ADMISSION, ASSESSMENT AND HISTORY RECORD

Cape of Good Hope

DBV SPCA

KENNEL No.	Q12	ADMISSION	97035

Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
					✓	

Date in	19 April 2023	Time in	16:00	Date for release	CHECKED LOST & FOUND

IDENTIFICATION & LOST AND FOUND	Lost & Found checked	✓ Yes / No	Lost & Found Date checked	APR 2023

Microchip / Collar or ID tag found	✓ Yes / No	Date scanned or checked	APR 2023	Microchip or ID tag number	

DESCRIPTION & HISTORY

Dog (circled)	Cat	Other species (Specify)	V- 12,11

Breed	Xbreed	Colour and Markings	Brown/white
Condition	underweight	Sex F	Age Adult
Temperament	Good	Sterilisation details No	Name Teffo

Coat S	Tail L	Teeth Condition fair	Ears floppy	Size S

Area found/ collected from	Macassar	Date	19/4/23
Reason for surrender	Confiscated		

ASSESSMENT

GOOD WITH	Yes	No
Children		
Cats		
Other Dogs		
Livestock/ other		
DO THEY:	**Yes**	**No**
Jump Fences		
Run Away		

COMMENTS

Vet Report Body Score + General Health

Surrendered by / Found by		Name	Christopher Louw
Residential Address	6066 Leonard Damon Road Macassar		
Postal Address	CAPTURED		
Tel (H) DISCHARGE	Tel (W) JOTFORM ON TRACKER	Cell	
Email			
Donation R None	Cash	Card	Eft	Receipt No. —
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PLEASE INSIST ON A RECEIPT

Confiscated: OB No: check 933/4/2023 Case No: 180 850 Inspector: Lwazi Ntwegele

STATEMENT OF SURRENDER

I do hereby **certify** that **I DO / I DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and **I DO / I DO NOT** know where it comes from. I also freely surrender all interest, if, any therin to the SPCA and I request that the animal be dealt with as deemed advisible in the discretion of the SPCA. It is expressly agreed that neither the SPCA nor its officers and employees will incur any obligation to me on account of such disposition of said animal/s. I confirm that I am over the age of eighteen (18) years if age. **Also see 'Conditions' on reversed side.**

Hiermee verklaar ek dat ek dier/e hierbo beskryf **BESIT / NIE BESIT NIE**, dat dit 'n **RONDLOPER / NIE RONDLOPER NIE** is, en dat ek **WEET / NIE WEET** waar dit vandaan kom nie. Ek doen ook vrywillig afstand van alle belange daarin, indien enige, ten gunste van die DBV en ek versoek dat die dier hanteer word soos wat die DBV goed ag. Daar word uitdruklik ooreengekom dat nóg die DBV nóg sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e nie. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien ook die 'Voorwaardes' op die agterblad.**

SIgnature	Lwazi	Witness for Society	Lwazi

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ On Date: _____

CONDITIONS / ORWAARDES

1. The Owner/ Finder hereby relinquishes all ownership rights to the animal/s described on the reverse to the SPCA for disposal at its sole discretion on the understanding that the Society shall endeavour to place it in a new home or, if unable to do so, effect its painless destruction.

2. If, in the opinion of a veterinarian or a qualified inspector in terms of Section 5 of Act 71 of 1962 (Animals Protection Act) an animal presented for admission is so diseased, severely injured or in such physical condition that it should be destroyed for humanitarian reasons, the Society shall have the right to effect such destruction by approved humane methods.

3. Any charges endorsed hereon are due and payable on request.

4 The Society will not home any animal unsterilised.

1. Die Eienaar / Vinder gee hiermee afstand van eienaarskap van die dier/e beskryf op die omgekeerde aan die DBV om meer te handel volgens hulle diskresie op die begrip dat die Vereniging sal poog om dit te plaas in 'n nuwe huis of, indien nie in staat om dit te doen, effek van sy pynloos vernietiging.

2. Indien, in die mening van 'n veearts of 'n gekawlifiseerde inspekteur in terme van Artikel 5 van Wet 71 van 1962 (Dierebeskermingswet) 'n dier wat aangebied word vir toelating wat so siek, ernstig beseer of in so 'n fisiese toestand is dat dit moet vir menslike redes vernietig word, die Vereniging die reg het om so 'n vermietiging te bewerkstellig deur goegekeurde meslike metodes.

