



Official Complaint Form

Date: _____

Name: _____

Mailing address: _____

Email address: _____

Phone number: _____

Veterinarian(s) or registered veterinary technician(s) against whom the complaint is against:

Name of the veterinary hospital: _____

Your Signature: _____

Summary of the complaint

Please attach your summary to this form. It is recommended to include as much detail as possible, such as the name, age, sex, and type of animal that the complaint involves. Try to list the dates the animal was seen at the veterinary clinic, any tests that were run, results of any tests, what you were told by the veterinary team about your animal's health, and what you were told about the prognosis for your animal. Please include any conversations with the veterinary team that you feel we should know about. Also include information on anything you feel was not offered to you or was not done for your animal. If you have a copy of the medical record, please attach it to this document in addition to your summary.

