



Marilucy Quiñones, D.V.M., M.S.
Diplomate American College of Veterinary Surgeons

REFERRAL AGREEMENT

Dear Client:

You have referred here as an extension of your veterinarian's care, to offer your pet the best possible care and treatment. **You are here because your pet's condition is not routine.** We will realize the appropriate test and give the best treatment possible for your pet's individual needs. When we have done all that we can and hopefully your pet is doing better, **you will return to your regular veterinarian.** A report will be faxed, mailed or emailed to your veterinarian once the case is either completed or achieved an appropriate state.

I understand that my pet has been referred to **Dr. Marilucy Quiñones, a board certified surgeon specialist,** for help with specific problem. **I further understand that primary care and routine vaccinations will continue to be performed by my regular veterinarian.**

Please sign bellow indicating your understanding of my role in your pet's care.

Owner's Signature _____

Date: _____