

FEMALE – SPAY SELECT SERVICES

PET'S NAME: _____ AGE: _____

Owner's Last Name: _____

Individual Services:

CIRCLE **YES** for each service you request:

- YES**ULTIMATE - Spay PACKAGE - \$160.**
INCLUDES: Physical exam, Sterilization with pain medication, Feline Leukemia & Feline AIDS testing, FVRCP vaccine*, Rabies vaccine, Nail Trim, Ear cleaning, Ear mite treatment, Microchipping, Revolution® for fleas & intestinal Parasites / *add leukemia vaccine for \$10

- YES**VALUE – Spay PACKAGE - \$130.**
INCLUDES: Physical exam, Sterilization with pain medication, Feline Leukemia and Feline AIDS testing, FVRCP vaccine*, Rabies vaccine, Nail Trim, Ear cleaning / *add leukemia vaccine for \$10

- YES**Spay Surgery Only - \$75.**

- YES**Rabies Vaccine - \$10.**
 All animals are required to be vaccinated for rabies unless proof of prior vaccination is provided at time of check-in.

PRE-OPERATIVE CARE OPTIONS:

- YES.....**Pre-Op. blood work - \$32.**
 It is recommended that Pre-Operative blood work is done to rule out any problems that may cause complications to you cat.
 I decline additional Pre-Op. items

POST- OPERATIVE CARE OPTIONS

- YES **E-Collar - \$10.**
 It is recommended that an Elizabethan Collar is worn to prevent your cat from chewing or licking at surgical site. **If no e-collar is used & your pet opens their incision there is a \$30 re-suture charge**

- YES **Antibiotics – starting at \$15.**
 I decline additional items.

**I agree to pay in full for all services rendered at the time of discharge.
 Estimated cost may vary between \$_____ & \$_____**

- YES **FeLV/FIV Test - \$30.**
 Recommended for all cats but particularly those in multi-cat households. **For cats that test positive** for FeLV: This cat imposes a significant health threat to other cats. In this situation, euthanasia should be considered.

- YES **Revolution Treatment -\$16.**
 Treatment for fleas, ear mites, and internal parasites with Revolution®

- YES **Microchipping - \$20.**

- YES **Dewormer - Tapeworms - \$15.**

- YES **Dewormer- Roundworms/ Hookworms - \$10.**

- YES **Nail Trim - \$12.**

- YES **Ear Cleaning - \$10.**

- YES **Ear mites Treatment - \$10.**

- YES **Distemper (FVRCP) Vaccine - \$15.**

- YES **Leukemia Vaccine - \$15.**

- YES **Distemper Vaccine with Leukemia- \$25.**

ONLY for CATS Being TESTED for FeLV & FIV:

- If my cat is found **Positive** for **Feline Leukemia (FeLV)**,
 I would like to: Decline Euthanasia
 EUTHANIZE – See form below.

- If my cat is found **Positive** for **Feline Aids (FIV)** I would like to:
 Decline Euthanasia
 EUTHANIZE – See form below

Signature: _____ Date: _____

(ONLY TO BE SIGNED IF YOU AUTHORIZE EUTHANASIA) ~ RELEASE ~

Animal's Name: _____ **Color:** _____

I, the undersigned, do hereby certify that I am the owner or duly authorized agent of the animal described above, that I am 18 years or older, and that I do hereby give CEI Low- Cost Spay Clinic, its agents, servants and representatives full and complete authority to humanely euthanize the said animal and I do hereby and by those present forever release the veterinary facility and its employees from any and all liability for so euthanizing the said animal. I do also certify that to the best of my knowledge, the said animal has not bitten any person or animal during the last fifteen (15) days and has not been exposed to rabies.