



Lake County Veterinary Clinics, PLLC
Patient Referral Information

Date of referral: \_\_\_\_\_

Referring Doctor: \_\_\_\_\_ Referring Hospital: \_\_\_\_\_

(Hospital Phone#): \_\_\_\_\_ Referring office email for referral letter: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Owner's Phone: (Hm#)/(Cell#): \_\_\_\_\_

Owner's Address: \_\_\_\_\_ Owner's Email: \_\_\_\_\_

Pet's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Weight: \_\_\_\_\_ Breed: \_\_\_\_\_

Referred for: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Brief history of current problems: \_\_\_\_\_

Diagnostic Test Results (PLEASE ATTACH A COPY OF MOST RECENT BLOOD TESTS, LAB RESULTS, AND RADIOGRAPHIC FINDINGS): email to: info@lakecountyyvet.com

Treatments & Medications Administered (list ALL drugs prescribed, including dosage and duration):

\*Please Instruct Pet Owners to Continue to Give all Medications as Previously Prescribed and have diabetic patients bring insulin the day of the procedure\*

Doctors:

- Grace Brown, DVM
Michael Overend, DVM
Lucy Grina, DVM

Periodontics, Oral Surgery,

Orthodontics, Endodontics, Crowns,

Restoratives & Intraoral Dental Radiography

Office Locations:

- Two Harbors Clinic: 557 Scenic Drive, Two Harbors MN 55616
Grand Marais Clinic: 4 Gene's Way, Grand Marais, MN 55604
Email: info@lakecountyyvet.com

