RECEIPT

SPCA

5850 Brannen Road South Lakeland, FL 33813 863-646-7722

"Our Goal Is To Make Your Pet Happy"

Printed: 02-23-12 at 5:13p

FOR: James Waxman

745 College Avenue Lakeland, FL 33801 (863) 937-6226

02-23-12 Date: Account: 53569

Invoice: 283270

Date	For	Qty	Description	Price	Discount	Net Price
EXAMS/CON 02-23-12	SULTS	1	Exam		7	28.00
MEDICINE - 02-23-12	PHARMACY	60	Proin 50 mg Chewable Tabs			23.10
TECHNICIAN 02-23-12	IS	1	Nichole was your technician today			0.00
MUSCULOSI 02-23-12	KELETAL		Rib - Mass		=	0.00
	Total of services f	or MA	ISY			51.10
02-23-12			Visa payment			-51.10

Merchant ID: 11789624, Approval code: 592103, Transaction ID: 664384361 Ref #: 1603, Act #: **********7816, Exp: XX/XX, Entry: HAND KEYED, Card: VISA

I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

DERMAL

02-23-12

Skin - Inflamation

0.00

Total of services for MAISY

_____ -51.10

Old balance

Charges Payments

New balance

Client: Rescue, Shar Pei (12713)

Patient Name: Maizy Species: Canine

Breed:

Gender: Female Weight: 0.0 lbs

Age:

Doctor: Roy, Hilary

Orchid Springs Animal Hospital 615 Overlook Drive, Winter Haven,

FL 33884 863-324-6964

Test	Results	Reference I	nterval	LOW	NORMAL	HIGH	
ProCyte Dx	(March 1, 2012	11:38 AM)					
RBC	6.10 M/µL	5.65 - 8.87]
HCT	37.5 %	37.3 - 61.7					
HGB	13.0 g/dL	13.1 - 20.5	LOW				
MCV	61.5 fL	61.6 - 73.5	LOW				
MCH	21.3 pg	21.2 - 25.9					1
MCHC	34.7 g/dL	32.0 - 37.9					1
RDW	16.5 %	13.6 - 21.7					1
%RETIC	0.3 %						•
RETIC	18.9 K/µL	10.0 - 110.0]
WBC	15.59 K/µL	5.05 - 16.76					1
%NEU	84.4 %						
%LYM	9.5 %						
%MONO	5.1 %						
%EOS	0.1 %						
%BASO	0.9 %						
NEU	13.16 K/μL	2.95 - 11.64	HIGH]
LYM	1.48 K/µL	1.05 - 5.10					1
MONO	0.79 K/µL	0.16 - 1.12				-	1
EOS	0.02 K/µL	0.06 - 1.23	LOW				1
BASO	0.14 K/µL	0.00 - 0.10	HIGH				1
PLT	427 K/µL	148 - 484					1
MPV	8.8 fL	8.7 - 13.2					1
PDW	10.6 fL	9.1 - 19.4					1
PCT	0.37 %	0.14 - 0.46]
					WBC	Dun	•
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	Fluorescence	· · ·		-31-31-41-41-41-41-41-41-41-41-41-41-41-41-41	Granularity		
- 550				- NEU - LV	,		
■ RBC	■ RETICS			■ NEU ■ LYM			
■ PLT	RBC Frags			■ MONO ■ EOS			
■ WBC				BASO URB	С		



Client: Rescue, Shar Pei (12713)

Patient Name: Maizy

Species: Canine

Breed:

Gender: Female Weight: 0.0 lbs

Age:

Doctor: Roy, Hilary

Orchid Springs Animal Hospital 615 Overlook Drive, Winter Haven,

FL 33884

863-324-6964

Test	Results	Reference	e Interval	LOW	NORMAL	HIGH
Catalyst Dx	(March 1, 2012	11:38 AM)				
GLU	166 mg/dL	74 - 143	HIGH			
BUN	20 mg/dL	7 - 27				
CREA	1.0 mg/dL	0.5 - 1.8				
BUN/CREA	20					
ГР	7.4 g/dL	5.2 - 8.2				
LB	3.1 g/dL	2.3 - 4.0				
GLOB	4.3 g/dL	2.5 - 4.5				
LB/GLOB	0.7					
LT	< 10 U/L	10 - 100				
ALKP	75 U/L	23 - 212				



FROM-HIGH PERFORMANCE SYSTEMS, INC.

