

Date:

ID No:



PURPLE CAT

Mobile Veterinary Clinic

Name: _____ Phone # for today, must be available to answer: _____
Address: _____ City: _____ State: _____ Zip: _____
Cat Name: _____ Circle: MALE FEMALE
Color: _____ Hair length (circle one): Short Medium Long Age (must be less than 7 years): _____
Has your cat shown any signs of illness (circle all that apply): COUGHING SNEEZING VOMITING DIARRHEA LOW APPETITE
Has your cat ever had a seizure? YES NO If yes, please explain: _____
Does your cat have FLEAS? YES NO Date of last Flea treatment: _____
Is your pet on any medications or supplements? YES NO What: _____
Has your pet had any previous reactions to vaccines, medications, or anesthesia? YES NO If yes, please explain on back of page ->
Has your pet had any litters? YES NO If yes, how many? _____ When was the last litter? _____
When was the last time your pet ate? _____
My cat's lifestyle is (circle one): Inside only Outdoor only Inside/Outside Feral Barn cat
My cat's personality is (circle any that apply): Friendly Shy Wild Might bite WILL BITE Unpredictable
How did you hear about our clinic? _____
Surgery Fees, please circle: \$65 pet female cat
\$50 pet male cat
Cash or certified check only. \$15 Rabies vaccine (Note: must be 12 weeks or older to receive rabies vaccination)
\$10 3-way/Distemper vaccine (helps prevent upper respiratory infections)
\$55 Farm/feral/outdoor colony cat; includes mandatory ear tip, rabies vaccine (over 12 weeks age only) and distemper vaccine

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 certify that my animal has either been vaccinated with a 3-way/Distemper vaccine within 3 years prior to this date or I waive my right to protect my animal through previous vaccination. If I choose to vaccinate my animal today, I understand that it takes up to two weeks for vaccinations to fully protect my animal. 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 with no signs of respiratory infection or decreased activity or decreased appetite.
- I understand that Purple Cat Mobile staff may not perform a complete physical exam prior to surgery and that my animal will not receive pre-anesthetic bloodwork and I 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 (feline AIDS) and FeLV (feline leukemia).
- 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 examined and found to already be spayed or neutered, there will be a \$35 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 or medications. I agree that I have not and will not claim any right of compensation from Purple Cat Mobile Veterinary Clinic or any of their staff or volunteers, or file action by reason of such sterilization or attempted sterilization of such animal or any consequences related thereto. Owner/agent hereby agrees to indemnify and hold Purple Cat Mobile Veterinary Clinic harmless for any damages caused during the care 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: _____