

VCA Causeway Animal Hospital
1315 North Causeway Boulevard
Metairie, LA 70001-4131
Tel.: (504) 828-2700
Fax: (504) 828-9210



Surgery Referral Information

Referred by: _____

Referring Hospital: _____

Address: _____

Phone: _____

Email: _____

Fax: _____

Please contact our office at (504) 828-2700 prior to transferring your patient. Thank you for your referral.

Please send the following with your client or email directly to Dr. Lemarié (rose.lemarie@vca.com)

* Radiographs

* Ultrasound pictures

* Pertinent medical records

* Labwork

* Treatments prescribed or performed

Client/Patient Information:

Client Name: _____

Home Phone: _____

Spouse: _____

Cell Phone: _____

Pet Name: _____

Species: _____

Age: _____

Breed: _____

Sex: Female Male Spayed/Neutered

Tentative Diagnosis: _____

History & Exam: _____

Comments: _____
