



10810 Harney St.
Omaha, NE 68154
Phone: 402-934-1332
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Referral Form

Would you like someone from our staff to contact the owner?

Has the owner been instructed to call Sirius Vet to schedule an appointment?

Referring Veterinarian: _____

Clinic Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ Fax: (____) _____

Email: _____

Client's Name: _____ Phone Number: _____

Patient Name: _____ Age _____ Breed _____

Sex: Female__ Spayed__ Male__ Neutered__

Tentative diagnosis-Reason for referral:

History (Duration of problem, symptoms):

On medications?(Antibiotics, NSAIDs, pain reliever) Yes ___ No ___

Rx Type (include date started and dosages)

Did you email: Medical Records Radiographs Lab work U/S MRI CT
(please attach copies of results if available)

Did you tell owner: Bring medical records Bring X-rays Bring special diet food
Bring medications No food after midnight water ok

THANK YOU FOR YOUR REFERRAL, THE SIRIUS VET TEAM