



Surgery Consent Form SPAY/NEUTER

Name(Last) _____ (First): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home #: _____ Work #: _____ Cell #: _____
(Please indicate which number you can be most easily reached in the event of an emergency.)

Animal's Name: _____ Species: (circle one) Feline Canine Other Sex: _____

Breed: _____ Color: _____ Age: _____

I, being of legal age and responsible for the animal described above and having the authority to grant the Norfolk SPCA and its staff members, volunteers, or agents my consent to receive transport, prescribe for, treat and /or perform sterilization surgery upon the animal named above. I understand that payment is due in full when the animal is picked up.

I understand there are inherent risks involved with anesthesia and surgery and have had all my questions and concerns addressed prior to this time. I also understand that modern techniques and trained staff will be used to care for all animals and reasonable precautions will be used against injury, escape or destruction of the animal. It is thoroughly understood that the Norfolk SPCA, its staff, volunteers, and agents will not be held liable or responsible in any manner and I assume all risks.

If in the course of this surgical visit, a condition is discovered which requires immediate medical attention or an additional procedure or treatment, the attending veterinarian may, in his/her absolute discretion, perform such procedure. I consent to these procedures and agree to pay reasonable additional charges, if any. I understand that the Norfolk SPCA Veterinary Clinic is a flea free environment and if fleas are found on my animal, he/she will be treated with an oral flea treatment at my cost.

I further understand that as long as, in the opinion of the attending veterinarian, the animal is an acceptable surgical candidate, sterilization procedures will be performed regardless of the animal's sex or medical condition (including pregnancy). **I also understand that the animal will receive a tattoo approximately 1"-2" in length near the incision sight as a visible indicator that he/she has been altered.** I understand that the attending veterinarian can refuse to perform any procedure on any animal for any reason. Such refusal is at the sole discretion of the attending veterinarian.

I also understand that all animals must be picked up from the facility at the time and day designated by staff. Any animal left past will be assessed a \$30.00 boarding fee. If I do not claim the animal, I understand that after 24 hours the animal will be considered abandoned and the animal will be considered the property of the Norfolk SPCA. Failing to pick up the animal means I have relinquished all ownership rights and am still responsible for any and all medical costs including boarding expenses. I understand that the Norfolk SPCA does not operate a 24 hour, full service veterinary clinic, and that any follow-up care, whether or not it is related to the sterilization surgery, will need to be done by my own veterinarian and at my own expense.

I also understand that the Norfolk SPCA recommends that all animals maintain a relationship with their regular veterinarian and have had a full exam and performed any recommended testing prior to any surgery. I understand that my animal will only be examined in an attempt to reveal any obvious reasons to postpone surgery and that I will not necessarily be advised of any abnormal findings unrelated to surgery. I also understand that in some cases no exam may be performed at all before my animal is put under anesthesia, especially if my animal poses a risk to the clinic staff or has not been vaccinated for rabies.

By signing this consent form, I am acknowledging that I have either consulted my regular veterinarian for a pre-surgical exam, or I am waiving my right to do so and accepting all risks involved.

Payment: The Norfolk SPCA accepts cash, Visa, Discover and American Express (with valid I.D.) No personal checks. Payment in full is due at the time of service.

Signature: _____ Date: _____

NORFOLK SPCA PATIENT INFORMATION SHEET

Client's Name: _____ Patient's Name: _____

1. Where did you get your pet? _____ How long have you owned your pet? _____

***Is it possible he/she is already spayed or neutered? Yes No

2. Has your animal had surgery before? Yes No If yes, please explain _____

3. When was the last time your animal had any food or water? _____

4. Has your animal ever had a seizure? Yes No If yes, when? _____

5. If your dog or cat is a female, please answer the following questions. If your pet is a male, skip to Question 6.

a. In heat dogs and cats have a greater tendency to bleed and may pose an extra surgical risk.

When was the last time she was in heat? _____

b. Pregnant animals are at greater risk for surgical complications. If we discover a pregnancy during the spay, the surgery will continue resulting in the termination of the pregnancy.

