



# Rehabilitation Therapy New Patient Intake Form

Thank you for choosing 1st Pet for your pet's Rehabilitation Therapy. Please fill out and email this form as soon as possible (preferably 48 hours before appointment):

[drilindgren@1stpetvet.com](mailto:drilindgren@1stpetvet.com)

The one to call – 24/7

Client Information
Name
Phone Number
Referring Doctor
Doctor Phone number

Pet Information
Pet Name
Breed
Date of Birth
<input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Female <input type="checkbox"/> Spayed

Desired Therapy Goals / Outcomes

Activities Requiring Assistance (Please describe as much as possible)	
<input type="checkbox"/> Walking <input type="checkbox"/> Getting up <input type="checkbox"/> Getting into car <input type="checkbox"/> Urination/defecation positioning <input type="checkbox"/> Other _____	Describe:

Current Daily Activity (frequency and length of walks, etc.)
Describe:

Home Flooring (types of flooring your pet walks on regularly)	
<input type="checkbox"/> Carpet <input type="checkbox"/> Tile/hardwood <input type="checkbox"/> Linoleum/vinyl <input type="checkbox"/> Stone <input type="checkbox"/> Other: _____	
Is your pet slipping or having trouble getting up on slick surfaces (hardwood/tile)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your pet maneuver stairs on a regular basis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, does s/he have any difficulty?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Current Diet (Please include regular food, treats, and primary protein source)

Product Type/Brand	Form (i.e. kibble, canned, etc.)	Frequency

## Current Supplements (Please include joint supplements, vitamins, fish oils, etc.)

Product Name/Brand	Dose	Frequency

## Current Medications (Please include all prescribed and routine meds—heartworm preventative, flea/tick preventative, etc.)

Product Name/Brand	Dose	Frequency

## Other Medical Conditions (Past or present)

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## Prepare for the Visit (When possible, the following will help us provide a more accurate diagnosis and effective treatment plan)

- Record video of behavior/movement changes (especially useful for shy/fearful pets that might not show normal behavior in the office)
- Make sure the referring doctor has sent previous medical records

Thanks! We look forward to working with you and your pet!



# Rehabilitation Therapy Authorization and Policies

Thank you for choosing 1st Pet for your pet’s Rehabilitation Therapy. Please fill out and return it to one of the staff during your visit or email it before your visit:

[drindgren@1stpetvet.com](mailto:drindgren@1stpetvet.com)

The one to call – 24/7

## Authorization and Waiver

1st Pet Veterinary Centers has disclosed to me the nature of holistic and complementary therapies and rehabilitative veterinary medicine. I authorize 1st Pet to use the recommended rehabilitative and complementary treatments on my pet.

I understand that 1st Pet’s recommendations and treatments of my pet constitute no guarantee of results. I further understand that 1st Pet’s recommendations and treatment are based, to some degree, on the information that I supply.

In consideration of the foregoing, I waive and release any and all rights, claims, and causes of action I have or may have against 1st Pet and its affiliates, officers, directors, employees, representatives, successors and assigns, that may arise as a result of any of 1st Pet’s recommendations or treatment of my pet, including, but not limited to any hydrotherapy, therapeutic exercise, or other treatments or care.

I agree that there are inherent risks to me associated with the use of 1st Pet facilities arising out of or associated with use and conditions such as wet floors, exercise mats, therapy equipment, and other pets. In consideration for 1st Pet granting me permission to use their facilities, I agree to release 1st Pet from liability arising out of or associated with such use, and hereafter waive any and all claims which may arise out of or be associated with such permissive use of the facilities.

Initials

## Policies

### Cancellations, Late Arrivals, and Missed Appointments

We request that in situations requiring appointment cancellation that we receive at 24 hours notice. This allows us to provide that appointment time to another pet in need.

Appointments for late arrivals will be shortened to meet the scheduled completion time unless time is available to enable an extension. Appointments arriving more than 10 minutes late may need to be rescheduled to avoid disrupting the appointments of other patients.

We understand that emergencies arise and appreciate you keeping us informed of unforeseen circumstances.

### Financial

Payment is due in the form of cash, personal check, any of the major credit cards, or by using one of our available financing options (for those who qualify).

All services purchased and fulfilled are non-refundable. We will be able to refund the price for any unused services due to medical issues or unforeseeable circumstances.

Products purchased at 1st Pet may be returned for a full refund if they are unopened and returned within 30 days of purchase.

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## Health & Safety Requirements

Pets must be clean, well groomed (including trimmed nails) and parasite free, with no signs of fleas, ringworm, mange, or contagious diseases before coming to 1st Pet for treatment. 1st Pet reserves the right to refuse pets based on these criteria.

All pets must be restrained by a leash or placed in a kennel or carrier prior to entering 1st Pet and must remain so while in our facility unless being treated by a veterinarian or animal rehabilitation therapist. This is for our pet's safety and the safety of other pets and clients.

Rehabilitation and clinic equipment is to be used only by or under the supervision of the staff in caring for our patients. Do not attempt to use, climb, jump, or balance on any of the rehabilitation or clinic equipment you may encounter during your visit. Do not enter another treatment room, hydrotherapy room, rehabilitation therapy room, or other room in the center unless escorted by a staff member.

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## Medical Emergencies

Should an accident or medical problem occur while your pet is boarding with us for the day, half day, or the treatment time, and immediate intervention is needed, a 1st Pet veterinarian shall oversee necessary treatment and contact you and your primary care veterinarian as soon as possible.

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## Underwater Treadmill Appointment Times

Hydrotherapy sessions in the underwater treadmill are scheduled in 30-minute blocks. At the end of the treatment and within the 30-minute timeframe, the animal rehabilitation therapist will rinse and towel dry your pet. At this time we do not have the staff or facilities to provide a full bath and/or blow dry. Appointments for late arrivals will be shortened to meet the scheduled completion time unless time is available to enable an extension. Appointments arriving more than 10 minutes late may need to be rescheduled to keep from interrupting the appointment times of other patients that are scheduled for treatment later in the day.

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## Multimedia Release

1st Pet often records photographs and videos of patients while at the clinic for the purposes of education, promotion, or advertising. Please select one of the following options:

- I authorize the use of my pet's image or likeness for these purposes.
- I do not authorize the use of my pet's image or likeness for these purposes.

Initials

## Agreement

**I have read, understand, and agree to the above 1st Pet waiver and policies.**

Print Full Name

Signature

Date