A1236147

Kennel No: WW22

other id

Animal ID: **A1236147**
Age /Sex: 5 YRS F/S
Breed: CHINESE SHARPEI
Color: YELLOW
Intake Date: 03/01/2010
Intake Type: STRAY
Due Out Date: **03/07/2010**
Hold/Adopted? **POSS RESC**
Tag 047889023
Microchip 047889023

Name: CHINA

Additional Information:
(Markings/Identifiers)

POSS PREGNANT

- DO NOT WRITE BELOW THIS LINE - FOR ASD VETERINARIAN SECTION ONLY -

[ ] Health Problem [ ] Under Treatment [ ] Do Not Adopt!

Condition on IntakeFEARFUL

Temperament **Evaluation**
Date: _____

Friendly: _____
Fearful/Shy: _____
Growls: _____
Barker: _____
Other: _____

By: _____

Vaccination	Date
[ ] DHLPP	_____
[ ] RABIES	_____
[ ] FVCRPC	_____
[ ] Bordetella	_____
[ ] Deworming	_____
[ ] Spayed/Neutered	_____
[ ] Other Information	_____

c:\Program Files\Chameleon Software\chameleon\crystal\kncard.rpt

Miami-Dade County

Animal Services Department
7401 NW 74 ST, Miami, FL 33166
(305) 884-1101 (305) 805-1593 FAX
www.miamidade.gov/animals

AVID*047*889*023

Receipt Number: R10-434292

Receipt Date: Sunday, March 07, 2010

Person Information: SHAR PEI RESCUE
9600 NW 25 ST
SUNRISE, FL 33332

PID: P0790627

Received From: SHAR PEI RESCUE Check No: MC7532 Phone: (954) 258-1110

Item:	Animal ID:	Reference No:	Price:	Each:	Amount:
MICROCHIP	A1236147	047889023	$.00	1	$.00
DVM EXAM	A1236147	T10-857482	.00	1	.00
BORDETELLA	A1236147	T10-858725	.00	1	.00
DHPP VACCINE	A1236147	T10-858726	.00	1	.00
DVM EXAM	A1236147	T10-859972	.00	1	.00
FRONTLINE 9.7%	A1236147	T10-859973	.00	1	.00
DEWORM	A1236147	T10-859974	.00	1	.00
FECAL FLOAT	A1236147	T10-859975	.00	1	.00
HEARTWORM SNAP TEST	A1236147	T10-859976	.00	1	.00
RABIES VACCINATION	A1236147	T10-859977	.00	1	.00
SPAY SURGERY	A1236147	T10-859978	.00	1	.00
ADOPTION FEES	A1236147	AMY	25.00	1	25.00

Total Fees Due:		**$25.00**
Payments:	Cash:	$0.00
	Check:	$0.00
	Credit Card:	$25.00
Total Payments Received:		**$25.00**

Thank You!

Change:	$0.00
Balance Due:	$0.00

Animal Information:

A1236147 CHINA - 5 YEARS OF AGE, SPAYED, CHINESE SHARPEI, YELLOW DOG

Treatment Information:

Type:	Animal#	Description:	Medication:	Cost:	Treat #	Date:
	A1236147 CHINA	Unable to diagnose pregnancy.Recommend to spay it before release.			T10-857482	03/02/10
BORDETELLA	A1236147 CHINA				T10-858725	03/02/10
DHPP	A1236147 CHINA				T10-858726	03/02/10

Shelter Hours
Monday - Friday 8:00AM - 7:00PM Saturday and Sunday 8:00AM - 5:00PM
Adoption Hours: Monday - Friday 10:00AM to 6:30PM Saturday and Sunday 10:00AM - 4:00PM
Rabies Clinic Hours: Monday - Friday 10:30AM to 6:00PM Saturday and Sunday 10:30AM - 4:00PM

Clerk: JOEVERA COUNTER Transaction Date: 03/07/10 Print Date: 03/07/10 tware\chameleon\crystal\receipt.rpt

