VCA CAVES Referral Form

The specialists at VCA Capital Area Veterinary Emergency & Specialty work closely with primary care veterinarians on behalf of their patients in need of advanced medical, surgical or diagnostic services. Our specialists work as a team with Primary Care providers and communicate directly and promptly to enhance the relationship between the veterinarian and the client, allowing the best possible patient care.

Date: _____

Service and Specialist Requested:

_____ Surgery: Krista Gazzola, DVM, DACVS
_____ Internal Medicine: Casey Dropkin, DVM, DACVIM
_____ Pain Management & Acupuncture: Lauren Duffee, VMD, DACVAA, CVA
_____ Radioactive Iodine Therapy (I-131): Dr David Carabetta, DVM, DACVECC-SA
(I-131 referrals must be submitted through **referrals987@vca.com**)

Outpatient Ultrasound: For imaging only referrals (Jessica Morgan, DVM, DACVIM), do not complete this form.
Please complete the MVI referral form at mvi-ne.com/forms. This service is for diagnostic imaging only.

If you have an emergency transfer or urgent referral, please call the hospital to speak directly with a doctor so we can facilitate assisting your client as quickly as possible 603-227-1199.

Referring Veterinarian: _____ Clinic: _____
Phone: _____ Email: _____
Client Name: _____ Client Email: _____
Address: _____
Cell Number: _____ Work: _____ Home: _____
Patient Name: _____ Temperament: _____ Age: _____
Check one: ❒ Male-neutered ❒ Male-intact ❒ Female-spayed ❒ Female-intact
Tentative diagnosis or chief complaint:

Brief Summary of Case (Diagnostics, Response to Therapy, Reason for Referral):

Please include the patient's vaccination certificate with the referral information and forward one to two years of the patient's information to AU987@vca.com
Please note: We require all medical records as this helps us reduce additional testing or fees whenever possible.
Please send records to **au987@vca.com** when submitting this form to ensure the promptest service for your patient.
However, if this is an I-131 referral, please send record to **referrals987@vca.com**

Medical Records	**Lab Results**	**Radiographs**
❒ Emailed	❒ Emailed	❒ Emailed

❒ Routine referral: For routine check-ins with our specialists, the client can contact us directly.

❒ Urgent referral: Contact your specialist coordinator (above) for the soonest availability for your client

For information on how we collect and use information about you and your pet, and how you may opt-out of some uses, please see our Privacy Policy at vcahospitals.com/privacy-policy

vca animal hospitals SPECIALTY CARE

© 2026 VCA Animal Hospitals, Inc. VCA and CareClub are registered trademarks of VCA Inc. or its affiliated companies. CL0703FO987-01