





# Veterinary Physiotherapy Referral Form

<p><b>Diagnosis</b></p>	<p>Final Diagnosis:</p> <p>Affected limb/body part:</p> <p>Risk other limbs becoming affected: Y / N          If yes, which ones:</p> <p>Onset of Condition: Acute / Degenerative</p> <p>Date injury/symptoms appeared:          Date presented to the vet:</p> <p>Previous/Additional conditions:</p> <p>Clinical presentation at appointment:</p> <p>Diagnostics performed:</p> <p>Diagnostic findings:</p> <p>Surgery performed: Y / N          If yes, which surgery:          Date performed:</p>
<p><b>Declaration</b></p>	<p>This animal is a patient under my care and I consent to them receiving a physiotherapy assessment and any further relevant treatment including Laser Therapy. I authorise Three Shires Veterinary Physiotherapy to conduct physiotherapy as needed.</p> <p>Signature: .....</p> <p>Print Name: .....</p> <p>Date: .....</p>
<p><b>Vet Reports</b></p>	<p>Three Shires Veterinary Physiotherapy will supply vet reports after initial consultation and throughout the treatment programme as needed. A final report will be issued upon discharge from the physiotherapy programme. These will be supplied by email.</p>