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T-288 P.001/003

DKCHID PEKINGO MI

J. Trautwein

8633266377 03/02/2012 01:45

Patient History Report

Client: Rescue, Shar Pei (12713)

Patient: Maizy (24311)

Phone: (727) 343-2260

Species: CANINE

Age: 0 Yrs. 0 Mos.

Breed: SHAR PEI Sex: Spayed Female

Date Type Staff History

3/1/2012 TC

MMB

Comerstone Surgery Template - TENTATIVE

Tumor removal

3/1/2012 12:25

Patient Information:

Maizy 24311 Breed: SHAR PEI

Sex: Spayed Female

Weight: 47.4 pounds

Date: 3/2/2012 12:37 PM

Pre/Gen Anasthetic: SEDATION-DOMITOR/ANTISEDEN (x 1) **ANESTHESIA**

SEVO (NHALANT 1 HR (x 0.2)

Presurgical Assessment: 3 4. High Risk 5. Grave Risk) (1. Minimal Risk 2, Slight Risk 3, Moderate Risk

Attending Tech: HR - Heriberto Reves

Time: 20 mins

Histopathology: none- Declined by Rescue representative

Comment: Excision of subcutaneous growth from right side of thorax. Growth appears to be lipoma on cut surface. Closed incision 0 absolvable and Nexaban glue. No staples due to aggressive behavior. Sharpei Rescue requests antibiotics and pain medication scripts. Rx: Cephalexin 500mp #28 1 BID and Tramadol 50mp #14 1 PO BID x 7 days.

3/1/2012 W 3/1/2012 L

DVM

47.4 pounds

Hematology re	sults from IDEXX VetI	lab In-clinic	
LaboratoryDRe	quisition ID: 4025	Posted	Final
Test	Result	Reference Range	•
HCT =	37.5 R	37.3 - 61.7	
HGR =	13 g/dL L	13.1 - 20.5	
MCHC =	34.7 g/dL	32 ~ 37.9	
WRC =		5.05 - 16.76	
LYMPHS =	1.48 K/pL	1.05 - 5. 1	
LYMPHS =	₽.5 %		
MONOS 🖚	0.79 K/µL	0.16 - 1.12	
%MONOS =	5.1 %		
NEUT -	13.16 K/µL H	2.95 - 11.64	
%NEUT =	84.4 %		
EQS =	0.02 K/µL L	0.06 - 1.23	
BEOS -	O.1 T		
baso -	0.14 K/µL H	0 - 0.1	
SEASO -	0.9 %		
PLT -	427 K/µL	148 - 484	
Retics =	18.9 K/ µL	10 - 110	
%Retics =	0.3 %		
	6.1 M/µL	5.65 - 8.87	
MCV =	61 .5 fl <u>L</u>	61.6 - 73.5	
MCH =	21.3 pg	21.2 - 25.9	

B:Billing charges, C:Medical notes, CB:Call back, CK:Chook-In, D:Diagnosis, DH:Decijned to history, E:Examination, I:Departing instruction, L:Lab result, M:Image cases, P:Prescription, PA:PVL Accepted, PB:problems, PP:PVL Performed, PR:PVL Recommended, R:Correspondence, T:Images, TC:Tentative medical note, W:Weight

MAR-02-2012 13:39

FROM-HIGH PERFORMANCE SYSTEMS, INC.

T-288 P.002/003 F-986

03/02/2012 01:45

8633266377

+8632942149 ORCHID SHKINGS AM

Patient History Report

Cijent: Rescue, Shar Pei (12713)

Phone: (727) 343-2260

Patient: Majzy (24311)

Species: CANINE Age: 0 Yrs. 0 Mos. Breed: SHAR PEI

Sex: Spayed Female

<u>Date</u>	Type	Staff	_ History

RDW =	16.5 %	13.6 - 21.7
MPV =	9.8 £L	8,7 - 13.2
DDM =	10.6 £T,	9.1 - 19.4
PCT =	0.37 %	0.14 - 0.46

3/1/2012 L

DVM

Chemistry results from IDEXX VotLab In-clinic Laboratory Requisition ID: 4025 Posted final Test Result Reference Range ALB = 3.1 g/dL 2.3 - 4ALKP = 75 U/L 23 - 212> TLA 10 U/L 10 - 100 20 mg/dL 7 - 27

