

Patient Medical History

THE SPCA OF CENTRAL FLORIDA

Jessica Dow
160 Sand Pine Cir
Sanford FL 32773

Acc. No: 174509
Phone: (407)474-2116

Patient: 43544 BRANDY
Species: CANINE
Breed: Shar Pei
Color: Brown
Doctor: Veterinary Technician

DOB: 08/29/2010
Age: 2
Sex: FS
Tag: 0631
Weight: 36.25

Reminders for 43544 BRANDY :

Code	Description	Overdue	Date
1290	Rabies Canine 1 Year Booster	Overdue	08/28/2012
5312	Blood Parasite Test (Negative)	Overdue	02/10/2013

History Line Items:

[Code, Description, Qty, Dr, Date]

Code	Description	Qty	Dr	Date
STRI	Single Trifexis	1.00	Veterinary Technician	02/11/2012
1010I	Acepromazine Tab 25 MG 100#	10.00	Veterinary Technician	02/11/2012
2360A	Tech Fee	1.00	Veterinary Technician	02/11/2012
WASTE	Biohazardous Waste Fee	1.00	Veterinary Technician	02/11/2012
5312	Blood Parasite Test (Negative)	1.00	Veterinary Technician	02/11/2012
1275	Clavamox 125 MG	1.00	Veterinary Technician	02/11/2012
NPG	Neo- Poly -Gram 10ml	28.00	Jonathan R. Willey, DV	09/15/2011
CPSP	Post Surgical Pain Package-K9	1.00	Jonathan R. Willey, DV	09/15/2011
4010	Anesthesia (inhalant)	1.00	Jonathan R. Willey, DV	09/15/2011
3500	Entropion Repair (bilateral)	1.00	Jonathan R. Willey, DV	09/15/2011
15626	Epi- Otic Advanced 8oz	1.00	Jonathan R. Willey, DV	09/15/2011
2902	Quadritop 15 ml	1.00	Jonathan R. Willey, DV	09/07/2011
2280	Ear Cleaning	1.00	Jonathan R. Willey, DV	09/07/2011
2175	Cytology-In House	1.00	Jonathan R. Willey, DV	09/07/2011
2361	Post Adopt Check Up	1.00	Jonathan R. Willey, DV	09/07/2011
5495	E-Collar	1.00	Jonathan R. Willey, DV	09/07/2011
SHMIC	Microchip	1.00	Tsuyoshi Watanabe D.	08/29/2011
CANF	Canine Female Adoption	1.00	Tsuyoshi Watanabe D.	08/29/2011
S1291	Rabies Vaccine 1yr [Tag/XRay:0631]	1.00	Tsuyoshi Watanabe D.	08/29/2011
SHSTR	Strongid Deworming	1.00	Tsuyoshi Watanabe D.	08/29/2011
OVARI	Canine Ovariohysterectomy	1.00	Tsuyoshi Watanabe D.	08/29/2011
SHDHL	DHLPP-CV	1.00	Tsuyoshi Watanabe D.	08/29/2011
SHBOR	Bordetella	1.00	Tsuyoshi Watanabe D.	08/29/2011
SH4DX	Blood Parasite	1.00	Tsuyoshi Watanabe D.	08/29/2011



**Pasco Electronic Animal Registration &
Licensing (PEARL)**
Veterinary Offices - ANIMAL HOSPITAL OF
REGENCY PARK

RABIES VACCINATION CERTIFICATE

				RABIES TAG #:
				MICROCHIP #:
OWNER LAST NAME: Shar-pei	OWNER FIRST NAME: Rescue	M.I.:	TELEPHONE #:	ALTERNATE TELEPHONE #:
STREET NO.: 5514	STREET NAME: NW 99th Terr	CITY: City Not Found	STATE: State Not Found	ZIP: 32653
SPECIES: Dog	AGE: 2 YEARS SEX: Female	SIZE OF ANIMAL: 20-50 LBS NEUTERED: Yes	PREDOMINANT BREED: Shar Pei ANIMAL NAME: Brandi	PREDOMINANT COLOR/MARKINGS: Tan
DATE VACCINATED: 03-04-2013	PRODUCT NAME: Nobivac3		VETERINARIAN'S NAME: DR MICHAEL CANFIELD	
NEXT VACCINATION DUE BY: 03-04-2014	MANUFACTURER/PRODUCER: INT (first 3 letters)		LICENSE NUMBER: 7860	
	DURATION: 1 Yr USDA Licensed Vaccine		HOSPITAL/CLINIC NAME: ANIMAL HOSPITAL OF REGENCY PARK	
	INITIAL OR BOOSTER: Booster Dose		ADDRESS: 7741 CONGRESS ST NEW PORT RICHEY FL 34653 Phone: 727-848-6247	
	VACC SERIAL (LOT) NO.: S279713C			

