

Feral - Clip ear

ADMISSION FOR TREATMENT



KENNEL No.		TREATMENT No. 11088	
Date in	23/1/25	Time in	15:40
Date released			

DESCRIPTION	Dog	<u>Cat</u>	Other (Specify)		Microchip or ID Tag number
	Breed	DSH		Colour and Markings	
	Condition			Male/Female <u>Female</u> Age	Pet Name
	Temperament	Vaccination details	Sterilisation details	Size	
	Coat	Tail	Ears	Teeth Condition	

Reason for visit or treatment

Owners Full Name	Absalom Mulula	ID number	7804125838084
Residential Address	082 Vodacom Boulevard, Vodacom Office Park		
Tel (H)	Tel (W)	Cell 082 659 2344	
Email			

TERMS & CONDITIONS FOR TREATMENT

I verify that I am the owner of the above animal, and hereby authorise, understand and agree that:

1. Animals are admitted at the owner own risk and, while the Society uses the most efficient known treatment and treat each animal with the greatest possible care and attention, neither the Society, its officer/s or veterinarian/s will be liable for any resulting loss or damage from such admission.
2. I accept the fact that if my animal has not been vaccinated against common diseases that there is the risk that the animal may contract such diseases while in our care and that the Society cannot be held responsible.
3. All animals treated by the SPCA must be sterilised. I hereby consent to the sterilisation of the above animal.
4. If in the opinion of a veterinarian an animal presented for admission is so diseased, severely injured or in such a physical condition that it should be euthanised for humane reasons, the Society shall have the right to effect such euthanasia by approved humane methods.
5. I will collect the animal, or make arrangements with the Society to get the animal home within 48 days of being told by the Society that the animal can go home. If I do not collect the animal within the time stated by the Society, the animal will become the property of the Society and I will have no claim whatsoever against the Society.
6. Should a decision on specific treatment be required due to the cost thereof, only 24 hours will be permitted. Thereafter a decision will be made in the best interest of the animal, and in terms of Section 5 of the Animals Protection Act 71 of 1962. Please note that euthanasia is considered a form of treatment.
7. Any charges endorsed herein are due and payable on demand.
8. I indemnify the Society, its employees, Veterinarian for any loss, damage, disease, injury or death of the above animal, from what-so-ever cause.

Signature

Witness for Society

The SPCA is not a registered credit provider and therefore does not offer an account facility. Full payment is required at the time of discharge of your animal. Provisional costs estimates will be provided before the animal is admitted. A 50% deposit is payable at the time of admission, deductible from final amount payable.

Total cost of treatment	R	Cash	Card	EFT	(Receipt No.)
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EUTHANASIA

Bottle No.	Quantity used	AWA/Vet
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CLAIMING

I declare that my animal has been returned to me in a healthy and acceptable state.

Date	Time	Signature	Witness for Society
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OUTCOME: CLAIMED ☐ EUTHANASED ☐ DIED ☐ OTHER: _____ DATE: _____

CLINICAL EXAMINATION ON ADMISSION

Weight	Temperature
Habitus	Locomotion/Musculoskeletal
Genital	Skin
Mucous Membranes	Eyes
Buccal Cavity	Ears
Cardio-Vascular System	Respiratory System

Diagnosis

Case No.	Date	Name	Age	Sex	Religion	Ethnicity	Marital Status	Occupation	Education	Income	Health Insurance	Medication	Treatment Plan
001	2023-01-15	John Doe	45	M	Catholic	White	Married	Teacher	Bachelor's	\$60,000	Yes	Aspirin, Metoprolol	Regular checkups, stress management
002	2023-01-18	Jane Smith	32	F	Protestant	Black	Single	Nurse	Master's	\$75,000	Yes	Ibuprofen, Lisinopril	Pain management, blood pressure control
003	2023-01-20	Michael Johnson	58	M	Muslim	Hispanic	Divorced	Engineer	PhD	\$90,000	No	Insulin, Statins	Dietary changes, insulin therapy
004	2023-01-22	Sarah Lee	28	F	Buddhist	Asian	Married	Software Engineer	Master's	\$85,000	Yes	Antidepressants, Antipsychotics	Mental health counseling, medication management
005	2023-01-25	David Brown	65	M	Jewish	White	Widowed	Retired	High School	\$40,000	No	Diuretics, Beta-blockers	Heart failure management, lifestyle modifications
006	2023-01-28	Aisha Khan	35	F	Hindu	Pakistani	Single	Marketing Executive	Bachelor's	\$55,000	Yes	Oral contraceptives, Vitamins	Gynecological care, nutritional support
007	2023-02-01	Robert Wilson	72	M	Anglican	White	Married	Farmer	High School	\$30,000	No	Anticoagulants, Painkillers	Stroke prevention, pain management
008	2023-02-03	Liam O'Connor	41	M	Roman Catholic	Irish	Married	Construction Worker	High School	\$45,000	No	None	Physical therapy, strength training
009	2023-02-05	Olivia Taylor	25	F	Methodist	White	Single	Student	Undergraduate	\$15,000	No	Birth control pills	Contraception counseling, academic support
010	2023-02-08	Carlos Rodriguez	50	M	Catholic	Latino	Married	IT Specialist	Master's	\$70,000	Yes	Insulin, Blood thinners	Diabetes management, cardiovascular monitoring

TREATMENT RECORD

[illegible]

LEGEND: T = Temperature, A = Appetite, U = Urine, F = Faeces, H (Habitus) = Behaviour