



# Barbur Boulevard Veterinary Hospital

10629 SW Barbur Blvd  
Portland, OR 97219  
503-246-4226

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## Diagnostic/Medical/Surgical Authorization

I, the undersigned, owner or agent of admitted patient (pet's name) \_\_\_\_\_ hereby authorize the doctors and assistants of Barbur Boulevard Veterinary Hospital to administer such treatment as is necessary to perform \_\_\_\_\_ (a diagnostic, medical, or surgical procedure) and additional procedures as considered therapeutically and/or diagnostically necessary. I further understand that there is no guarantee of successful treatment. I certify that I have read and fully understand this authorization and that I understand why such diagnostic, medical or surgical procedure is considered necessary, as well as the advantages and possible complications, if any. I assume financial responsibility for all charges incurred and agree to pay in full at the end of the hospital stay.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Phone number)

### Pre-Anesthetic Blood Evaluation

All patients have a pre-anesthetic blood screen. This screen gives us information on your pet's overall health that will make anesthesia safer to administer.

### Pain Relief

We have incorporated pain relief into all of our surgery procedures to make patients more comfortable and to speed recovery. All patients will receive injectable pain medication while in the hospital. This is included in the surgery price. We recommend that your pet continue on pain medication for 3 days after surgery.

### ISO Microchip ID

We can microchip your pet during sedation for a price of \$35.00

If you would like this service please initial \_\_\_\_\_

**\* Please note: If your pet is in heat, overweight, or pregnant, there will be an additional fee. \***