



Client Referral Form

300 Unionville-Indian Trail Rd • Indian Trail, NC 28079 • 704-821-7161 • Fax 980-313-8188

Client Info.

Client Name _____

Phone Number(s) _____

Email (or alt. contact) _____

Patient Information

Patient Name & Signalment _____

Chief Complaint/ Diagnosis _____

Concurrent Condition(s) _____

Current Rx & Tx _____

Tx Goals _____

Special Considerations / Precautions _____

Referring Veterinarian

Doctor's Name _____

Practice Name _____

Office Phone _____ Office Fax _____

Email _____

How would you prefer to receive patient updates?

Phone Fax Email Other _____

Just a reminder: Please send pertinent medical records, lab results, and radiographic findings to CarolinaVetREC@gmail.com or fax to 980-313-8188.

Thank you for your referral - we look forward to working with you to help this client & patient.