



BARNYARD CHIROPRACTIC

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THIS FORM MUST BE COMPLETED PRIOR TO INITIAL TREATMENT. CHIROPRACTIC CARE DOES NOT REPLACE TRADITIONAL VETERINARY MEDICINE, AND ALL ANIMALS ARE REQUIRED TO BE UNDER VETERINARY CARE.

HORSE INFORMATION

NAME		BREED	COLOR
DOBIAGE	<input type="checkbox"/> COLT <input type="checkbox"/> FILLY <input type="checkbox"/> GELDING <input type="checkbox"/> MARE <input type="checkbox"/> STALLION		APPROX WEIGHT

CLIENT CONTACT INFORMATION

OWNER	PHONE	EMAIL
MAILING ADDRESS:		
TRAINER <i>(IF APPLICABLE)</i>	PHONE	EMAIL
BOARDING FACILITY <i>(IF APPLICABLE)</i>	PHONE	EMAIL

TREATING VETERINARIAN & CLINIC INFORMATION

CLINIC NAME	PHONE
EMAIL	FAX

I ACKNOWLEDGE THAT MY CLIENT WOULD LIKE THEIR HORSE TO RECEIVE CHIROPRACTIC CARE.

VETERINARIAN (NAME PRINTED)

SIGNATURE

DATE

PRIMARY VETERINARY DIAGNOSIS

CURRENT MEDICATIONS

WOULD YOU LIKE TO RECEIVE A COPY OF THE CHIROPRACTIC REPORT BY EMAIL? YES NO

ENCLOSED RADIOGRAPHS

RADIOGRAPHIC REPORT(S)

LABORATORY RESULTS

ADVANCED IMAGING

ADVANCED IMAGING REPORT(S)

Dr. Natalia LaVallie is a licensed chiropractic physician in Illinois (Lic. # 038.013140) and maintains certification in animal chiropractic with the Animal Chiropractic Certification Commission (Cert. # 1317). She carries malpractice and liability insurance specifically for the administration of chiropractic care to animals (ChiroSecure Pol. #COVC2020).