Date:



Owner Name:		Phone # (today):			
Address:	City:		State:	Zip:	
Cat Name:	Circle:	MALE	FEMALE		
Color: Hair l	length (circle one): Shor	t Medium	Long Age (m	ust be less than 7 years):	
Owner Initials required: I have read and fol	lowed the BEFORE SUR	GERY INSTR	UCTIONS found or	website: Initial here	
When was the last time your cat ate? *KITT	FENS MUST EAT MORNI	NG OF SUR	GERY:		
Has your cat shown any signs of illness such	h as COUGHING/SNEEZI	NG/VOMITI	NG/DIARRHEA/CH	ANGE IN APPETITE?	
If yes, please explain:					
Is your pet on any medications or supplement	ents? If yes, please expl	ain:			
Has your pet had any previous reactions to	vaccines, medications,	or anesthes	sia? Ever had a seiz	ure? If yes, please explain:	
····· /···· /···· ··· / /·············	,			·····	
How many distemper vaccines has your cat	t had? Whe	n was the la	st vaccine?		
Has your cat been Rabies vaccinated?					
My cat's lifestyle is (circle one): Inside only					
Surgery Fees, please circle	\$105 pet female cat				
the surgery and any other	\$85 pet male cat				
services you want today.	\$30 Rabies vaccine-m	ust be 12 w	eeks or older and	at least 2.8# to receive Rabies	vaccine.
Surgery payable on-line	\$20 3-way/Distemper	vaccine-ca	n do at any age.		
prior or CASH day of			, .	ed ear tip, Rabies (if 12 weeks	) and 3-way vaccine
surgery. All services	\$20-\$35 ADDITIONAL	-		·· ·· ·· ·	
besides surgery is payable				worm/ear mite topical treatme	Initial here ONLY IF EAR
by CASH day of surgery.	\$10 Ear mite only top			,	approval:
	\$5 Nail trim				L

## ANESTHESIA/SURGICAL RELEASE FORM

Purple Cat Mobile Veterinary Clinic uses qualified staff and approved materials for all procedures performed. It is important for you to understand that the risk of injury or death, although low, is always present, just as it is for humans undergoing surgery. Please read the following and ensure you understand before signing your name:

- I, acting as owner or agent of the pet named above, hereby request and authorize Purple Cat Mobile Veterinary Clinic to surgically sterilize the animal named on the above portion of this form.
- I understand that the surgery I have elected presents some hazards, and that injury to, or death of, my animal may conceivably result, due to inherent surgical risks and the use of anesthetic drugs as required for this procedure.
- I understand my cat may be exposed to contagious diseases such as upper respiratory infection and fleas and these are preventable and Purple Cat recommends all cats be vaccinated at least 2 weeks prior to surgery and be current on flea preventative for best health.
- I understand the inherent risks of failing to maintain current vaccinations and waive all claims arising out of, or connected with, the performance of this operation due to such failure. I understand that if my pet develops respiratory infection or another infectious disease after surgery, I am responsible for treatment at my own cost.
- I certify that my animal is in good health and IS LESS THAN 7 YEARS OF AGE (TNR and farm cats excluded).
- I understand that Purple Vet staff may not perform a complete physical exam prior to surgery and that my animal will not receive preanesthetic bloodwork and waive my right to have these services performed prior to surgery at a full-service veterinarian.
- I understand that some factors significantly increase surgical risk, including, but not limited to, pregnancy, heat, respiratory infection, and diseases such as FIV, FeLV and FIP.
- I understand that if my animal is pregnant, the pregnancy will be terminated at the time of surgery.
- I understand that if my animal is in its third and final trimester of pregnancy, the surgery may be cancelled due to high risk of maternal complications. I UNDERSTAND IT IS ADVISED NOT TO SPAY FEMALE CATS IN THIRD TRIMESTER PREGNANCY DUE TO HIGH COMPLICATION RISK WHICH MAY RESULT IN DEATH.
- I understand that if my pet is anesthetized for surgery but found to already be spayed and/or neutered or found to be cryptorchid (male whose testicles have not come down into scrotum) and surgery is cancelled (we do not typically perform cryptorchid surgery (there will be a \$35 sedated exam fee.
- I hereby release Purple Cat Mobile Veterinary Clinic, all veterinarians, assistants, volunteers & employees from any and all claims arising out of, or connected with, the performance of this procedure or any adverse reactions from vaccinations. I agree that I have not and will not claim any right of compensation from them, or any of them, or file action by reason of such sterilization or attempted sterilization of such animal or any consequences related thereto. Owner/agent herby agrees to indemnify and hold Purple Cat Mobile Veterinary Clinic harmless for any damages caused during the transportation of the animal, or for any damages caused by any unforeseen events including fire, vandalism, burglary, extreme weather, natural disasters, and acts of God.
- I understand my animal will receive a small green tattoo on his/her underside to show that he/she has been sterilized.

DATE \_\_\_\_\_

SIGNATURE