Consent for Additional Dental Services If Needed

Because many oral diseases cannot be detected during routine physical examination, once your pet is under anesthesia, your doctor will complete a comprehensive oral exam carefully checking each tooth, evaluating the gums, and screening for oral cancer. Your doctor may find one or more teeth that may need additional periodontal treatment such as reducing pocket depth, or extraction if the teeth are mobile or diseased. These recommendations are made with your pet's long term health and pain-free quality of life in mind. In order to provide you with current and accurate prices, they are not listed below, but the form you sign will list up-to-date prices of services.

CHEM Pet's N	t SignatureDate
	signature confirms that you have read this information and understand it. At any luring your pet's treatment, you may ask for an updated estimate. Thank you.
	 I understand that my pet may be woken up with a problem tooth or teeth if I am not reachable, and may need an additional anesthetic procedure in the near futureInitial
3	If I cannot be reached by phone, I do not authorize any unforeseen dental
2	I prefer to be called before any additional procedures are performed, other than emergencies. If I cannot be reached , I authorize you to proceed with all necessary dental procedures.
1	I prefer that you proceed with all necessary dental procedures.
	e any additional dental services are considered necessary to restore health and save n the doctor's professional judgment, please select one of the following options:
Surgic	al Corrections
Gingiv	val surgery to remove pockets-Gingivectomy
Local	nerve block each
Extrac	tion minor
	tion major
•	nedication injection
	ain medications
	otic injection
	ntibiotics
	otic gel treatment (Doxirobe) radiographs each
	dditional 30 mins. of Isoflurane anesthesia
	home care kit-weekly sealant for 8 weeks
	application
	, but the form you sign will list up-to-date prices of services.
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