	A1236147 CHINA	SURGERY: CANINE OVARIOHYSTERECTOMY AVID#047*889*023 Anesthesia: IM Domitor 1 mg/ml at 0.025 mg/kg, Ketamine 100 mg/ml at 2.5 mg/kg, Torbi 10 mg/ml at 0.25 mg/kg Intubate, maintain on isofluorane and O2 Pen G 300,000 u/ml at 0.1ml/lb SQ pre-op	T10-859972	03/07/1(
FRONTLINE	A1236147 CHINA		T10-859973	03/07/1(
DEWORM	A1236147 CHINA		T10-859974	03/07/1(
FECAL FL	A1236147 CHINA		T10-859975	03/07/1(
HEARTWORM SNI	A1236147 CHINA		T10-859976	03/07/1(
RABIES ADOPT	A1236147 CHINA		T10-859977	03/07/1(
SPAY	A1236147 CHINA		T10-859978	03/07/1(

TOTAL MEDICAL FEES: $0.00

License/Rabies Vaccination/Microchip Information:

Tag Number	Expires	Animal#
047889023	3/7/2011	A1236147

Rabies Vxn Info- Date:3/7/2010 Term: 12 Expires: 3/7/2011 Vxn: PFI
Cert#: 047889023 Serial#: S839989A 20-50lbs

ANIMAL SERVICES

Shelter Hours

Monday - Friday 8:00AM - 7:00PM Saturday and Sunday 8:00AM - 5:00PM

Adoption Hours: Monday - Friday 10:00AM to 6:30PM Saturday and Sunday 10:00AM - 4:00PM

Rabies Clinic Hours: Monday - Friday 10:30AM to 6:00PM Saturday and Sunday 10:30AM - 4:00PM

Clerk: JOEVERA COUNTER Transaction Date: 03/07/10 Print Date: 03/07/10 tware\chameleon\crystal\receipt.rpt

CHINA'S MEDICAL HISTORY

A1236147 0.00LBS DOG YELLOW S CHINESE SHARPEI 03/07/10

3/2/2010

DVM EXAM	NORMAL	NORMAL	0.00LBS	Treated by: DRTC

Unable to diagnose pregnancy.Recommend to spay it before release.

DHPP
BORDETELLA

3/7/2010

DVM EXAM	NORMAL	NORMAL	48.00LBS	Treated by: PP

SURGERY: CANINE OVARIOHYSTERECTOMY
AVID#047*889*023
Anesthesia:
IM Domitor 1 mg/ml at 0.025 mg/kg, Ketamine 100 mg/ml at 2.5 mg/kg, Torbi 10 mg/ml at 0.25 mg/kg
Intubate, maintain on isofluorane and O2
Pen G 300,000 u/ml at 0.1ml/lb SQ pre-op
Rimadyl 50 mg/ml at 2 mg/lb SQ pre-op

Sx:
Ventral midline incision; removal of both ovaries and uterine horns follwing litation of ovarian pedicles and uterine body (one circumferential and one transfixing for dogs greater than 30 lbs) with Polyglactin or Polydioxanone suture. Body wall closure with simple interrupted suture pattern, followed by subcutaneous and/or intradermal closure with simple continuous suture pattern, with Polyglactin or Polydioxanone suture. Cyanoacrylic adhesive may be applied to skin surface. Tattoo ink aseptically applied to incision.

Routine recovery.

P: Recommend restricted exercise (no running, jumping, or horseplay) for 10 days; keep incision clean and dry and inspect twice daily until healed. Discourage chewing/licking at incision; if noted, an Elizabethan collar is recommended.
SPAY
RABIES ADOPT
HEARTWORM SNP NEG
FECAL FL NEG
DEWORM
FRONTLINE

RABIES VACCINATION CERTIFICATE

NASPHV Form #50

Print - use ball point pen or type

Owner's Name & Address — PRINT - Last: Sharpe — First: Lacey — M.I. — Rabies Tag Number: A123444

No. — Street — City — State — Zip — Telephone

Species: Dog ☒ Cat ☐ — Sex: Male ☐ Female ☒ — Age: 3 mo. to 12 mo. ☐ 12 mo. or older ☒ — Size: Under 20 lbs. ☐ 20-50 lbs. ☐ Over 50 lbs. ☒

Name

Predominant Breed: Chinese Sharpei — Colors: yellow

Producer: P F I (First 3 letters) — ☒ 1 yr. Lic./Vacc. ☐ 3 yr. Lic./Vacc. — Rabdomun (Other) — Vacc. Serial (lot) No. 5839989A

For Licensing Agency Use — License No. — Year

Other

Change ☐ Add ☐ Control No.

