

Contact/Foster: Chris

Phone #: 612-859-3383

Invoiced

50786

Rescue: FW Ever Home Rescue Acct. # 6800

Scanned

Patient Name: Annie
Breed: terrier mix

Sex: FE Age: 7-8 mos
Color: _____

Microchip





DATE: <u>10-22-14</u>	CVT: <u>AS PG</u>	Appointment time: _____	Check-In CVT: <u>AS</u>
Doctor: <input checked="" type="checkbox"/> Dr. Jacobson <input type="checkbox"/> Dr. Patton <input type="checkbox"/> Dr. Wilcox <input type="checkbox"/> Dr. Freitag		<u>No food this morning.</u>	

Today's Visit: Plan

Reason for today's visit: spay + vax's

Vitals	Weight: <u>39.</u>	Temp: <u>101.3</u>	Pulse: <u>140</u>	Resp: <u>sniffing</u>
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Vaccines	Tests	Labwork	Services
<input checked="" type="checkbox"/> DAPP <u>1 of 2</u> <input checked="" type="checkbox"/> Rabies # <u>11299</u> <input type="checkbox"/> Bordetella <input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Heartworm 4Dx <input type="checkbox"/> HW Antigen only <input type="checkbox"/> Ear Smear <input type="checkbox"/> Fecal <input type="checkbox"/> Giardia Snap _____ <input type="checkbox"/> Other _____	<input type="checkbox"/> Profile Prep <input type="checkbox"/> Profile Full <input type="checkbox"/> CBC <input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Spay <input type="checkbox"/> Neuter <input type="checkbox"/> Dental <input checked="" type="checkbox"/> Microchip <u>- foster to bring.</u> <input type="checkbox"/> Nail Trim <input type="checkbox"/> Other _____

Exam:	N= Appears Normal AB=Abnormal		Exam Notes
1: Pain/Site 10 Scale: _____	N	AB	 
2: Body Score: 5 Scale: _____	N	AB	
3: General Appearance:	N	AB	
4: Digestive System:	N	AB	
5: Musculoskeletal:	N	AB	
6: Circulatory System:	N	AB	
7: Respiratory System:	N	AB	
8: Integumentary System:	N	AB	
9: Genitourinary System:	N	AB	
10: Nervous System:	N	AB	
11: Lymphatics:	N	AB	
12: Special Senses:	N	AB	
13: Other Findings	N	AB	

Preventatives	Go Home Medications
<input checked="" type="checkbox"/> Virbantal <u>1 tablet</u> <input type="checkbox"/> Pyrantal _____ <input type="checkbox"/> Iverhart/Heartgard _____ <input type="checkbox"/> Frontline/Advantix _____ <input type="checkbox"/> Other _____	<u>Carprofen 75mg x 3</u>

Recommendations: Too young for Heartworm testing.
Booster Distemper vaccine in 3-4 weeks.

Rescue Group Canine Surgery/Procedure Flow Sheet

LABORATORY TESTS

SX CVT: PGWt: 39#PRE-ANESTHETIC #1 #2 none

Other Lab Tests Performed: _____

Results Reviewed by DVM: _____ (Initial)

FLUIDS: SQ IV : Catheter Size _____ g Location: _____

Type: _____ Other: _____

Rate: _____ mls/hr Total Amount to be given: _____ mls

PRE-MEDICATIONS:

Location Pre-Med Admin: _____

Atropine 0.72 mls SQ @ 9:37Scuff1/2 Acepromazine 0.09 mls SQ @ 9:37 $0.19 \div 2 = 0.095$

PAIN MEDICATIONS:

#50 Hydromorphone 0.88 mls @ 9:37 IM (SQ)Location: Scuff

Metacam _____ mls @ _____ IM SQ

Location: _____

ANTIBIOTICS:

Durapen 3.9 mls @ _____ Location: _____

Other _____ mls @ _____

ANESTHETIC PROTOCOL:

Ketamine _____ mls IV @ _____

Valium _____ mls IV @ _____

Propofol (R or 28) _____ : 5.85 7.85 mls IV @ 12:45

Gas Anesthesia Only: MASK DOWN CHAMBER

INTUBATE: YES NO Drug Log*Intubate and maintain on Iso/O2*

Surgical Prep:

Routine surgical clip and routine surgical scrub done with nolvasan scrub and alcohol (no laser).

X Surgical Procedure: Routine Ovariohysterectomy

Abdominal incision was made. The vessels and the uterine body were ligated with 0 Monoswift. The abdominal incision was closed in three layers with 0 Monoswift. The linea and subcutaneous tissue was closed in a simple continuous pattern and the skin was closed in a intradermal pattern. Skin glue was used to close the tissue over the buried knots.

_____ Surgical Procedure: Routine Castration

Incision was made just cranial to the scrotum and the left testicle is exteriorized. The spermatic cord was ligated with two circumferential ligations using _____ Monoswift. The same was done with the right testicle. The tunic was closed in a simple continuous pattern with _____ Monoswift and the skin was closed with _____ Monoswift in an intradermal pattern. Skin glue was used over the buried knots.

Additional surgery notes:

Post op temp = 96.8 °F

Monticello Pet Hospital

4134 School Blvd.
Monticello, MN 55362-8914
(763) 295-3410

Fur-Ever Home Rescue (# 6800)

6710 Rustic Road SE
Prior Lake, MN 55372

Oct 22, 2014

**Invoice Number
50786**

Dog (# 1)

Species: Canine Sex:
Age:
Breed: (None)
Coat Color: (None)
Weight: 0 lbs.
Rabies Tag Number:
Rabies Serial Number: S402600A
Rabies Brand Name: Nobivac
Tattoo #:
Microchip #:

Date	Description	Qty	Price
10/22/2014	Rescue Patient ID: ANNIE	1.00	\$ 0.00
	R-Canine OHE 0-50lb	1.00	\$ 75.00
	*Pre-Anes Medications	1.00	\$ 0.00
	*SX IV Anesthesia	1.00	\$ 0.00
	*SX Pain Management	1.00	\$ 0.00
	*SX Penicillin Inj ENTER mL QTY	1.00	\$ 0.00
	Carprofen 75mg EA Tablet	3.00	\$ 0.00
	R-Microchip# 95600009325954	1.00	\$ 0.00
	R-Rabies Vaccine: #11299	1.00	\$ 8.00
	R-DAPP Vaccine: 1 OF 2	1.00	\$ 9.00
	R-Virbantal 114mg K-9 EA	1.00	\$ 13.00 ^{+tx}
	Buster Collar - 25	1.00	\$ 10.32 ^{+tx}

	Total for Dog:	\$ 115.32
Dr. Scott Jacobson	Total Products:	\$ 115.32
	Sales Tax:	\$ 1.60
	Total Invoice:	\$ 116.92
	Previous Balance:	\$ 0.00
	Total Amount Due:	\$ 116.92
	Visa(*****7671)	\$ 116.92
	Total Payments - Thank you:	\$ 116.92
	New Balance Due:	\$ 0.00

RX Numb	Code Description	Expire Date	Refills Left
Dog (# 1)			
42963	RVIR11 R-Virbantal 114mg K-9 EA		0
42964	CAR75 Carprofen 75mg EA Tablet		0

MEMORANDUM FOR THE RECORD

DATE: 10/10/54
BY: [illegible]

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