



CLIENT & HORSE

THERMOGRAPHY INTAKE FORM



CLIENT NAME: Linda Stenerson  
 CLIENT ADDRESS: 7910 Camino Del Rey  
 CLIENT CITY: Bonsall CLIENT STATE: CA CLIENT ZIP: 92003  
 CLIENT PHONE: (H): 760-703-6457 (C): \_\_\_\_\_  
 CLIENT EMAIL: Smokeyred@aol.com

HORSE NAME: Fergie  
 BREED: Quarter Horse COLOR: SORREL AGE: 7  
 GENDER: Mare DISCIPLINE: Barrell  
 HORSE STABLED AT: Bonsall  
 VETERINARIAN: DR. Daniel Grove  
 LAST VISIT (approximate): June 5, 2013  
 REASON FOR VISIT: Injected hocks & coffin joints on fronts

CURRENT MEDICATIONS:

FARRIER: Kasey Kinkade LAST VISIT: May 26, 2013  
 WORK DONE: on TRACK video

SHORT HISTORY ON HORSE: (include any lameness issues, saddle issues, soreness etc.)

Hip problems, Blistering hips, hocks injected, won't hold right lean, pain on right side?

If lame; how long: \_\_\_\_\_  
 TREATMENTS: \_\_\_\_\_

REASON FOR SCAN: \

**NOTE: Please complete intake form to the best of your ability. The information provided in this form will help the evaluating Veterinarian/Farrier to better understand the patient and can help direct recommendations based on previous or noted conditions. You can email directly to your thermographer or bring completed form to survey.**