



**CAROLINA
VETERINARY
SPECIALISTS**



Referral Form

Appointment:

DATE _____ TIME _____

DOCTOR _____

Please follow these directions:

- Go directly to hospital listed below to be seen on **emergency** basis
- Call the number listed below and make **appointment** with:

MATTHEWS, NC

4099 Campus Ridge Road, Matthews, NC 28104
Phone: 704.815.3939 | Fax: 704.815.3940
Email: matthewsreferrals@carolinavet.com

- CARDIOLOGY
- EMERGENCY MEDICINE
- INTERNAL MEDICINE
- MEDICAL ONCOLOGY
- NEUROLOGY
- OUTPATIENT ULTRASOUND ONLY
- FULL CONSULT WITH ULTRASOUND
- RADIATION ONCOLOGY
- SURGERY

CHARLOTTE, NC

2225 Township Road, Charlotte, NC 28273-3903
Phone: 704.504.9608 | Fax: 704.504.9606
Email: charlottereferrals@carolinavet.com

- EMERGENCY MEDICINE
- INTERNAL MEDICINE
- OPHTHALMOLOGY
- OUTPATIENT ULTRASOUND ONLY
- FULL CONSULT WITH ULTRASOUND
- SURGERY

HUNTERSVILLE, NC

12117 Statesville Road, Huntersville, NC 28078-9278
Phone: 704.949.1100 | Fax: 704.949.1101
Email: huntersvillereferrals@carolinavet.com

- AVIAN AND EXOTIC PETS
- FULL CONSULT WITH ULTRASOUND
- EMERGENCY MEDICINE
- INTERNAL MEDICINE
- SURGERY

ROCK HILL, SC

760 Addison Avenue, Rock Hill, SC 29730
Phone: 803.909.8300 | Fax: 803.327.1698
Email: rockhillreferrals@carolinavet.com

- EMERGENCY MEDICINE
- SURGERY

Patient Information:

PATIENT / PET NAME _____ BREED _____

AGE _____ SEX _____

OWNER NAME _____

CONTACT INFO _____

Referring Veterinarian:

VETERINARIAN _____

HOSPITAL / CLINIC _____

PHONE NUMBER _____

EMAIL ADDRESS _____

Medical Records:

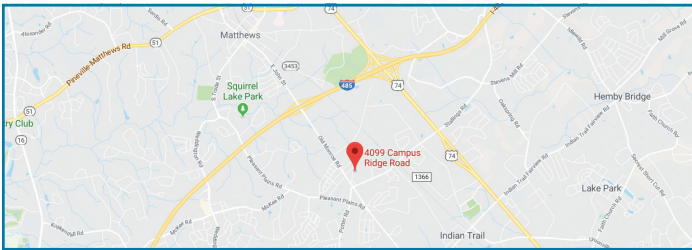
- MEDICAL RECORDS PROVIDED
- MEDICAL RECORDS SENT SEPARATELY
- RADIOGRAPHS EMAILED
- CLIENT TO BRING RADIOGRAPHS AT APPOINTMENT

Brief Medical History:



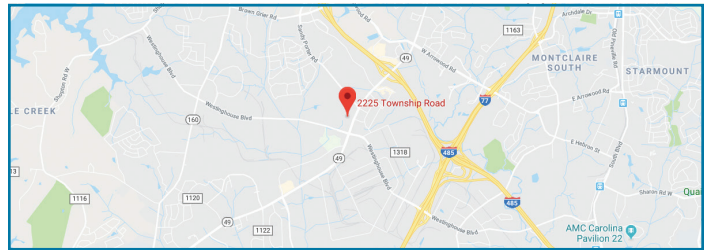
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Carolina Veterinary Specialists Locations



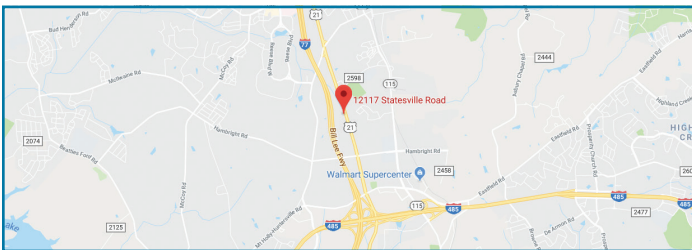
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For more information visit: carolinavet.com