



Sunset Canyon Veterinary Clinic

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HEARTWORM TEST WAIVER

I, (printed name of owner) _____, do hereby certify that I am the owner of:
(printed name of pet) _____

Sunset Canyon Vet Clinic **strongly** recommends testing for heartworms EVERY YEAR *even if on consistent monthly prevention* prior to prescribing heartworm medication. I acknowledge that my pet has been on prevention and has not missed any doses, is a current patient of SCVC, and has not developed any illnesses since last being examined.

*****Patient MUST have a current wellness exam on file within the last 12 months.*****

Please read and initial each line:

_____ I understand that it is possible for my pet to get heartworms *even if on monthly preventative*. This can be caused by forgotten doses, vomiting up medication unbeknownst to owner, inappropriate dosing or rarely, product failure.

_____ I understand that giving heartworm preventative to a dog that already has heartworms may cause serious illness and possibly death.

_____ I understand that by not testing for heartworms, or by purchasing medication from outside sources, I will void any manufacturer's compensation offered for treatment of heartworm disease in the event of product failure.

_____ I understand that declining the yearly heartworm test protocol will forfeit the manufacturer's guarantee for heartworm treatment, which can be \$1,000.00 or more.

I hereby waive the heartworm testing process and release the doctor and staff of **Sunset Canyon Veterinary Clinic** from any and all liability related to any reaction that may occur as a result of administering heartworm medication to an untested patient. Giving medication to an untested patient is considered "off-label" use and as such **Sunset Canyon Veterinary Clinic** resumes no responsibility for any adverse side-effects your pet may experience.

*****This signed release is only valid for one year.*****

PRINTED NAME OF OWNER _____

SIGNATURE OF OWNER _____ DATE SIGNED _____