



# BURLINGTON EMERGENCY & VETERINARY SPECIALISTS

www.bevsvt.com 200 Commerce Street, Williston, VT P (802)863-2387 F (802)863-2348 bevs@bevsvt.com

24/7 ER/SPECIALTY CARE

24-hours/7-days a week  
Emergency/Critical Care &  
Specialist Referral Hospital

### Emergency/Critical Care

Tom Hecimovich, DVM  
Jodi Halpin, DVM  
Amanda Rutter, DVM  
Lisa Kiniry, DVM  
Rachel Orlovski, DVM  
Lisa Quinn, DVM

### Internal Medicine

Bryan Harnett, DVM  
Diplomate ACVIM

Amy Cordner, DVM  
Diplomate ACVIM

### Oncology

Joanna Schmit, DVM, MS  
Practice Limited to Oncology

### Surgery

Garrett M. Levin, DVM  
Diplomate ACVS

Helia Zamprogno, DVM, PhD  
Practice Limited to Surgery

### Rehabilitation

Pamela Levin, DVM, CVA, CCRT

### Acupuncture

Pamela Levin, DVM, CVA, CCRT

### Radiology

Todd Henrikson, DVM  
Diplomate DACVR

## REFERRAL FORM

Clinic Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

### Emergency Room Release Preferences:

- Call me at (     ) \_\_\_\_\_ at  
\_\_\_\_\_AM / \_\_\_\_\_PM for review
- Continue care at BEVS
- Send client and patient to my office

Referred to: Emergency Surgery Internal Medicine Oncology Rehab/Acupuncture

Outpatient Ultrasound (does not include IM consult)

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (H): (     ) \_\_\_\_\_(W): (     ) \_\_\_\_\_(C): (     ) \_\_\_\_\_

Patient Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

Sex: Male Female Spayed/neutered: Yes No

Presenting Complaint:

History:

Physical Exam Findings:

Related Laboratory and/or Radiograph Results:

Medications / Treatment Schedule: (include dose and time last administered)

Differential Diagnosis / Reason for referral: