



Veterinary Referral Form

(Sections A & B to be completed and signed by owner)

Section A: Owner Details

Name:	Contact No:
Address:	Email:

Section B: Animal Details

Name:	Breed:	Age:
Sex: Entire: Y/N	Pet's Insurer: (If Applicable)	Date Of Most Recent Vaccination:

Please read attached terms & conditions prior to signing

I declare that I am the legal owner of the above animal, that the details I have provided are correct and that I have read the attached terms and conditions.

Owners signature: _____ **Date:** _____

(Section C to be completed by referring Veterinary Surgeon)

Section C: Veterinary Surgeon Details

Name:	Contact No:
Address:	Email:

History of Condition: (Please attach further info if required)
Any Current Medications:
Any illness/conditions I may need to be aware of:
Expected outcome of Physiotherapy:

I refer the above animal for physiotherapy assessment and appropriate treatment and have provided an up to date clinical history

Veterinary Surgeons Signature:_____ **Date:**_____



TERMS & CONDITONS

Please read prior to signing referral form

1. All dogs must have a referral form signed by their owner and completed by their Veterinary Surgeon providing information of their pets condition, any other health issues and the expected outcome of physiotherapy treatment
2. All dogs must be up to date with their annual booster vaccinations and proof of such may be requested at any time.
3. Limerick Canine Physiotherapy recommends that dogs should receive regular health checks with their veterinary surgeon while undergoing physiotherapy treatment to monitor the condition being treated and to ensure they are fit to continue with treatment
4. Owners are required to inform us if, during a course of treatment the pet's condition worsens, if medication changes, or if the veterinary surgeon advises that the treatment should be stopped or suspended.
5. Dogs with infectious diseases such as skin, eye or ear infections or vomiting or diarrhoea will not be treated for health and safety reasons.
6. All sessions must be paid for on the day of treatment, including insured patients. If your pet is insured a detailed receipt will be provided for your insurance company.
7. Limerick Canine Physiotherapy reserves the right to refuse treatment to any dog.
8. Limerick Canine Physiotherapy reserves the right to reschedule/cancel any appointment.

Karen Kennedy, RVN, PgD Veterinary Physiotherapy

limerickcaninephysiotherapy@gmail.com

