



202-Burnt Ridge Road
Red Deer, Alberta T4S 0K6
Phone: **(403)347-1711**
1-877-282-8387
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INTERNAL USE ONLY

DATE RECEIVED:

RECEIVED BY:

SCHEDULED APPOINTMENT:

GENERAL REFERRAL FORM

REFERRING VETERINARIAN:

CLINIC:

DATE OF REFERRAL:

PHONE:

EMAIL:

CLIENT AND PATIENT INFORMATION

Owner's name: _____ Telephone: _____

Mailing address: _____ Postal code: _____

Patient's name/I.D.: _____ Breed: _____

Age: _____ Sex: _____

CHIEF COMPLAINT: _____

History and physical exam findings (*please be specific*):

Therapies and medications (*please be specific, date/response*):

Presumptive/Differential Diagnosis:

Special Request/Comments:

Radiographs attached? Yes ☐ No ☐

Is the animal insured? Yes ☐ No ☐

Insurer:

Phone:

*If this is an emergency referral, please call us as soon as possible. We offer 24 hours emergency service.

*Email this form to abvet@telus.net or fax it to (403)347-1029.

*** PLEASE ADVISE YOUR CLIENT TO CALL OUR NUMBERS TO SCHEDULE AN APPOINTMENT.**