BUN/UREA = CREA = l mg/dL 0.5 - 1.8GLU = 166 mg/dL H 74 - 143TP = 7.4 g/dL 5.2 - 8.2GLOB = 4.3 g/dL 2.5 - 4.5

ALB/GLOB = 0.7 BUN/CREA -20

3/1/2012 R

TPB

Standard Consent Form - TENTATIVE

Orchid Springs Animal Hospital ATA Crassical Pales

Standard Consent Form 3/1/2012

Client ID:

Telephone:

12713

Client Name: Address:

Shar Pei Resoue

5514 NW 99th Text.

Gainesville, FL 32653

(727) 343-2260

Patient ID:

Name:

Species: Breed:

Maizv

CANINE SHAR PEL Female

Date: 3/2/2012 12:37 PM

24311

Sex:

Color: Markings: Birth Date:

I hereby certify that I am the owner of the above-named animal or am responsible for it and have the authority to execute this consent, I also understand I am financially responsible for services rendered and payment is due when services are rendered. I hereby consent and authorize the performance of the following procedure(s) or operation(s):

Bibling charges, C:Medical notes, CB:Cali back, CK:Check-in, D:Diagnosis, DH:Decimos to history, E:Examination, I:Departing instruction, L:Lab result, M:Image cases, P:Prescription, PA:PVL Accepted, PB:problems, PP:PVL Performed, PR:PVL Recommended, R:Correspondence, T:Images, TC:Tentalive medical note, W:Weight

MAR-02-2012 13:39

FROM-HIGH PERFORMANCE SYSTEMS, INC.

+8632942149

P.003/003 T-288

93/02/2012 01:45

8633266377

ORCHID SHKINGS AD

Patient History Report

Client: Rescue, Shar Pei (12713)

Patient: Maizy (24311)

Phone: (727) 343-2260

Species: CANINE

Age: 0 Yrs. 0 Mos.

Breed: SHAR PEL

Sex: Spaved Female

Date: 3/2/2012 12:37 PM

Date Type

Staff

History

tumor removal

I understand that during the performance of the following procedure(s) or operation(s), unforescen conditions may be revealed that necessitate an extension of the foregoing procedure(s) or operation(s) than those set forth above. Therefore, I hereby consent to and authorize the performance of such procedure(s) and operation(s) as are neccessry and desirable in the execuse of the veterinarian's professional judgement.

I also authorize the use of appropriate anesthetics, and other medications, and I understand that hospital support personnel will be employed as deemed necessary by the veterinarian. I have been advised as to the nature of the procedure(s) or operations and the risks involved. I realize that results cannot be guaranteed.

I agree to indemnify and hold Orchid Springs Animal Hospital harmless from and against any and all liability arising out of the performance of any of the procedure(s)referred to above.

Would you like your pet permanently identified with a microchip? (\$30.00 w/surgery) Would you like the procedure to be performed by laser? (\$49.00 additional)

(Signature of legal owner or responsible person)

3/1/2012	СК	KBŲ	tumor removal - see xtina for info, Jackie Trautwein is coordinator, states if tumor looks suspicious, call her before sending biopsy to lab. 224-0671. Call Foster morn when ready to go home.
3/1/2012 3/1/2012 3/1/2012 3/1/2012 3/1/2012 3/1/2012 3/1/2012 3/1/2012 3/1/2012	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	HBR HBR	Reason for Vişit: Surgery Practice 1 TUMOR REMOVAL 26-50 LBS (TR2) by RNL 0.00 PRE ANESTHETIC PROFILE (3893) by RNL 1.00 SEDATIVE-PROPOFLO 26-50 LBS (3527) by RNL .30 ANESTHESIA ISO INHALANT 1 HR (3218) by RNL 0.00 SURGICAL PACK-MED (3538) by RNL 0.00 ENDOTRACHEAL INTUBATION (4457) by RNL 1.70 TUMOR REMOVAL (SKIN) (2632) by RNL 1.00 BIOHAZARDOUS WASTE DISPOSAL (MSCIN) by RNL 0.00 EAR CLEANING W/ PROCEDURE (2682) by RNL 1.00 NAIL TRIM W/ PROCEDURE (2387) by RNL