



Austin Canine Rehab & Wellness

(512) 994-2410

(512) 768-4631

info@austincaninerehab.com

austincaninerehab.com



Veterinary Referral for Rehabilitation Services

Veterinary Clinic

Email Address

Client Name

Pet Name

We ask you to please include all pertinent medical information including medication profile, pre-existing conditions, diagnostic tests, or any other additional information relevant to the care of this patient.

Diagnosis/Surgeries:

Precautions/Contraindications:

Other Medical Conditions:

Medications:

Per Rule 573.14 of the Texas Administrative Code, the supervising Veterinarian will have established a veterinarian/client/patient relationship and determined that rehab services (an alternate therapy) under general supervision will not likely be harmful to the patient.

Supervising Veterinarian's Name

rDVM Signature

Date