3. Enige koste aan gegaan hierop is verskulgig en betaalbaar op aanvraag.

4. Die Vereniging sal nie 'n dier plaas wat nie gesteriliseer is nie.

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	[signature]
Reason for Euthanasia	APA . CD (+)		

Euthanase Bottle No: 633 Quantity used: 15ml

Name: Mtsithobe Signature: [signature] Date: 15/05/24

CLAIMANT

Name: Prof/Dr/Mr/Mrs/Ms (including initials) ___

Residential Address: ___

Tel No (H): ___ Tel No (W): ___ Cell No: ___

Postal Address: ___

Email Address: ___

Donation / Charge for animal: ___ Cash/Cheque/ Card (Receipt No.) ___

ID / Passport / Pension No: ___

Vehicle Reg. No: ___

PTS checklist
- [x] Collar matches form
- [ ] Vet's signature
- [x] Pound Master's Signature
- [x] Reason for PTS
- [x] Lost & Found checked
- [x] Scanned for Microchip
- [x] Species
- [x] Breed
- [x] Colour
- [x] Sex
- [x] Admission form completed in full?

AWA Initial/Sign: [signature]

Signature ___ Witness for Society ___

Microchip / Collar and ID tag given		Yes	Microchip or ID tag details
		No	

Date: ___

MEDICAL RECORD

Really emaciated

Date	Remarks	Treatment	Cost
20/4/23	A ✓ U ✓ F ✓ porridge	stools - Alert - underweight	
	mm pale pink, wd fine	Temp - 37.5	
	B/S ✓ VTC	NAD, few monocytes	
	CD ✓ negative		
	Tick + flea Rx ✓	Frontline	
	Dewormer ✓	Drontal (x3)	
	Kyrodyo inj 1.5ml SC	✓	

Heptonic ✓

Extra feeding ✓ ✓ ✓ ✓

W/D: 20kg

[signature]

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
21/04/23		5	✓	–	5	BCS = 2/5, mm pale pink.	
	AVIMARK					Passing Soft Stool, Appetite	
						good, Hydration OK.	
						RTK	
						Extra feeding in kennels	
22/4/23		5	✓	✓	4	mm ↓ pink wyd ok, Alert	
	AVIMARK					passed normal stool	
						UTC Mammary – teats feels abit	
						hard.	
23/4/23		5	✓	✓	4	mm ↓ pink wyd ok, Alert	
	AVIMARK					Awaiting RTH, passing solid stool	

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

TREATMENT RECORD

DATE	T	A	U	F	H	TREATMENT	PERSON
24/4/23		5	✓	✓	5	Mm pink hydration ok	
						very skinny but eating	
						fine awaiting RTK	
	AVIMARK						
						Dispensary → Abc Multivitamin Syrup	
						→ Multivit Syrup PO 2ml OD	
						→ Extra feeding ✓ ✓ ✓ ✓	
						Hills a/d added to food.	
25/4/23		5	✓	✓	5	Hills a/d food ✓ ✓ ✓ ✓	
						(RTK)	
						Mm pink hydration ok	
						Doing well awaiting RTK	
26/4/23		5	✓	✓	5	Mm pink hydration ok	
						Seems doing well. Still	
						awaiting RTK. Vaginal	
						discharge WTC before RTK	
						Discharge not severely present.	
						No concern at this point	
						Hills a/d food ✓	
						(RTK) when possible.	
27.4.23		5	✓	✓	5	mm pink hyd, good	
						BAR doing well Eating	
						fine Awaiting (RTK)	
						Slight Vaginal discharge	
						present	

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

RTK PP DAN (8)

CQ 12

HOSPITAL TREATMENT SHEET

Owner Name and Surname		Animal name		Sex	M / F
Contact number		Breed	PLL	Sterilised	Y / N
Reason for treatment	Conf	Description	Brown cat	Weight	12 kg
		Admission Nr	92035	Page Nr	1

