

**Advice Request** 

**Animal Cancer Centre** 

## Please return to: Oncology Service

Please note: This service provides medical consultation for **non-urgent** advice to **VETERINARIANS ONLY**.

ATTENTION: Oncology Technicians fax: 519-837-8428

Veterinary Clinic Information			
Date Submitted:			
	Phone Number:		
Fax Number: Email Address: _			
Primary Contact Veterinarian:	_ Alternate Contact Vete	erinarian:	
BEST TIME TO RETURN YOUR CALL:			
Patient Information			
Breed:	Sex:	Age:	
Diagnosis:			
to date (if any) and response to therapy. Do not forward enti Please enclose any cytology or histopathology results.	re files / medical recore	ds as these will not be reviewe	d.

Please include original copies of pertinent laboratory data (Cytology, Histopathology results).

Total number of pages included in fax: \_

Requests for advice will be returned by telephone (in most cases) or fax **between 9am and 5pm**. We strive to respond to all consults **within 3-5 business days**.

This consultation service is intended to provide information, advice and guidance regarding feline and canine oncological issues. The information provided by the consultants is an educational service only. Regarding individual patients, the consultation service does not replace the primary care veterinarian's independent judgment regarding the appropriateness of a diagnosis and the risks and benefits of a procedure or treatment. All health care decisions are the responsibility of the primary care veterinarian. The Ontario Veterinary College Teaching Hospital, Department of Clinical Studies and individual consultants are not responsible or liable for any course of treatment, diagnosis, service or products instituted or recommended by the primary care veterinarian.