GENERAL SUPERVISION REQUEST FOR THERAPEUTIC MASSAGE CARE , (owner) hereby request authorization for the massage care of patients (NOTE: please list all your dogs; your vet retains a copy so I cannot add dogs at a later date): 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 Tracy Dulock under the general supervision of the veterinarian listed below. Owner signature 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 a copy has been placed in the animal's(s') file(s). Therefore, I hereby authorize Tracy Dulock to provide massage care as needed for the patient(s) identified above under my general supervision. Date Supervising Veterinarian signature Veterinarian Name/Practice Name: Address: _____ Telephone: _____ Fax: _____ Email:

Note: Tracy Dulock is a Licensed Massage Therapist in the state of Texas. She has over 200 hours of training in canine massage in addition to her human massage training. Tracy can be contacted at 254-498-1158 or wacotxusa@yahoo.com.