

ADMISSION, ASSESSMENT AND HISTORY RECORD

163

Cape of Good Hope



KENNEL No.				ADMISSION A 32515		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in 21/08/24			Time in 14 hoo		Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	Yes No	Lost & Found Date checked
Microchip / Collar or ID tag found	Yes No	Date scanned or checked	AUG 2024		Microchip or ID tag number

DESCRIPTION & HISTORY	Dog	Cat	Other species (Specify) 29kg			
	Breed	Mix Breed		Colour and Markings Tan		
	Condition	Docr		Sex	M	Age Adult
	Temperament	Friendly		Sterilisation details	Y	Name
	Coat	S	Tail	L	Teeth Condition	N
			Ears	D	Size	M
	Area found/ collected from	Riverlands				Date
Reason for surrender Confiscated						

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

Surrendered by	Name	HAWK		
Found by				
Residential Address				
Postal Address				
Tel (H)	Tel (W)	Cell		
Email				
Donation R	Cash	Card	Eft	Receipt No.

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: 1201/8/24 Case No: Inspector:

STATEMENT OF SURRENDER	
I do hereby certify that DO NOT own the animal/s described above, that IT IS NOT a stray and 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 advisable 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 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 nie. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. Sien ook die 'voorwaardes' op die agterblad.
Signature	Witness for Society

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 / VOORWAARDES

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 gekwalifiseerde 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 vernietiging te bewerkstellig deur goeiekeurde meslike metodes.

3. Enige koste aan gegaan hierop is verskuldig 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: **AVIMARK** 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

Date	Remarks	Treatment	Cost
	38.0C mm pink hot ch HBPC		
	Old wounds on face presented,		
	Dog still in good condition.		
	*pain meds		
	Inflacort 2	20:00pm.	
	Paracet 0 0 0 7pm		
	Eplebin 0 0 0 7pm		

22/8/24 Xrays - spine, pelvis & H&Q

HOSPITAL TREATMENT SHEET

Owner Name and Surname		Animal name		Sex	(M) / F
Contact number		Breed		Sterilised	Y / N
Reason for treatment		Description		Weight	29 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
22/8/24		5	✓	✓	4	BAR, mm - pink hyd-fair	
						Eating and drinking well.	Danica
						Stool and urine is normal	
						temp -	
						Old wounds on face.	
						X-ray: bilateral stifle arthritis	
						Rimadyl (100mg)	
						1 + 1/4 tab once daily for 7 days. @ 15h00	
						Due to severity I advise ethics for humane euthanasia.	

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

Dr. Dr. -

[illegible]

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