



HOLISTIC CARE INFORMATION & RELEASE FORM

Holistic care is a treatment option the Cardiff Animal Hospital & Wellness Center can provide for your pet. Some clients come to us because they prefer a holistic approach for their pet's medical care. Oftentimes, however, our holistic clients bring us their pets who are already in a severe state of degeneration or weakness. Some of these cases are pets with severe arthritis, cancer, advanced organ failure (liver, heart, kidney, etc.), and other medical or surgical conditions that are not suitable for western treatment modalities. Miracles can... and do happen!!! But it is important to remember that with ANY type of medical care, **there are NO guarantees that a particular treatment regime will improve a patient's condition or symptoms.**

The ability to provide holistic care at the Cardiff Animal Hospital & Wellness Center has taken a tremendous amount of time and effort to achieve. We require that our holistic clients make a commitment to us, and to their pet. There must be a bond of trust and commitment between the doctor and you, the client, in order to ensure the best possible results for your pet's condition and symptoms. YOUR commitment may involve frequent visits to our hospital, at home exercises and stretches (after chiropractic adjustments), herbal and vitamin administration, frequent updates on your pet's progress, diet changes, and even the addition of western medications if the doctor feels this is in the best interest of your pet's condition.

I authorize the following treatment modalities for my pet:

- | | | | | | |
|-----------------------------|------------------------------|-----------------------------|--|------------------------------|-----------------------------|
| (1) Veterinary Chiropractic | <input type="checkbox"/> Yes | <input type="checkbox"/> No | (4) Nutritional Support | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (2) Veterinary Acupuncture | <input type="checkbox"/> Yes | <input type="checkbox"/> No | (5) Essential Oils | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (3) Herbs/Nutraceuticals | <input type="checkbox"/> Yes | <input type="checkbox"/> No | (6) Veterinary Homeopathy
(Dr. Laflin only) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

I understand that at my initial appointment, I am to bring in all of my pet's previous medical records, past X-rays, blood test results, and urine test results. In addition, I understand that you may wish to repeat some of these same tests to update my pet's medical history and obtain a current picture of my pet's health/wellness. These updated diagnostic tests will aid in making a diagnosis and thus an appropriate treatment plan for my pet's condition/symptoms. Yes No

I understand the time and financial commitment that is required for holistic care and I am willing to try this form of medical care. I understand that ONE visit may not show the results that I would like. If possible, I will be committed to at several sessions [before "giving up"]. Yes No

I understand that I will be charged for phone consults if I choose to follow-up via telephone for herbal, nutritional, or homeopathy sessions. I understand that these charges are for the time spent by the doctor to research specific remedies for my pet. Yes No

I realize there are no guarantees with any of these treatment modalities. I also understand that in some cases my pet may appear to get worse for 3-4 days after a visit. This is especially true in severely debilitated or weakened older patients. In spite of these warnings I am still willing to try the above treatment modalities. Yes No

I, _____, am over the age of eighteen and am the owner of _____. I understand that this agreement will be a permanent part of my pet's medical record.

Client's Signature: _____ Print Name: _____ Date: _____