Is there any chance your animal is pregnant? Yes No Maybe

c. Has your pet given birth within the last six months? Yes No

If yes, when: _____

6. Within the last two weeks, are you aware of any change in your pet's:

Activity Level: Yes No Eating: Yes No Drinking: Yes No Behavior: Yes No

7. Within the last two weeks, has your pet displayed any of the following?

Sneezing: Yes No Coughing: Yes No Diarrhea: Yes No Vomiting: Yes No

8. Does your pet have any history of health problems or injury? Yes No

If yes, please explain: _____

9. When was the last time your animal was vaccinated? _____

10. Has your pet had any known reactions to vaccinations, drugs or medications in the past? Yes No

If yes, to what? _____

11. Is your pet currently on any medications other than flea/tick/heartworm prevention? Yes No

If yes, please list: _____

12. In the past 10 days, has your animal been treated for fleas, ticks or mange (dip, spray or powder) Yes No

If yes, what products were used? _____

13. Is your animal currently on any heartworm preventative? Yes No If yes, what brand? _____

When was the last dose given? _____

14. When was your pet's last canine heartworm test or feline Leukemia test? _____

15. Where does this animal spend most of his/her time? Inside the home Outside the home

16. Has your animal bitten anyone in the last 20 days? Yes No If yes, please explain _____

17. Is your animal aggressive or fearful of strangers? Yes No

If yes, please explain in detail: _____

Norfolk SPCA Medical Service Request

Client: _____ **Patient:** _____

DOGS:	CATS:
Canine Neuter \$85-160 <small>*Varies by weight</small>	Feline Neuter \$55
Canine Spay \$90-165 <small>*Varies by weight</small>	Feline Spay \$75
Canine Bordetella \$18	Feline Distemper \$18 <small>*Required for surgery</small>
Canine Distemper/Parvo \$18 <small>*Required for surgery</small>	Rabies \$18 <small>*Required for surgery</small>
Rabies \$18 <small>*Required for surgery</small>	Feline Leukemia \$18
Canine Heartworm Test \$22 <small>*Required for surgery (10 mo. of age and older)</small>	FeLV/FIV Combo Testing \$27
Microchip \$30 <small>(Includes initial registration)</small>	Microchip \$30 <small>(Includes initial registration)</small>
Elizabethan Collar \$10-20 <small>*Based on size of animal DECLINED _____</small>	Elizabethan Collar \$10-\$15 <small>*Based on size of animal DECLINED _____</small>
Heartworm Preventative – Price Varies	Rabbit Spay \$75 Neuter \$65
Pre-Anesthetic Blood Work \$40-65 <small>(Strongly Recommended)</small>	Pre-Anesthetic Blood Work \$40-65 <small>(Strongly Recommended)</small>
<p><i>*The Norfolk SPCA requires animals undergoing surgery to have post-operative pain control.</i></p> <p>Post Operative Pain Medication for dogs and rabbits: (please circle): <u><25 lbs</u> \$5 <u>26-50 lbs</u> \$10 <u>51-100 lbs</u> \$15 <u>>100lbs</u> \$20</p> <p>Post Operative Pain Injection for cats: \$8</p> <p><i>There will be additional charges for dogs over 50lbs., undescended testicles, pregnant, in heat, post whelping females, hernia repair and pyometra.</i></p>	

Signature: _____ **Date:** _____

The following items are required to be current for surgery to proceed:

Dogs: Rabies vaccine, Distemper/Parvo vaccine and Heartworm Test.

Cats: Rabies vaccine and Distemper vaccine.

(Please initial) _____ If proof of vaccination and heartworm test is not provided, the Norfolk SPCA will make ***ONE*** attempt to obtain this information from the clinic designated to be the last provider of these services. If this attempt fails, the services required for surgery will be performed at the Norfolk SPCA and will be charged to the owner's account. The owner assumes all responsibility for the payment of these additional charges.

Clinic name where the last vaccines and heartworm test were performed: _____

Do not write below this line. For veterinary staff use only.

