greater costs. We encourage some level of blood screening to be done for all animals. Please initial your choice below:

Option 1: Comprehensive Wellness Profile \$195 (initial) _____

Option 2: Mini Blood Panel \$75 (initial) _____

Option 3: No blood work performed today (initial) _____

DENTAL EXTRACTIONS/SEDATION

- Dental extractions for painful/diseased teeth are \$15 per tooth and include sedation prior to the extraction at no charge.
- If your pet is too mobile during the non-anesthetic dental cleaning, sedation may be necessary to complete the procedure. Please initial your choice for contact below if sedation or tooth extractions are necessary.

Option 1: Perform extractions and sedation as required (initial) _____

Option 2: No extractions or sedation beyond cleaning unless the owner is contacted (initial) _____

Would you like us to do anything else today? _____

Owners Signature: _____

Date: _____

Best Phone Number for Contact Today: _____