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
28/4/23		5	✓	✓	5	mm pink hydration ok	
						Doing well. Eating +	
						feeding well. Passed normal	
						Stools. Awaiting RTC	
						Nobivac® 1-DAPPv → R. KC	
2-5-23		5	5	5	5	m. — pink hydr-	MR
						mm very tacky	
						food extra	
3-5-		5	5	—	4	m — pink hydr-	MR
						mm very tacky	
						food extra	
4--5		5	5	5	4	m. — pink hydr-	MR
						mm very tacky	
						food extra	

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

TREATMENT RECORD

DATE	T	A	U	F	H	TREATMENT	PERSON
5/5/23		5	y	y	5	Dog scared	
						Bright and responsive to	
						interaction	
13-5-23		5	5	y	✓	m. m. pale gums	mw
						and very thin	
						food extra	
15-5-23		5	y	y	5	m. m. pale gums	
						and dog is unable	
						to stand eyes discharge	
						CD test ⊕ +ve	
15/05/23						Dogs tested (+) for CD ; vet's	
						can proceed with APA PTS	[signature]

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

ADMISSION, ASSESSMENT AND HISTORY RECORD

Cape of Good Hope

DBV SPCA

KENNEL No.				ADMISSION	97035	
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated X	Request for euthanasia
Date in	19 April 2023		Time in	16:00	Date for release	

IDENTIFICATION & LOST AND FOUND							
Lost & Found checked	✓ Yes / No	Lost & Found Date checked	19 APR 2023				
Microchip / Collar or ID tag found	✗ Yes / No	Date scanned or checked	19 APR 2023	Microchip or ID tag number			

DESCRIPTION & HISTORY

Dog (circled)	Cat	Other species (Specify)	V- 12,11		
Breed	Xbreed	Colour and Markings	Brown/white		
Condition	underweight	Sex	F	Age	Adult
Temperament	Good	Sterilisation details	No	Name	Teff
Coat S	Tail L	Teeth Condition	fair	Ears	floppy
Size S					
Area found/ collected from	Macassar			Date	19/4/23
Reason for surrender	Confiscated				

ASSESSMENT

GOOD WITH	Yes	No
Children		
Cats		
Other Dogs		
Livestock/ other		
DO THEY:	**Yes**	**No**
Jump Fences		
Run Away		

COMMENTS

Vet Report Body Score + General Health check

Surrendered by / Found by		Name	Christopher Louw		
Residential Address	6056 Leonard Dawn Road Macassar				
Postal Address					
Tel (H)	Tel (W)	Cell			
Email					
Donation R None	Cash	Card	Eft	Receipt No. —	

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: _____ Case No: 150 850 Inspector: Lwazi Ntangele

STATEMENT OF SURRENDER

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Signature	Lwazi	Witness for Society	Lwazi

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ On Date: _____

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3. Enige koste aan gegaan hierop is verskulgig en betaalbaar op aanvraag.

4. Die Vereniging sal nie 'n dier plaas wat nie gesteriliseer is nie.

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	
Reason for Euthanasia			

Euthanase Bottle No: _____ Quantity used: _____

Name: _____ Signature: _____ Date: _____

CLAIMANT

Name: Prof/Dr/Mr/Mrs/Ms (including initials) _____

Residential Address: _____

_____

Tel No (H): _____ Tel No (W): _____ Cell No: _____

Postal Address: _____

_____

Email Address: _____

Donation / Charge for animal: _____ Cash/Cheque/ Card (Receipt No.) _____

ID / Passport / Pension No: _____

Vehicle Reg. No: _____

Signature _____ Witness for Society _____

Microchip / Collar and ID tag given		Yes	Microchip or ID tag details	Date: _____
		No		

MEDICAL RECORD

Really emaciated

Date	Remarks	Treatment	Cost
20/4/23	A ✓ U/V F ✓ porridge	stools - Alert - underweight	
	mm pale pink, Hyd fine	Temp - 37.5	
	B/S ✓ VTC	NAD, few monocytes	
	CD ✓ negative		W/D: 20k
	Tick + flea ex ✓	Frontline	
	Dewormer ✓	Drontal (x3)	
	Kyrolyso inj 1.5ml SC	✓	
	Heptonic ✓		