

Lisa Cleeton  
Veterinary Physiotherapy



www.spinesandshiatsu.co.uk



**Vet Referral & Consent Form**

Client Name & Address \_\_\_\_\_  
\_\_\_\_\_

Animals name \_\_\_\_\_

Animal's species \_\_\_\_\_ Animals breed \_\_\_\_\_ Animals age \_\_\_\_yrs

Vets Diagnosis/Nature of Problem \_\_\_\_\_

What Veterinary Treatment has or is currently being given for this condition: \_\_\_\_\_  
\_\_\_\_\_

Please detail any medication the animal is on: \_\_\_\_\_

Any precautions/contraindications/specialist instructions?: \_\_\_\_\_  
\_\_\_\_\_

Vets name & qualifications \_\_\_\_\_

Vet Practice & address \_\_\_\_\_  
\_\_\_\_\_

Is consent given for the above named animal to be treated by Lisa Cleeton, Veterinary Physiotherapy, McTimoney-Corley Spinal Therapist & Shiatsu Practitioner?

*Please circle: Yes / No*

*If consent not given please give details: \_\_\_\_\_*

Please email this form back to: [lisavetphysio@gmail.com](mailto:lisavetphysio@gmail.com)  
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