



Animal Chiropractic New Patient Intake Forms: Page 1 of 3

CLIENT (YOUR) NAME: _____ **DATE:** _____

ADDRESS: _____

CITY, STATE, & ZIP: _____

HOME PHONE: (____) _____ - _____ **CELL PHONE:** (____) _____ - _____

E-MAIL: _____ **REFERRED BY:** _____

PATIENT (ANIMAL) NAME: _____ **MALE** ___ **FEMALE** ___

SPAY/NEUTER: YES ___ NO ___ **AGE:** _____ **DATE OF BIRTH:** _____

SPECIES: DOG ___ CAT ___ OTHER: _____ **BREED:** _____

COLOR/IDENTIFYING MARKS: _____

REASON FOR THIS TREATMENT: _____

HISTORY OF ANY MAJOR HEALTH PROBLEMS OR SURGERIES: _____

RECENT CHANGE IN BEHAVIOR? IF SO DESCRIBE. _____

IF PET HAS A CONDITION OR ILLNESS, LIST OTHER DOCTORS SEEN AND PREVIOUS DIAGNOSES: _____

MY PET'S DIET IS THE FOLLOWING: _____

MEDICATIONS?: _____

SUPPLEMENTS?: _____

Animal Chiropractic New Patient Intake Forms: Page 2 of 3

CHIROPRACTIC EXAMINATION & TREATMENT CONSENT FORM AND CLIENT VERIFICATION OF CONCURRENT TRADITIONAL VETERINARY CARE.

I, owner of the animal described below, and being 18 years of age or older, do understand, substantiate, and authorize the following:

1. Dr. Erin O'Connor is a Doctor of Chiropractic. She has attended several hundred hours of education specific to animal chiropractic, and has been board certified by the American Veterinary Chiropractic Association.
2. Dr. Erin O'Connor is NOT a veterinarian, and cannot take responsibility for the primary care of my animal.
3. Chiropractic care is NOT intended to replace traditional veterinary care, but is considered a Complimentary Therapy, to be used concurrently and in conjunction with my veterinarian's care.
4. I understand that there is minimal research supporting the clinical efficacy of Animal Chiropractic, and that some aspects of my animal's care may be used in future data.
5. Dr. Erin O'Connor has explained to me the scope of her care, and described the procedures she will perform on my animal. I understand those procedures and acknowledge that they agree with the American Medical Association's (AVMA) description of animal chiropractic as follows:

"Veterinary chiropractic is the examination, diagnosis, and treatment of non-human animals through manipulation and adjustments of specific joints. The term "veterinary chiropractic" should not be interpreted to include dispensing medication, performing surgery, injecting medications, recommending supplements, or replacing traditional veterinary care. While sufficient research exists documenting efficacy of chiropractic in humans, research in veterinary chiropractic is limited. Sufficient clinical and anecdotal evidence exists to indicate that veterinary chiropractic can be beneficial. It is recommended that further research be conducted in veterinary chiropractic to evaluate efficacy, indications, and limitations. The assurance of education in veterinary chiropractic is central to the ability of the veterinary profession to provide this service. Veterinary chiropractic should be performed by licensed veterinarians; however, at this time, some areas of the country do not have an adequate supply of veterinarians educated in veterinary chiropractic. Therefore, it is recommended that, where the state's practice acts permit, licensed chiropractors educated in veterinary chiropractic be allowed to practice this modality under the supervision of, or referral by, a licensed veterinarian who is providing concurrent care."

6. Dr. Erin O'Connor has explained the risks involved with the animal chiropractic care to my satisfaction, and I realize that there can be no guarantee as to the nature of my animal's condition, or the outcome of any procedure.

I hereby authorize Vitality Animal Chiropractic, and in particular, Dr. Erin O'Connor, chiropractic physician, to treat my animal with animal chiropractic. I certify that my animal has had routine, traditional veterinary care, and my current veterinarian is:

Hospital: _____ Phone #: _____

Veterinarian (if your pet sees a specific doctor): _____

I certify that I have been open and honest with Dr. Erin O'Connor as to any and all other examinations, diagnostic tests, diagnoses, and treatments for my animal's conditions. I have read this authorization form, understand it, and give my consent.

Patient (Animal) Name: _____ Breed: _____

Owner's Name: _____

Signed: _____ Date: _____



Animal Chiropractic New Patient Intake Forms: Page 3 of 3

Approval for Use of Animal's Case

Animals have been getting adjusted since chiropractic began in 1895. However, it wasn't until the 1980's when this method of healthcare underwent revival and began being recognized by the American Veterinary Medical Association as an alternative or complementary therapy for animals.

Today there are about 1,000 animal chiropractors in the U.S. who are certified by the American Veterinary Chiropractic Association. While many people have found that the benefits of animal chiropractic have helped their pet, animal chiropractic lacks the amount of research that "people chiropractic" has.

We would like to ask your approval, should we decide to use your pet's case, for our continued efforts in providing research in animal chiropractic.

Please choose **ONE** of the following:

YES: You may use any or all of my pet's case for your needs, such as chiropractic case studies, posting patient cases online, or for use in educational purposes in animal chiropractic seminars.
(Last name will never be used.)

LIMITED: You may use my pet's case for chiropractic case studies only.

NO: You may not use my pet's case for any of the above mentioned.

Owner's Name: _____

Pet's Name & Breed: _____

Owner Signature

Date