## Happy Paws Pet Clinic

## **Pet Vaccination Consent Form**

Having your pet immunized is vital as it protects them from life-threatening illnesses. Pet vaccination should not be taken lightly. In some cases, pets may contract serious diseases that may have been prevented.

However, not all vaccinations are necessary. Vaccinations to be administered may be based on your pet's age and the risk of exposure to certain diseases. Vaccinations given at the appropriate age and at the appropriate intervals will greatly benefit your pet and protect it against some life-threatening diseases. These are categorized as core and non-core vaccines. Depending on the kind of pet you have there are various core vaccines that may be needed by your pets. Core vaccines are those that prevent severe diseases as well as those with a high risk of transmissibility to humans. Non-core vaccines are given depending on the risk of your pet's exposure.

Recent studies show that revaccination may not be needed to be administered in an annual basis as vaccines may protect pets for a span of three years or longer. However, there are also vaccines that may cause an allergic or systemic reaction to your pet. Although most pets do not react adversely to vaccinations.

A series of questions shall be asked to understand the kind of vaccination needed by your pet. Please answer the questions below that may apply to your pet. Please take note that your pet will still be thoroughly examined prior to vaccination. In case your pet is found to be ill, we shall address the illness first prior to giving vaccination.

## **CONSENT**

I have read and fully understand the above information. I have had the opportunity to ask questions and by which I have received an answer to my satisfaction. I understand the risks in the administering of a vaccine and I assume the said risks and I hereby give my consent for having my pet vaccinated by the veterinarian. I shall report to the clinic any complications that might arise following the vaccination. I understand that any additional treatment may incur expense on my part.