Dogs (Enter Date Administered)
 K9 DHPP(L) _____
 Rabies _____
 HWT _____

Cats (Enter Date Administered)
 FVRCP _____
 Rabies _____

POST-SURGICAL INSTRUCTIONS

1. You should **keep your pet indoors for 7 days** after surgery. This will enable you to carefully observe your pet's recovery, prevent complications, and react quickly if complications do develop.
2. **Restrict your animal's activity** for the next 14 days. DO NOT allow any running, jumping or excessive playing. This can cause swelling around the incision site and possibly cause the stitches to break. Should either of these occur, contact the Norfolk SPCA or your veterinarian immediately.
3. **Check the surgical incision twice a day** until completely healed. Look for swelling, redness or discharge. If you see any of these signs contact the NSPCA. If the incision should become dirty, gently clean the area with a warm soft washcloth.
4. **Do not allow any licking at the incision**. Licking will lead to infection or opening of the site. We recommend an e-collar to prevent licking. Your pet should wear the e-collar at all times for 7-10 days. If you expect your pet will lick at the incision, you can purchase an e-collar from us or your local pet store.
5. **DO NOT allow your pet to get wet** for 10-14 days. This includes bathing.
6. **NO human pain medications!** If you feel your pet is in pain, please call the Norfolk SPCA. We will prescribe a pain medication safe for your pet.
7. Your pet's sutures will be absorbed by the body as part of the natural healing process and do not need to be removed unless otherwise noted.
8. **Anesthesia may cause stomach upset**. A small amount of water and food can be offered in the late evening. It is common for some animals to have a depressed appetite for 24 hours. If your pet does not begin to eat and drink after 24 hours, call us or your regular veterinarian immediately.
9. Should you have any questions, concerns or problems with your pet after you take him/her home, we will be happy to help you. Please call us here at the Norfolk SPCA Veterinary Clinic at 622-3319 during our normal business hours (8am to 4pm) to schedule an appointment to have your pet seen by a doctor.

If you have an after-hours or life-threatening emergency that requires immediate attention, please call:

Blue Pearl Emergency
3645 S. Independence
Blvd., Virginia Beach

Greenbrier Emergency
1100 Eden Way N.,
Chesapeake

Bay Beach Vet Hosp.
4340 Virginia Beach
Blvd., Virginia Beach

The COVE
6550 Hampton Roads Pkwy
#113, Suffolk

(757) 499-5463

(757) 366-9000

(757) 340-3913

(757) 935-9111

Owners will be responsible for paying the cost of any and all veterinary care given by outside veterinarians.

Special Instructions:

Your signature indicates you have received a copy of these instructions and understand them.

Signature: _____ Date: _____

(Clinic Copy)

Proper Use and Fit for an Elizabethan Collar



The Elizabethan collar (E-Collar) is a proven medical device shaped just like a cone that fits around the pet's neck. It is used to keep your pet from biting, licking, scratching or rubbing at incisions, wounds and injuries while he/she heals. It works by acting as a physical barrier preventing your pet from reaching the site.

A proper fit is essential for the E-collar to be effective.

E-collars come in various sizes and can be adjusted to fit your pet's neck. A properly fitting collar should leave just enough room between the edge of the collar and your pet's neck to allow the comfortable insertion of 2-3 fingers into this space. The E-collar is attached to the pet by either his or her own collar or a gauze tie looped through the collar. If the collar is applied too loosely, your pet will easily be able to remove it. Too tight, it will choke your pet.

Most importantly, you need to consider the length of the collar. **While sitting at the base of the neck, the E-collar should extend 3-5 inches past the end of the nose.** If the collar is not long enough, your pet's tongue can extend beyond the collar and reach the site. A too-short collar will not prevent your pet from licking. See above pictures as guides.

Animals should be monitored while wearing the E-collar. You may find that even if the collar is fitted properly, your pet may be hesitant to eat or drink with the collar on. It is okay to remove the collar during meal times; please make sure to put it back on immediately afterwards. Also, depending on the size of your pet, some animals will find a way to use the end of the E-collar as a way to scratch at the site. If this happens, you may need to also put a t-shirt on your pet to cover the area. It is important to make sure your pet wears his/her E-collar consistently for the duration of the healing process.



Norfolk SPCA Veterinary Clinic
916 Ballentine Blvd., Norfolk, VA 23504
757-622-3319 ext. 122

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Owners will be responsible for paying the cost of any and all veterinary care provided by outside veterinarians.

Special Instructions:

Take Home Medications:

1.) CARPROFEN ____ MG: GIVE ____ TABLET(S) BY MOUTH EVERY ____ HOURS FOR THE NEXT ____ DAYS.

START THIS MEDICATION: TONIGHT TOMORROW AM () PM ()

2.) _____

_____ START THIS MEDICATION: TONIGHT TOMORROW AM () PM ()