

Physiotherapy Treatment and Consent Form

Animals Name:				
Breed:	Age:	Sex:		
Height:	Colour:	Work:		
Referring Vet:				
Name & Address of Owner:				
Tel:	Mobile:	Email:		
Account to: Name & Address				
Tole				
Tel:				
Is the animal Insured Yes/No				
Insurance company:				

To ensure high standards of treatment and care I will:

- Explain to you how physiotherapy can help your animal, including the benefits and risks associated with treatment.
- Undertake an assessment prior to commencing any treatment and explain the results of this assessment to you.
- Explain the treatment to be provided during each physiotherapy session.
- Maintain contact with your veterinary surgeon during the course of treatment.
- Upon completion of treatment, appropriate management advice will be provided. A written discharge summary will be sent to your veterinary surgeon.

If, for any reason, you are unhappy about your treatment, you:

- Should inform me immediately to see if the matter can be resolved informally.
- Are entitled to make a complaint. Complaints are treated seriously and your complaint will be dealt with promptly and professionally in accordance with my Complaints Policy.
- Can view your treatment record at any time.
- Can refuse further treatment.

I, THE OWNER/AGENT* OF/FOR* THE ANIMAL ABOVE, HEREBY GIVE MY CONSENT FOR PHYSIOTHERAL	PΥ
ASSESSMENT AND A COURSE OF TREATMENT OF THE ABOVE ANIMAL. *delete as necessary	

SIGNED:	 DATE:	