

AquaPaws Hydrotherapy in conjunction with Herriot Veterinary Physiotherapy Trudie Gammon (MNAVP, RAMP) www.aquapawshydro.co.uk

Veterinary Referral Form

Owner Details

Name		
Address	Post Code	
Contact Number		
Email		

Vet Details

Referring Vet Surgeon	
Practice address	Post Code
Contact Number	
Email	

Preferred method of contact:

Patient Details

Name	Species	
Breed	Colour	
Gender	Neutered (Y/N)	
DOB	Weight (kg)	
Vaccination status	Insured (Y/N)	

Health Information

General condition	BCS	
Temperament		
Reason for Referral		
Pre-existing medical conditions		
and allergies		
Current medication/s		
Additional Notes:		
We also welcome you to send		
any resources which you believe		

will benefit the patients care, e.g. Radiographs.	

By completing and signing this form, I am confirming that this patient is under my veterinary care. I consider this animal suitable and hereby consent for them to undergo hydrotherapy at AquaPaws Canine Hydrotherapy (Northallerton) and veterinary physiotherapy carried out by Herriot Veterinary Physiotherapy.

I understand that the animal may be referred back to myself should it be deemed appropriate.

Vet Signature:

Date:

The data provided on this form will be kept securely for a maximum of 10 years in line with current GDPR requirements. For more details on how we will manage this data please visit <u>www.aquapawshydro.co.uk</u> and <u>www.herriotvetphysio.co.uk</u>