

**Animal Surgical Care of Michigan**  
*a mobile small animal veterinary surgical service*

**Estimate Formulation Check List for Surgery**

**You add in your charges where \*\* are placed**

Surgical Procedure Cost (ASC) - see current Fee Schedule		\$ _____
Travel fee to your clinic if outside of Kalamazoo County		\$ _____
<i>Rate is \$0.60/mile roundtrip from ASC office</i>		
<i>(calculate from 6510 Belgian Ave, Kalamazoo, MI 49009—both ways)</i>		
Preoperative Bloodwork (see recommendations)		** _____
Duration of anesthesia (surgery time, pre and post-op time)		** _____
<i>(Contact Dr. Boswell for estimate of time)</i>		
Hospitalization		** _____
IV catheter and IV fluids during procedure		** _____
Monitoring and Technician time		** _____
Medications		** _____
Premedication	** _____	
Anesthetic induction drugs	** _____	
Postoperative analgesic medication	** _____	
Radiographs (depends on procedure – call for info)		** _____
Pre-op radiographs	____ views	
Post-op radiographs	____ views	
Prescriptions for Home Care		** _____
Analgesic Meds (2-4 weeks NSAIDs)	** _____	
Sedation (Tramadol for 1-2 weeks)	** _____	
Antibiotics	** _____	
+/- E-collar to go home	** _____	
+/- Additional tests (histopathology, culture, etc.)		** _____
+/- Expected rechecks exams (call to discuss recommendations)		** _____
+/- Follow-up radiographs		** _____
+/- Bandage Changes		** _____
<b>TOTAL (range)</b>		_____ to _____

Once completed it may be helpful to keep a copy of this estimate for future common procedures such as cruciate ligament repair or patella luxations.

Questions: please contact Dr. Boswell at 269-312-4227 or [surgeon@animalsurgicalcaremi.com](mailto:surgeon@animalsurgicalcaremi.com)