

Veterinary Authorization for Chiropractic Care

Please return this form by email or bring with you to your appointment.

The form must be completed prior to your animal receiving chiropractic care. I understand that Dr. Miranda Patterson is a Doctor of Chiropractic, licensed in the care of humans. She is certified in animal chiro-practic by the International Veterinary Chiropractic Association, after over 200 hours of additional education. I understand that animal chiropractic is **NOT** intended to replace traditional veterinary care and is considered a non-standard or complimentary therapy and is intended to be used in conjunction with the veterinarian's recommended care. Dr. Miranda is **NOT** a veterinarian and cannot take responsibility for the primary care of any animal. Dr. Miranda has or will explain the risks involved in animal chiropractic care to the owner's satisfaction prior to starting care. Part of this 'risk' is that there can be no guarantee as to the nature of their animal's condition or the outcome of any procedure. As the Veterinarian, I am referring the listed patient/s to Inner Compass Chiropractic for chiropractic treatment by Dr. Miranda. Veterinarian Signature Date Altered Animal's Name **Breed** Weight Age Sex Client's Information Name Phone City Address State Zip **Fmail** Referring Veterinarian Information Name (Printed) Phone Clinic Name Email Current diagnosis/being treated for Previous health history Treatment to date Please list any contraindications to care Enclosed: ☐ Radiographs \square Radiograph report(s) \square Laboratory results ☐ Advanced imaging

Would you like a copy of each session sent to you via email? Veterinarian: \square Yes \square No

□ Other

Thank you for your cooperation in helping provide chiropractic care for your patients and clients.

Please feel free to contact us at any time and we will remain in communication regarding your patient's ongoing care.

☐ Advanced imaging report(s)