



## ***Welcome!***

Southern Arizona Veterinary Specialty & Emergency Center's purpose is to improve the quality of life for animals and the people who love them. Since 1994 SAVSEC has been serving the community by providing a multi-specialty veterinary and 24 hour emergency service with board certified veterinarians.

In this packet you will find all the information that you need for your pet's upcoming appointment. Please be sure to fill out the necessary forms and bring them with you the day of your appointment.

If there is anything further that we can assist you with, please call 888-3177 to speak with a Client Services Representative.

We look forward to serving you,

***Southern Arizona Veterinary Specialty and Emergency Center***

**Specialty Practice Hours:**

Monday – Thursday from 8:00am - 5:00pm at our central location.

Ophthalmology – Saturday 9:00am-12:00pm at our central location.

Tuesday – Friday from 8:00am-5:00pm at our east location.

**Emergency Services:**

24 hours 7 days a week

**What should I bring to the consultation?**

- *A copy of your pet's medical records and current blood work*
- *Radiographs (if applicable)*
- *Current Medications*
- *Your pet*

**What should I expect?**

New clients should arrive 20 minutes early to check in. A technician will obtain a brief medical history and your pet's vital signs. The veterinarian will examine your pet and discuss your pet's condition and further diagnostic and therapeutic options available. You will be provided with a cost estimate. If you and your pet are attending an appointment with a veterinary internist or abdominal ultrasound, please do not feed your pet 12 hours prior to your appointment. Water is allowed up until the time you arrive at the hospital.

Please call for instructions regarding pets with diabetes.

**Communication**

Our Client Services Representatives will be able to answer many of your questions, but please understand that they are not medically trained. Whenever a client services representative cannot answer your questions, a veterinary technician or the doctor will be consulted so that your inquiry is properly answered. If your pet is admitted for a procedure or critical care, the attending veterinarian will call you with an update each day.

**Payment Policy**

We will provide a cost estimate of our services before treating your pet. However, unforeseen circumstances may arise that influence your final bill. Payment in full is expected at the time services are provided. We accept payment by cash, check (with a valid drivers license), Visa, MasterCard, Discover, American Express and CareCredit.

Client Acct. ID:

Name:

Co-Owner:

Mailing Address:  
City, State, Zip:

Home Phone: ( )

Cell Phone ( )

Work Phone ( )

Employer:

Method of referral:

Referring Veterinarian:

Referring Veterinary Hospital:

Patient name:

Species:

Sex:

Breed:

Coat color:

Is your pet spayed or neutered? Yes No

Date of Birth:

Allergies:

Date of last vaccination:

List current medications:

Reason for visit:

Is this your first visit to our facility? Y/N

If not, who did you see on your last visit?

I hereby authorize the veterinarian to examine, prescribe for, or treat the above described pet (s). I assume responsibility for all charges incurred in the care of this animal. **I also understand that these charges will be paid in full at the time of release and that a deposit may be required for surgical treatment. Any patient's specialty hospitalized after 5pm will be transferred to the emergency department (adjacent to the outpatient building).**

Signature of Owner:

Date: