



**Happy Tails Chiropractic, LLC**  
**Dr. Alyse LaGuardia Hall, CVSMT**  
**2105 E Clairemont Ave**  
**Eau Claire, WI 54701**  
**715-579-5509**

**Prior Authorization Form For Veterinary Spinal Manipulative Therapy**

Owner's Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Animal's Name \_\_\_\_\_ Age \_\_\_\_\_  
Presenting Problem \_\_\_\_\_

FOR SMALL ANIMALS PLEASE ATTACH VACCINE RECORD

Rabies Vaccine date \_\_\_\_\_

I refer this patient to Alyse LaGuardia Hall, DC (Certified Veterinary Spinal Manipulative Therapist) for concurrent and follow up chiropractic care, with the understanding that she will in NO way do anything that is construed as the practice of Veterinary Medicine, will refrain from doing anything deleterious to this animal patient, will notify me immediately if there is any indication of negative reactions or if they observe anything which would be considered by a normal person to be unusual or that might lead to further problems with the animal's health. Failure to abide by this referral agreement will result in termination of this referral and absolve the referring veterinarian from any liability associated with the actions of Dr. Alyse LaGuardia Hall. Dr. Alyse LaGuardia Hall will make regular soap notes and have them available to the referring veterinarian upon request to become part of the patient's permanent record.

Referring Veterinarian's Name \_\_\_\_\_ Vet License# \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Alyse LaGuardia Hall, DC: \_\_\_\_\_ License #: WI 5157-12

Dr. Alyse LaGuardia Hall carries animal chiropractic liability insurance  
and a copy is available upon request.

