



Healing Center For Animals

606 Post Road East - Westport, CT 06880

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info@healingcenterforanimals.com

www.healingcenterforanimals.com

Please fill out this entire questionnaire and fax in or mail, along with the diagnostics and blood test results from your veterinarian. Upon completion of faxing all the information, please call us to confirm that we have received all the information needed. Please print with black ink and clearly so we may read and understand your animals needs.

Personal Information

Full Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Office Phone _____

Cell Phone _____ Other Phone _____

Email Address _____

Credit Card # (MC/VISA/DISC/AMEX) _____

Name On Card _____ Exp. Date _____

Patient Information

WARNING: Speak with your Veterinarian before vaccinating your pet. If they suffer from a compromised immune system or are in a fragile state of health, consider the possible side affects. Vaccinate with intelligence, then detoxify!

Pet's Name _____ Canine _____ Feline _____ Male _____ Female _____

Breed _____ Date of Birth _____

Spayed/Neutered Date _____ Weight _____

Veterinarian's Name _____

Veterinary Hospital _____

Vet's Phone _____ Vet's Fax _____

Please Indicate Which Service You Are Contacting Us About (Check One).

*Phone Consultations Require a 24-Hour Notice Of Cancellation, or \$25.00 Fee Will Be Applied to the account.

* If you are doing NBT's on multiple animals you will receive a 10% discount on any additional animal.

<p>_____ Nutritional Blood Test with Consult (Fee - \$450)</p> <p>Blood To Be repeated in 3 months Supplements Not Included Questionnaire & Blood Work from your Veterinarian (CBC – Superchem – T4 – LDH) are Required to complete the NBT.</p>	<p>_____ Nutritional Blood Test without Consult (Fee - \$250)</p> <p>Blood To Be repeated in 3 months Supplements Not Included Questionnaire & Blood Work from your Veterinarian (CBC – Superchem – T4 – LDH) are Required to complete the NBT.</p>
<p>_____ Follow-UP Nutritional Blood Test with Consult (Fee - \$350)</p> <p>Blood To Be repeated as needed Supplements Not Included Questionnaire & Blood Work from your Veterinarian (CBC – Superchem – T4 – LDH) are Required to complete the NBT.</p>	<p>_____ Follow-UP Nutritional Blood Test without Consult (Fee - \$200)</p> <p>Blood To Be repeated as needed Supplements Not Included Questionnaire & Blood Work from your Veterinarian (CBC – Superchem – T4 – LDH) are Required to complete the NBT.</p>
<p>_____ Phone Consultation with Dr. Bob (Fee - \$300)</p>	<p>_____ Multi Animal Phone Consultation with Dr. Bob (Limited to two animals - Fee - \$400)</p>
<p>_____ Bereavement/Emotional Healing with Susan (Fee - \$125 per half hour)</p>	<p>_____ Diet Workup/Diet Consultation with Susan (Fee - \$75 per half hour)</p>
<p>_____ Fax or Email Review/Reformulation (Fee - Starts at \$50)</p>	<p>_____ Consultation With Your Animals Veterinarian (Fee - Starts at \$50)</p>

Questions About Your Pet

1. What is the specific condition, disease or diagnosis or your pet?

2. What specific tests were done to obtain this condition/diagnosis? (If healthy N/A)

3. What is your pet's current diet? (Include any table scraps. home cooked foods and treats)

**4. What supplements (if any) is your pet receiving?
(Vitamins, Minerals, Homeopathic, Enzymes, Antioxidants, Phytonutrients etc...)**

5. Is your pet currently taking any medications? If so, what is the specific name and dosage?

**6. Is your pet currently receiving any type of therapy?
(Acupuncture, Medical. Surgical. Chemotherapy, Radiation, Cortisone, etc...)**

**7. What is your pet's vaccination history? Be specific and include dates when possible.
You may also fax this information into us.**

8. In your opinion, what is your pet's emotional status and history?

9. Please add any additional comments or questions below.
