

## **UCD Veterinary Hospital**

University College Dublin, Belfield, Dublin 4



## Direct Vet Hub\* Tel (01) 716 6200 Direct Vet Hub\* Email: <u>vethub@ucd.ie</u>

(\***Note**: The Vet Hub contact information is for referring veterinarians only and should not be given to clients)

General Hospital number: (01) 716 6002 Web: <u>http://www.ucd.ie/uvh</u> Fax (01) 716 6005

## **Advice Request Form**

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Veterinary Surgeon's Name								
Practice Name					Town			
Phone number(s)	Work:			Mobile:				
<b>Time most likely to be available to take advice call?</b> (Please inform your staff that you are expecting a call from UCD.)								
Advice topic								
Are you likely to refer this patient to the UCD Veterinary Hospital? (yes/no)								
Please indicate if advice is required urgently (yes/no):								

## Patient details (if relating to a specific patient):

Client Name**				Clie	nt contact	number**		
Has this animal been admitted to the UCDVH previously?			If yes, UCDVH patient number?					
Name of Animal				Spe	cies			
Age	Sex	Breed			Colour		Weight	
NB: Please write a SUMMARY of the relevant history. Case records WILL NOT be accepted. Please attach lab reports and radiographs where applicable.								
Details of Data Sent (Please attach to email when submitting this form)	Laboratory reports: Radiographs taken:	YES / YES /	NO NO					
Current medication								

\*\*Client name/contact number will only be used for registration purposes if the patient is subsequently referred in to the UCD Veterinary Hospital.

Question details:	
Your main question (e.g. advice on approach/management/ specific treatment)	
Other comments	

For UCD use only:

Name of clinician returning advice call: