

Animal Emergency

Hospital of Redmond

Immediate Critical Care Estimate and Authorization

My pet is in need of immediate critical care. I understand that the doctors and staff of Animal Emergency Hospital of Redmond will **immediately begin diagnostics and treatment for my pet**. While I expect the procedures to be performed to the best of the staff's abilities, I realize that medical results cannot be guaranteed. I understand that the doctors and staff will keep me informed as best as possible while performing life-saving procedures and that a full estimate will be presented when time allows. However, **I authorize an immediate estimate of \$600-\$800**. I understand that this estimate may not be a complete representation of the final bill and that other diagnostics and treatments may be needed after the immediate life-saving measures. I understand that payment of these authorized charges is due at the time services are performed.

This immediate critical care may include:

- ◆ IV catheter and IV fluids.
- ◆ IV medications.
- ◆ Blood work.
- ◆ XRays.
- ◆ CPR.

I have read, understand, and agree to the preceding Authorization: _____ (initial).