Printed on 3/4/2013 11:33:17 AM

Animal Hospital of Regency Park

7741 Congress St.
New Port Richey, FL 34653
727-848-6247

ANIMAL HOSPITAL REGENCY
7741 CONGRESS ST.
NEW PORT RICHEY, FL. 34653
727-848-6247

Merchant ID: 000000266550

Ref #: 0010

Phone Order

"The Best in Quality Care and Customer Service"

XXXXXXXXXXXX7816

VISA

Entry Method: Manual

FOR: Barbra Abel Shar-pei Rescue
5514 NW 99th Terr
Gainesville, FL 32653
(727)

F Total: \$ 40.00
C
A 03/04/13 12:38:31
I Inv #: 000010 Appr Code: 858827
Apprvd: Online Batch#: 000717
AVS Code: EXACT MATCH Y
CVV2 Code: MATCH M
PO #: 13000

Customer Copy

THANK YOU!
PLEASE COME AGAIN!

Date	For	Qty	Description
Services by Michael S. Canfield, D.V.M.			
03-04-13	Brandi	1	RESCUE Comprehensive Physical Exa
03-04-13		1	RESCUE Heartworm Test
03-04-13		1	RESCUE Rabies Vaccine (1 yr)
03-04-13			DIAGNOSIS: DISEASES OF THE EAF
03-04-13			DIAGNOSIS: TIGHT LIP SHAR PEI

Services by

03-04-13 Visa payment -40.00

Old balance	Charges	Payments	New balance
0.00	40.00	40.00	0.00

Patient	Total charges
Brandi	40.00

Reminders for: **Brandi** (Weight: 37.8 - 24m) Last done

03/12	Sero Occult HeartWorm Test
06/11	Rabies Vaccine
04/11	Bordatella Intranasal #1
04/11	Bordatella Annual
04/11	Para Fecal Dir/Flo
03/11	Wellness Comprehensive Physica

Microchip
0A12SD3864

Doctor's Instructions

Instructions for Brandi

Brandi has mild residual entropion. The vertical canals are folded as is commonly noted in Shar Pei dogs. In addition, Brandi has changes consistent with tight lip of Shar Pei dogs. Brandi would likely benefit from surgical attention directed at correction of the tight lower lip. Tooth 303 and 403 are displaced forward of the other lower incisors. There is

moderate dental calculus present involving primarily the lower front teeth. This is in part due to the tight lower lip. Close monitoring of the status of entropion is warranted as additional corrective measures may be necessary. Routine use of ceruminolytics for the ears is recommended. Monthly heartworm prevention and flea control is recommended.

Thank you,

Dr. Canfield DVM, DACVD (Dermatologist), Dr. Elligott, and the AHRP Team
Visit us at www.ahrpvet.com & "Like" us on Facebook

Brandi's weight history

03-04-13	37.80
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ADOPTION CONTRACT



This adoption agreement is made this day, 3/9/13
between CHARLES & RHONDA STEVENS, hereinafter known as
the ADOPTER, and Florida Shar-Pei Rescue, hereinafter known as
RESCUE, for adoption of Rescue Dog described below:

Name BRANDI Sex: F Approx. Age 2.5yr
Breed SHAR PEI Color FAWN Coat Type BRUSH
Other identifying characteristics _____

TERMS of ADOPTION

I. RESCUE requires a donation of \$ 400.00 for said rescue dog. This money is used to pay for the costs of obtaining the dog, veterinary fees, and related professional care. ALL funds donated to RESCUE serve to cover the costs of the dog being adopted, or existing and future animals. RESCUE never personally profits from the placement of any dog.

