

**GENERAL SUPERVISION REQUEST FOR THERAPEUTIC MASSAGE CARE**

I, \_\_\_\_\_, (owner) hereby request authorization for the massage care of patients:

- |    |    |
|----|----|
| 1) | 3) |
| 2) | 4) |

I understand that massage is considered under the state law to be an alternative (nonstandard) therapy. Further, I request for the massage services to be provided by Kerry Smith under the general supervision of the veterinarian listed below.

\_\_\_\_\_

Owner

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I, \_\_\_\_\_ (supervising veterinarian) in compliance with Rule §573.14 have performed the following tasks:

- Established a valid veterinarian/client/patient relationship;
- Examined the animal(s) to determine that massage will not likely harm the patient;
- Obtained a signed acknowledgment by the patient's owner (see above) that massage is considered under state law to be an alternative (nonstandard) therapy and this copy has been placed in the animal(s) file.

Therefore, I hereby authorize Kerry Smith to provide massage care as needed for the patient(s) identified above under my general supervision.

\_\_\_\_\_

\_\_\_\_\_

Supervising Veterinarian

Date

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

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

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Kerry Smith has completed both advanced trigger point courses with Ken Bain and can be contacted at 832-257-9599 or hyperbordercollie@gmail.com