



## Pre-cautions before Medical Procedure(s) (CS-009E)

Animal's name: \_\_\_\_\_

Medical procedure(s): \_\_\_\_\_

Check-in location: 50A KI LUNG ST., P.E. / 24 KI LUNG ST., P.E. / 116 WHARF RD., N.P.

Check-in date: \_\_\_\_\_ (DD/MM/YYYY)

Check-in time: 09:00 am / 10:40 am / 12:40 pm

1. No food for the animal up to **10 hours** before the medical procedure(s); No liquid for the animal up to **3 hours** before the medical procedure(s);
2. If the owner(s) / duly authorized agent(s) / person(s) with statutory or other lawful authority over the animal (the "Owner") considers regular shower is essential for your animal, please do so a few days prior to the scheduled procedure(s), as the area to be incised (if any) should be kept dry after the procedure(s);
3. The Owner must inform your veterinarian before the procedure if the animal shows any signs or symptoms, such as cough, sneeze, runny nose, seizure, heart disease, or chronic disease etc.;
4. Please be on time for your animal's scheduled procedure(s) to allow sufficient time to proceed with testing or examination(s);
5. For any **alteration** or **cancellation** of appointment, please contact the Hospital with at least 3 working days of advance notice. The Hospital reserves the right to charge either partially or entirely the fees quoted for the procedure(s) and forfeit any deposit paid in whole if it is unattended without prior notice (Note: some procedures cannot be altered nor cancelled once they are confirmed);
6. If the Owner cannot be present to sign consent form(s) or other official document(s) on the check-in date, s/he must authorize a person (age of **18 years or over**) to present a filled and signed **Treatment Authorization Form** and any requested documents thereof stated, including the **HKID card copy of the Owner** and the authorized person's HKID card for verification. The Hospital reserves the right to cancel/ postpone any scheduled procedure(s) if the above document(s) cannot be shown;
7. Please bring along the Owner's HKID, animal's **vaccination record and dog license** (if any) for verification;
8. Please re-read in detail all terms and conditions in the Consent Forms or other official documents.
9. This list is non-exhaustive, and the Hospital reserves the right to add or amend the terms stated herein without any prior notice. It is the owner's responsibilities to ask any questions regarding hospitalization if in doubt.

Should there be any inconsistency or conflict between the English and Chinese versions of the Agreement, the English version shall prevail. Should you wish to refer to the English version of this form, please contact our receptionist or your attending veterinarian for a copy.