



Henderson Animal Hospital

1434 Henderson Highway. Winnipeg, MB Canada R2G 1N4
Phone (204) 339 9295 Fax (204) 338 9245 Text (204) 400-5924
e-mail: reception@hendersonvet.ca
Website: <http://www.hendersonanimalhospital.ca>

Ultrasound Referral Form

The patient below has been scheduled for an Ultrasound. Please have the referring Veterinarian complete this form.
Please then fax or email this form along with any x-rays, recent blood work ups and medical hx to:
Fax# 204-338-9245 or reception@hendersonvet.ca

Referring Clinic:	Referring Veterinarian:
Client's Name:	Client's Phone number:
Client Address:	Patients name
Age:	Species:
Weight:	Breed:
	Behavior: Muzzle needed? Yes or No If caution needed, please explain:

Medical History and Clinical Findings:

What questions would you like answered?

Thank you for your referral. We will contact you with any urgent findings ASAP, and will forward a report by fax or email within 72 hours of appointment.