HOSPITAL TREATMENT SHEET

Owner Name and Surname		Animal name		Sex	M / F
Contact number		Breed		Sterilised	Y / N
Reason for treatment		Description		Weight	kg
		Admission Nr		Page Nr	

CLINICAL EXAMINATION ON ADMISSION

Temp: Poor / Nil | Habitus: | Mucous Membranes: | Appetite: Good /

Vaccinated: (Y) / N | Vomiting: Y / (N) | Diarrhoea: Y / (N) / Bloody / Watery | Drinking: (Y) / N

Urinating: (Y) / N | Sterilised: (Y) / N | Last heat: | Skin:

Sneezing: Y / (N) | Coughing: Y / (N) | Eyes: (Clear) / Crusty / Watery | Ears: (Clean) / Dirty

Oral Cavity: (Normal) / Abnormal | Cardio-Vascular System: (Normal) / Abnormal

Respiration: (Normal) / Abnormal | Genital: (Normal) / Abnormal | Locomotion/Musculoskeletal: (Normal) / Abnormal

Diagnosis:

TREATMENT RECORD

DATE	T	A	U	F	H	TREATMENT	PERSON
20/3/24						IN JERD HIND LEGS (N)	2.8kg
NOXOLO						AS per owner cat walk hind legs and	
						cat was missing for 4days and cat come	
	+ rays					back dragging hind legs that worries the	
						owners and it the first time it goes outside	
	Bloods	10	lyt			Mm: pink, Hydration ok. Temp: 37.8. Vaccinated	
						Spayed. may need + rays.	
	Neuros.					pellet gun in spine	
		Deca	☑			14:30	
		Epileptim				0.15ml ☒ ☑ 14:30	
		locson	☑			0.2ml 14:30	
	GI Disc.					Pellet gun wound; adv. Grave prognosis	
						for gait !!! sd. post. Persistent neuros.	

LEGEND: T = Temperature, A = Appetite (1-5), U = Urine (yes/no), F = Faeces (yes/no), H (Habitus) = Behaviour

Bottle 813
3ml

adv. Euth. © gave permission.