DATE VACCINATED: 3 (Month) 4 (Day) 10 (Year)

VACCINATION EXPIRES: 3 (Month) 7 (Day) 11 (Year)

Veterinarian's: # — License No.

Signature

Address

Patient History Report

Sorted by Patient ID

Patient: 11217 China
Species: Canine
Breed: Shar Pei, Chinese
Client: 6108 Rescue Florida Shar Pei
DOB: 00/00/0000
Sex: Spayed Female

Date	Type	Staff	History
3/27/2010	W		42.5 pounds
3/27/2010	P	RN	84.00 tablet of Doxycycline 100 mg Tablet (02447) Rx #: 23928 Exp. 03/27/10 0 Of 0 Refills GIVE TWO TABLETS BY MOUTH EVERY 12 HOURS UNTIL GONE.
3/27/2010	B	RN	1.00 [None] of Heartworm/Lyme/Ehrlichia Test (118) by NS
3/27/2010	B	RN	1.00 FECAL EXAMINATION (FLOTATION) (4400) by NS
3/27/2010	B	RN	84.00 tablet of Doxycycline 100 mg Tablet (02447) by NS
3/27/2010	B	RN	1.00 EXAMINATION/CONSULTATION (2305) by NS

Heroes Spay and Neuter Clinic, Inc.
5040 NE 13th Ave
Ft. Lauderdale, FL 33334
(954)202-4354

Account: 1203
Invoice: 8445
Date: 04/20/2010
Time: 4:03 PM
Page: 1

FL Shar Pei Rescue
5514 Nw 99 Terrace
Gainesville FL 32653

CHINA
CANINE
Shar Pei
Tag: None

Age: 4
Sex: FE
Weight: 44.00

Phone: (352)332-3732 (352)339-3582

Doctor: Frances R. Vaujin, DVM

Service/Item	Qty	Price	Amount
Total Body Function	1.00	95.00	95.00

Tax			0.00
Net Invoice			95.00
Previous Balance			0.00
Payment			95.00
Card	95.00	(VISA)	
Balance Due			0.00

Next Appointment: on 04/23/2010 at 3:00 PM For: GINGER

Thank You

Please tell your friends about Heroes' great service and value. Thank You!

Heroes Spay and Neuter Clinic, Inc.
5040 NE 13th Ave
Ft. Lauderdale, FL 33334
(954)202-4354

Account: 1203
Invoice: 8460
Date: 04/21/2010
Time: 2:46 PM
Page: 1

954-798-6552 (Louise Hudek) FL SharPeiRescue
5514 Nw 99 Terrace
Gainesville FL 32653

CHINA
CANINE
Shar Pei
Tag: None

Age: 3
Sex: FE
Weight: 44.00

Phone: (352)332-3732 (352)339-3582

Doctor: Frances R. Vaujin, DVM

Service/Item	Qty	Price	Amount
Thyrozine 0.4mg 180	180.00		39.40

Tax			0.00
Net Invoice			39.40
Previous Balance			0.00
Payment			39.40
Card	39.40	(VISA)	
Balance Due			0.00

Next Appointment: on 04/23/2010 at 3:00 PM For: GINGER
Next Appointment: on 04/23/2010 at 2:45 PM For: PUPPIES

Thank You

Please tell your friends about Heroes' great service and value. Thank You!

