

Emergency Pre-Registration



ANIMAL EMERGENCY & SPECIALTY CENTER

Client Information

Name(s): _____

Address: _____

City, State, Zip Code: _____

Phone Numbers

Home: _____ Cell: _____ Work: _____

Pet Information

Pet's name: _____ Species: Canine Feline

Breed: _____ Age: _____ Sex: Male Female | Neutered Intact

Previous/Current Health Concerns: _____

Is your pet on any medications (please list all)?: _____

Who is your pet's regular veterinarian? _____

Additional Pet Information

Pet's name: _____ Species: Canine Feline

Breed: _____ Age: _____ Sex: Male Female | Neutered Intact

Previous/Current Health Concerns: _____

Is your pet on any medications (please list all)?: _____

Who is your pet's regular veterinarian? _____

CPR (Cardiopulmonary Resuscitation)/DNR (Do Not Resuscitate)

To allow for optimal treatment of your pet(s), all patients hospitalized at Animal Emergency & Specialty Center (AESC) are assigned a CPR code. This code enables AESC to carry out your wishes if it should become necessary during or following an emergency. CPR can add \$150 to the final invoice price.

If it becomes necessary during your pet's visit/stay, would you like us to administer CPR?

No, Do Not Resuscitate (DNR) Yes, Please Administer CPR

Financial Information

In the event that I am unreachable, I hereby authorize Animal Emergency & Specialty Center (AESC) to do what is necessary to stabilize my pet in an emergency situation. These measures may include (but are not limited to): Radiographs (X-rays), laboratory testing, and injection or pain medication administrations. These initial diagnostic/treatment measures may cost \$250-\$500. I understand that further testing may be necessary. A thorough exam will be performed by the staff veterinarian. Once you are reached by telephone, you and the veterinarian will create a comprehensive treatment plan for your pet, and an estimate will be prepared. You will be responsible for any charges incurred at the time of service.

Signature: _____ Date: _____