Room 11

Domestic Animal Rescue Organisation NPC

Registration number: 1999/006578/08
85 Main Road, Hout Bay, 7806 TEL: 021 790 0383/EMAIL: info@darg.org.za

OUTSIDE TREATMENTS

Date: 26/02

OWNER'S NAME:	Mr Elvine Brown for Wife
CELL NUMBER:	0tl 3121988
ADDRESS:	~~0688 45~~
SECOND CONTACT'S NAME:	074. 192. 1324. Husband
CELL NUMBER:	

NAME OF ANIMAL:	Bella.	DOG: ☐	CAT: ☐
STERILISED: YES ☐ NO ☐	AGREE TO STERILISE: YES ☑ NO ☐	Sex: M ☐	F: ☐
RTO: YES ☐ NO ☐	SURRENDER: YES ☑ NO ☐		

AGE:	BREED: Pitbull
DESCRIPTION:	
RABIES VAC: YES ☐ NO ☐	HISTORY:
REASON BROUGHT TO DARG:	Bite Tail OFF
ANIMAL HAS BEEN TREATED AT DARG BEFORE:	YES ☐ NO ☐ Vet Check

Animals are admitted at owner's risk. Whilst DARG exercises the most efficient known treatment and treats each animal with the greatest possible care and attention, neither DARG, its representatives or any veterinary advisor will be liable for any resulting loss or damage from such admission for treatment or otherwise.

If, in the opinion of a veterinarian in terms of Section 5 of Act 71 of 1962 (Animals Protection Act), an animal present for treatment is so diseased, severely injured or in such physical condition that there is no quality of life, it will be euthanized in the most humane way possible.

If said animal is not collected 14 days after the collection date arranged and agreed upon, DARG may regard the animal as surrendered.

"Any treatment" is subject to Agreement of Sterilisation of the animal. This condition is non-negotiable.

I, the Legal Owner YES ☐ OR Appointed representative (friend, family member) of owner YES ☐ have read and agree to the terms and conditions listed 1-4. I am further aware that failing to adhere to the conditions may result in ownership of the described animal to be relinquished to DARG.

Owner agrees to pay R 150 now and R _____ upon release of the animal.

Signature of Owner / Representative: Brown I.D. No. 8702160091081

Staff Name and Signature: _____

Management's signature: _____

PATIENT NAME: Belle

CAGE NUMBER: _____ WEIGHT: 21 kg

REASON FOR VISIT	VACCINATION						TESTED FOR	
☐ Spay ☐ Tail amp	DHPPi		CRP		Deworm		FIV / FELV	
	DHPPi/L	✓	CRP/L		Deflea		Distemper	
	Kennel Cough		Leucogen		Microchip		Parvo	
	Rabies	✓						

Temp.	°C	Heart Rate	Resp.	MM

NOTES OR OTHER TREATMENT:

27/02: Tail bone sticking out - infected. Need surgery or SPCA.

REASON FOR ADMISSION	Spay: ☐	Neuter: ☐	Other (Specify):
	Comments: _____		

Premed			Anaesthetic				Injections	
	Amount:	Time:		Req'd:	Given:	Drawn up:		Amount:
ACP			Thiopentone				Petcam	
Morphine			Propofol				Synulox	
							Duplocillin	
Medodin							Revazol	
Dolorex							Yohimbine	
Ketamine								

Valium		

Medication to go home:	Start:
1. Synulox 250mg x20	1 BID 10d
2. Metacam 2mg #10	1 OID 10d
3. Gabs 300mg #20	1 BID 10d

Discharge instructions:

_____

_____

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Stitches out on: _____ Follow up on: _____

Gmail

Darg Days <dargdays@gmail.com>

Vet Report for Jeremy & SPCA

1 message

Naomi Wolfaardt <drnaomiwolfaardt@gmail.com> 2 March 2026 at 13:23
To: DARG <info@darg.org.za>

VETERINARY MEDICAL REPORT

Patient Name: Bella
Species: Canine
Breed: Pit Bull Terrier
Sex: Female (Intact)
Coat Color: Tan and White
Date Seen: Friday, 27 February 2026
Attending Veterinarian: Dr. Naomi Wolfaardt

Presenting Complaint:
Bella presented for evaluation after the owner observed her persistently chewing and actively consuming portions of her tail.

Clinical Examination Findings:
On general physical examination, Bella was bright, alert, and responsive. Her vital parameters (temperature, pulse, and respiration) were within normal limits. No systemic abnormalities were detected at the time of examination.

However, examination of the tail revealed severe self-inflicted trauma. Approximately 10 cm of the tail remained. The average tail length of a Pit Bull Terrier is typically 20–25 cm, depending on individual conformation. The distal portion of Bella's tail was absent, with evidence of significant tissue loss. The remaining tail segment showed:
- Open, contaminated wound
- Marked soft tissue infection
- Necrotic tissue present
- Exposed coccygeal bone

The exposed bone and ongoing self-trauma place Bella at high risk for progressive infection, including osteomyelitis (bone infection), ascending infection, and systemic illness if left untreated.

Behavioral Considerations and Underlying Causes:
Current veterinary behavioral research indicates that self-mutilation in dogs is frequently associated with behavioral or psychological disorders when no primary medical cause is identified. Conditions that may lead to self-directed trauma include:
- Severe anxiety or chronic stress
- Compulsive disorders (canine compulsive disorder)
- Boredom and insufficient environmental enrichment
- Confinement stress
- Lack of physical and mental stimulation
- Past trauma or chronic frustration
- Attention-seeking behaviors that have been inadvertently reinforced

In many cases, tail mutilation begins as a mild irritation or behavioral fixation and progresses into compulsive self-harm. Once established, the behavior can become neurologically reinforced and difficult to extinguish without structured behavioral intervention.

Treatment Options and Recommendations:
1. Tail Amputation (Recommended Immediate Medical Intervention)
The most appropriate treatment to resolve the immediate medical condition is surgical tail amputation. This procedure would:

- Remove infected and necrotic tissue
- Prevent further ascending infection
- Eliminate the exposed bone
- Relieve ongoing pain and tissue damage

However, it is critically important to understand that surgery alone will not address the underlying behavioral component. Without comprehensive environmental modification and behavioral therapy, Bella's self-harming behavior is highly likely to be redirected to another body part (e.g., limbs, flank, or paws).

Successful long-term management would require:
- Significant environmental enrichment
- Increased physical exercise
- Structured daily mental stimulation
- Behavioral modification therapy
- Possible referral to a veterinary behaviorist
- Potential pharmacologic support for anxiety or compulsive behavior

This approach requires substantial time, financial commitment, and owner consistency.

2. Humane Euthanasia (Alternative Consideration)
If the owner is unable to afford the surgical procedure and ongoing environmental and lifestyle modifications (or is unable to commit to the necessary time and structured intervention required to prevent recurrence) then humane euthanasia must be considered as a welfare-based decision.

Bella is currently experiencing ongoing pain, infection, and progressive self-mutilation. Without definitive medical and behavioral intervention, her suffering will continue and likely worsen. In such circumstances, euthanasia may be the most humane option to prevent prolonged distress and further suffering.

Prognosis
With surgery and full behavioral intervention: Guarded to fair, dependent on owner compliance and response to therapy.
With surgery alone and no behavioral intervention: Poor long-term prognosis due to high risk of redirected self-mutilation.
Without intervention: Grave prognosis due to infection, pain, and continued tissue destruction.

Signed,
Dr. Naomi Wolfaard
DARG Principal Veterinarian
2 March 2026