ANTECH DIAGNOSTICS
1111 Marcus Avenue Lake Success NY 11042 Phone: 800-872-1001

Heroes Spay Neuter Clinic
5040 NE 13th Ave
Oakland Pk, FL 33334
Tel: 954-202-4354
Fax: 954-202-4356

LouhudeK@gmail.com

Client # 100407
Chart #

Accession No.	Doctor	Owner	Pet Name	Received
NYAA86570312	VAUJIN	**HUDEK**	CHINA	04/21/2010

Species	Breed	Sex	Pet Age	Reported
Canine	SHARP	SF	4Y	04/21/2010 05:59 AM

Test Requested	Results	Reference Range	Units
SUPERCHEM			
Total Protein	6.6	5.0-7.4	g/dL
Albumin	2.6 **(LOW)**	2.7-4.4	g/DL
Globulin	4.0 **(HIGH)**	1.6-3.6	g/dL
Albumin/Globulin Ratio	0.7 **(LOW)**	0.8-2.0	RATIO
AST (SGOT)	27	15-66	U/L
ALT (SGPT)	19	12-118	U/L
Alkaline Phosphatase	44	5-131	U/L
GGTP	<5	1-12	U/L
Total Bilirubin	0.1	0.1-0.3	mg/dL
Urea Nitrogen	26	6-31	mg/dL
Please note new reference range for BUN			
Creatinine	1.4	0.5-1.6	mg/dL
BUN/Creatinine Ratio	19	4-27	RATIO
Phosphorus	4.2	2.5-6.0	mg/dL
Glucose	94	70-138	mg/dL
Calcium	9.2	8.9-11.4	mg/dL
Corrected Calcium	10.1		
Magnesium	1.3 **(LOW)**	1.5-2.5	mEq/L
Sodium	141	139-154	mEq/L
Potassium	4.6	3.6-5.5	mEq/L
Na/K Ratio	31		
Chloride	108	102-120	mEq/L
Cholesterol	216	92-324	mg/dL
Triglycerides	62	29-291	mg/dL
Amylase	1274 **(HIGH)**	290-1125	U/L
Lipase	300	77-695	U/L
CPK	164	59-895	U/L
CBC			
Hemoglobin	12.8	12.1-20.3	g/dL
Hematocrit	37.8	36-60	%
WBC	11.1	4.0-15.5	10^3/uL
RBC	6.52	4.8-9.3	10^6/uL
MCV	58	58-79	fl
MCH	19.6	19-28	pg
MCHC	33.9	30-38	g/dl
Platelet Count	143 **(LOW)**	170-400	10^3/uL
Platelet clumps are detected in this sample. Platelet clumping prevents a precise determination of a platelet			

 FINAL 04/21/2010 05:59 AM

OK
LOW T4 START

Accession No.	Doctor	Owner	Pet Name
NYAA86570312	VAUJIN	HUDEK	CHINA

Test Requested	Results		Reference Range	Units
	count, and falsely decreases the platelet number. The reported platelet count reflects the MINIMUM platelet number. The platelet estimate reflects the estimated contribution of clumped platelets. Platelet clumping is a common IN VITRO phenomenon. Clumping of the platelets can be induced by several factors including: interaction with tissue factors associated with venipuncture, exposure to glass, and improper blood to anticoagulant ratio. Certain inflammatory and immune mediated conditions may augment platelet clumping. Platelet clumping may be reduced by the use of larger gauge needles, jugular venipuncture, or collection of blood directly into the vacutainer.			
Platelet Estimate	Adequate		Adequate	
Differential	**Absolute**	**%**		
Neutrophils	7104	64	2060–10600	
Bands	0	0	0–300	
Lymphocytes	1221	11	690–4500	
Monocytes	555	5	0–840	
Eosinophils	2220 **(HIGH)**	20	0–1200	
Basophils	0	0	0–150	
Polychromasia	None			
Blood Parasites	None Seen			
T4				
T4	0.8 **(LOW)**		1.0–4.0	ug/dL
	The Total T4 result is less than 1.0 mcg/dl. A Free–T4 by equilibrium dialysis may be helpful in supporting the diagnosis of hypothyroidism in patients demonstrating clinical signs compatible with hypothyroidism.Please use test code 9816 for this additional testing.			