|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Philip Leverhulme Equine Hospital, Leahurst**  **Referral Form** | | | | **Case No:** |  | |
| **Clinician:** |  | |
| For office use only – please complete sections below | | | | **Resident:** |  |  |
| Previous Case No(s): |  |  |  |  |  |  |
| Client Code: |  | Animal No: |  | Enquiry Date: |  | |



**Referring Practice Details**

|  |  |  |
| --- | --- | --- |
| Referring Vet: |  | Practice Tel No: |
| Practice Name & Address: |  | Practice Fax No : |
|  |  | Vet Mobile: |
| Post Code: | Email Address: |  |

**Owner's Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Title: | First name: | Surname | Home Tel No: |
| Address & Post Code: | |  | Mobile No: |
| Email Address: | | | Work No: |

**Animal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME:** | Age: | Sex: | Breed: |
| Colour: | Height: | Use: |
| Presenting complaint/Relevant History: | | | |
| **Specific Services / Clinicians Required?** | | | |

**Please remember to include a referral letter and any relevant medical history and images.**

|  |  |  |  |
| --- | --- | --- | --- |
| **VACCINATIONS** | **INSURANCE** | **I INFORMATION** | |
| Flu: Yes  No/Unknown | Insurance Co\*: |  | Policy No: |
| Tetanus: Yes  No/Unknown | Type of insurance: | Claim No: | |
| Other: | Amount of cover:  Claimed so far: | Excess: | |
| Any known drug reactions: |  |  | |

\*If your client is uninsured, please advise that a deposit of £750 will be payable on admission, and the balance must be settled in full on discharge.

|  |  |
| --- | --- |
| Client’s preferred dates/days: |  |
| Unavailable Dates/days: |  |
| Any other relevant information: |  |

For routine elective referrals please email this form to [recep@liverpool.ac.uk](mailto:recep@liverpool.ac.uk)

**All emergency referrals can be made by telephone: (0151 794 6041)**

**For office use only**

|  |  |  |  |
| --- | --- | --- | --- |
| Referral Date: | Time: | Discharge Date: | Time: |
| Passport Seen/Signed/Completed | Yes  No/Unknown | Appointment Confirmed |  |