II. ADOPTER is encouraged to have a licensed veterinarian examine the dog within 72 hours of adoption. If the dog is not found to be healthy, as determined by a veterinarian within the 72 hour period, the ADOPTER may return the dog to the rescue for a refund. If the dog is found to be healthy, the ADOPTER accepts full responsibility for the health and temperament of the dog. RESCUE makes every attempt to determine and disclose any potential health problems.

III. It is RESCUE'S position that NO dog should be bred for any reason. Normally, any dog adopted from RESCUE is spayed or neutered. For puppies, ADOPTER agrees to have the dog neutered/spayed by the age of 6 months. If the dog is not altered prior to leaving RESCUE, ADOPTER agrees to have the dog spayed/neutered within a pre-determined time frame, and documentation of sterilization forwarded to RESCUE immediately.

IV. Upon receipt of the rescue dog and by signing this contract, the adopter assumes full responsibility for the dog's veterinary and routine care.

V. If the
adopter
agrees
adoption

CHARLES R. STEVENS
RHONDA B. STEVENS
445 THANKSGIVING VFD RD.
SELMA, NC 27576

66-7704/2531

3448

DATE 3-9-13

VI. If the
adopter
agrees
adoption
of the
attempt
dog, c
exerci

PAY TO THE
ORDER OF

Florida Shar-Pei Rescue \$ 400.00
Four hundred and ^{NO} 100 DOLLARS

State Employees' Credit Union®

Nashville, North Carolina

133

MEMO

VII. R

NP

⑆253177049⑆08626679891⑆ 3448

FINE LINE

ADOPTION CONTRACT

behavior or biting. If the dog aggressively attacks or bites an individual under any circumstance, or other animal if unprovoked, it is the responsibility of the ADOPTER to address the behavior accordingly including but not limited to seeking professional training assistance or in some circumstances, euthanasia. Obvious exclusions to bite behavior rules, such as an individual who physically abuses or maliciously harms the dog, apply. However, RESCUE must recommend euthanasia resultant to most attack or bite incidents.

VII. ADOPTER agrees to follow and obey all applicable animal control laws and regulations and to license the dog within one month of adoption if required by local ordinance or law.

ADOPTER also agrees to provide the dog with a form of identification, such as an ID tag on a collar, so a lost the dog can be returned. RESCUE advocates and implements use of microchip technology for identification. ADOPTER may list RESCUE as an emergency contact with microchip tracking organizations and is encouraged to update contact information as needed.

VIII. ADOPTER agrees to keep the dog as a household companion. To ensure the dog's safety when left unattended outside, the dog must be in a secure area with adequate shelter and water provided. Tie-outs are discouraged and must never be used unsupervised. The dog must never be allowed to run loose except in a secured area.

VIV. ADOPTER agrees to keep this dog in his/her personal possession and provide humane treatment at all times. Furthermore, the ADOPTER also agrees to provide proper veterinary care and keep the dog current on all vaccinations. Veterinary-approved heartworm preventative is necessary as are some form of effective flea/tick prevention.

X. ADOPTER agrees that the dog will not be used for any illegal acts such as dog-fighting (including but not limited to fighting, fight training, or the promotion of dog fighting) or sold for experimental purposes. If RESCUE finds the dog is not being cared for in a humane manner, ownership of the dog will revert to RESCUE and ADOPTER reported to authorities to be dealt with according to applicable anti-cruelty laws.

XI. ADOPTER agrees that RESCUE cannot be held liable in any way for actions or deeds of said animal after adoption. RESCUE does not guarantee the dog's temperament or health other than those evaluations and/or medical treatments disclosed prior to or at the time of adoption. RESCUE attempts temperament and health screenings on all dogs coming into the program, but it is not possible to foresee all potential problems. RESCUE provides a general health check by a licensed veterinarian. All vaccinations are current and all known health problems are addressed before adoption. RESCUE will always be available for advice and consult.

Both RESCUE and ADOPTER have read and agree to all terms of this contract and consider it a binding agreement between themselves and their heirs and estates as witnessed by their respective signatures.

FSPR Representative : Wendy Zak Date: 3/9/13

Adopter: Alvin & Charles Strem Witnessed by: _____

Address: 445 Thanksgiving Fire Road Phone: 919-332-7602

Selma, NC 27576