

DOUBLE M CHIROPRACTIC, LLC VETERINARY REFERRAL SHEET:

Dr. Mark A. McCann
2419 Charmany Way, McFarland, Wisconsin 53558
Phone: 608-219-0073

Dear Doctor:

Thank you for your referral for chiropractic care. If we are unable to see positive results within a few treatments we will be sending the animal back to your for more diagnostic work or other follow up care. In order to evaluate an animal we must first have a written veterinary referral from a licensed Wisconsin Veterinarian. He hope this from will make that process easier for you. Any medical records you have pertaining to examination findings, diagnosis, or history of injury or illness will be of great value to us. Again thank you for your referral.

I, Dr. _____,
of _____ **clinic, Phone:** _____
am referring my client (Clients name and animal's name please) _____

For chiropractic evaluation and treatment by Dr. Mark A. McCann.

The animal has been diagnosed with:

I am including the following records with this referral:

- yes** or **no** - Radiographs (please indicate the number of films _____)
- yes** or **no** - Copies of medical records regarding this diagnosis
- yes** or **no** - Myelogram
- yes** or **no** - MRI Reports

Other (please list)

Signed : _____ **Date :** _____

Comments :

