



Homeopathic Consultation Intake and Consent Form for Pets

Animal Patients Name: _____ Date of Birth: _____

Breed: _____ Age: _____ Weight: _____ Sex: M F

Guardian Name: _____

Address: _____

Phone: _____ Cell: _____ Email: _____

Veterinarian: _____ Phone: _____

What are the Chief Complaints in order of priority for your pet? Since When?

Can you trace the origin of your pets illness to any particular circumstance, accident, illness, incident or mental upset? (eg. shock, worry, dietary, overexertion, weather)?

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What makes the problems better or worse?

What time of day is the problem the worst?

List any bowel changes (colour, frequency, consistency, behaviour):

List any behavioural changes:

What fears does your pet have?

How does He/She react to new people?

Any past/present skin conditions?

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Diet:

Brand: _____ Changes in eating pattern: _____

Amount: _____ Likes/Dislikes to eat: _____

Water intake: amount and temperature preferred: _____

Where does your pet like to sleep and in what position?

Has your pet been spayed or neutered?

Please list any major surgeries your pet has had in the past including dates:

Has your pet had any injuries? If so, when?

What vaccinations has you pet had? Was there any adverse reactions? If so, what were they?

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Please list any medications your pet is currently on, including homeopathic or natural remedies.

Client Acknowledgement

Medical/Professional Waiver

I fully understand the Eryn Atton is not a veterinarian and I am not here for veterinary diagnosis. If my pet has any health problem, condition or disease, I am now being advised not to postpone or delay seeking medical advice from a licensed doctor of veterinary medicine. I understand and agree that any service rendered by a Homeopath is not designed to take the place of veterinary care.

All suggestions regarding homeopathic remedies are part of a program to help the body normalize itself, to build and maintain wellness and to support total wellbeing. They are not intended for the treatment of specific disease.

In consulting with Eryn Atton I am exercising my right to choose a complimentary method of treatment through which to address my pet's health. I agree to pay all fees presented in the current rate schedule, payable to Eryn Atton directly on the date of appointment. I also understand the fees for services rendered are non-refundable.

Payment can be made by cash, credit card or interact at the end of each visit. Official receipts will be issued at time of paid service.

I have read and understand all the information outlined above.

Guardian Signature: _____ Date: _____

Eryn Atton, HOM, DCHM
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Fee Schedule

Adults:

Initial Consultation (90 - 120 mins)	\$175.00
Follow-Up Consultation (30 - 45 mins)	\$ 60.00

Children (12 years and under):

Initial Consultation (60 - 90 mins)	\$150.00
Follow-Up Consultation (30 mins)	\$ 50.00

Pets:

Initial Consultation (60 - 90 mins)	\$150.00
Follow-Up Consultation (30 mins)	\$ 50.00

Acute Treatments:

For conditions such as flare-ups of chronic conditions, colds, flus, infections, minor injuries (sprains, strains, bone breaks, pre/post surgery)	\$ 30.00
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Telephone or Skype Consultations:

It is preferable to have initial consultations in person but for situations where that isn't possible, Skype and Telephone Consultations are also available for the same price.

Payment:

All fees are payable via Cash, Debit, Visa or Mastercard at the time of your visit.

Cancellation Policy:

Missed appointments or cancellations made with less than 24 hours notice will be charged 50% of the appointment fee.

All services/consultations/goods are subject to 13% HST.

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