

# Veterinary Physiotherapy Referral Form

Please fill in the form below providing as much detail as possible and please forward a copy of the **full clinical history**. Completed forms can be emailed to [duncanvetphysio@outlook.com](mailto:duncanvetphysio@outlook.com) or posted to: *Duncan Veterinary Physiotherapy, 4 Scarsbrook Crescent, Chipping Norton, OX75WD*

**Client Name:** .....  
Title: .....  
Forename: .....  
Surname: .....  
**Client Address:** .....  
.....  
.....  
**Postcode:** .....  
**Contact:** .....  
**Email:** .....

**Referring Vet:** .....  
.....  
**Contact:** .....  
**Email:** .....  
**Practice Address:** .....  
.....  
.....  
**Postcode** .....

**Pet's Name:** .....  
**Species:** .....  
**Breed:** .....  
**Age:** .....  
**Weight (kg):** .....  
**Sex:** M/F      **Neutered?** Y/N

**Reason for referral (please provide as much detail as possible):**  
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.....



**Does the pet have any concurrent illnesses/injuries?**      Yes/No

**If yes, please provide details:** .....

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.....

**Is the pet currently on any medication?**      Yes/No

**If yes, please provide details below including dosage and frequency:** .....

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**Any additional comments/relevant information?**

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- I declare that I am the Veterinary Surgeon and the above named animal is under my care. As such, I have the legal authority to refer this patient for physiotherapy. I declare that the information provided is accurate & complete and the above named client has given permission for their details to be shared for this purpose.
- I, the Veterinary Surgeon, give permission for the above named animal to receive ongoing physiotherapy for the above named condition as deemed necessary by Duncan Veterinary Physiotherapy, and I understand that this patient may be referred back to me for further assessment and/or treatment if at any point the patient deteriorates or is deemed unsuitable for physiotherapy.

**Veterinary Surgeon's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return the completed form to [duncanvetphysio@outlook.com](mailto:duncanvetphysio@outlook.com) along with a copy of the patient's **full clinical history**.