

Veterinary Referral for Hyperbaric Oxygen Therapy

FAX TO: **604-242-1660** EMAIL TO: **ANIMALHOSPITAL@RAPSBC.COM**

All animals will have a physical exam prior to receiving hyperbaric oxygen therapy. Full medical files not required.

CONSULTING VET FIRST NAME	CONSULTING VET LAST NAME
PHONE NUMBER	EMAIL
Pet's Information	
PET'S NAME	SPECIES (CAT, DOG, OTHER)
BREED	COLOUR
GENDER	
MALE - NEUTERED	FEMALE - SPAYED
PET'S CONDITION	
REASON FOR REFERRAL	
WILL THIS PET REQUIRE SEDATION?	MEDICATION ON BOARD
YES NO	