



Dental Authorization Form

As owner (or representative) of _____, I give consent to Warm Springs Pet Hospital to perform a dental on my pet, as well as any of the following that I've checked below:

Cost of the basic dental procedure is \$670

(Included in the price: Pre-op exam, IV Catheter, general anesthesia, the dental procedure, a nail trim, and a 24 hour pain and antibiotic injection.)

Recommendations:

Yes or No?
(Circle one)

We recommend pre-anesthetic bloodwork to be performed prior to surgery.

This helps us determine if there are any medical conditions which would cause us to adjust or hold-off on the dental.

Y / N

Cost: \$160 if 7 years old or less, \$250 if greater than 7 years old.

We recommend that your pet goes home with a course of pain medicine. We do give a pain injection to every dental procedure, but this wears off in 24 hours, and some pets may be uncomfortable for a few days afterward.

Y / N

Cost of 5 days of pain medicine: \$40

We recommend dental radiographs. Roughly 35% of pets have disease that can only be diagnosed with dental radiography.

Y / N

Cost of full mouth radiographs: \$280

We recommend that all pets be microchipped. If your pet is ever lost, this increases the chance that you will be reunited.

Y / N

Cost of implanting and registering a microchip: \$85

Other questions:

In case of an emergency, how would you like us to proceed?

(CPR \$150, Oxygen Therapy \$50)

_____ Do whatever the doctor feels is necessary

_____ Do not proceed with any heroic measures (Choosing this option means we will not resuscitate)

See other side of page →

Has your pet had access to food in the last 8 hours? Y / N

Do you authorize tooth extractions? (Check ONLY 1 box)

- ☐ Extract whatever the doctor feels is necessary
- ☐ Try to call me first. If you cannot reach me, then do whatever is necessary.
- ☐ Try to call me first. If you cannot reach me, I authorize only up to \$_____ in extractions.
- ☐ Try to call me first. If you cannot reach me, do not proceed with anything unauthorized.

Costs of Extractions:

1 Root Tooth	\$80	Canine Tooth	\$125
2 Root Tooth	\$100	Baby Tooth	\$55
3 Root Tooth	\$120	Carnassal Tooth	\$125

The quotes above are estimates for routine extractions only. Advanced surgical extractions are double the standard extraction price per tooth. These include infected/abscessed teeth and fractured teeth.

Any other concerns that you would like us to address today?

We will have the doctor look at your concerns during the procedure, then an assistant will relay any treatment recommendations that the doctor makes. If you would like one-on-one time with the doctor, this will have to be in a separate exam at a later date.

Phone number where you can be reached today: (____) _____ - _____

This is the number we will call if there is an emergency or we find something concerning.

Pickup time is between 3pm - 4pm. Arrival after 5pm will incur a \$15 late fee for every 15 minutes over 5pm.

I understand that any procedure (Anesthesia and Surgery) carries risks and that results cannot be guaranteed. I agree to pay in full for services rendered, including those deemed necessary for medical and/or surgical complications or unforeseen circumstances. The estimate of charges for presently planned procedures is only an approximation.

Signature: _____ Date: _____