

CC 18-15

HAMILTON TOWNSHIP ANIMAL CONTROL
2100 SYLVAN AVENUE
ANIMAL INFORMATION SHEET

DATE AND NUMBER: 7.3.18

A.C. OFFICER: SP

WHERE ANIMAL WAS FOUND: 399 Massachusetts ave

DESCRIPTION OF ANIMAL

DOG ☒ PUPPY ☐ CAT ☐ KITTEN ☐ OTHER ☐

BREED: Mix SEX: F

COLOR: Black/Brown LONG HAIR: ☐ SHORT HAIR: ☐

OWNERS: ☒ STRAY: ☐ DEAD: ☐ TRAPPED: ☐

LICENSE INFORMATION

YEAR: ☐ LICENSE #: ☐ CITY: ☐ STATE: ☐

CONFINEMENT DATES

FROM: ☐ TO: ☐

DISPOSITION OF ANIMAL

REDEEMED BY: ☐

ADDRESS: ☐

CITY: ☐ STATE: ☐ PHONE #: ☐

DATE RELEASED: ☐ RECEIPT #: ☐ FEE: ☐

ADOPTED BY: ☐

ADDRESS: ☐

CITY: ☐ STATE: ☐ PHONE #: ☐

DATE RELEASED: ☐ RECEIPT #: ☐ FEE: ☐

SAFEKEEP (NO FEE): ☐ REASON: ☐

EUTHANASIA DATE: ☐ TRANQ. CC: ☐ SLEEPAWAY CC: ☐ ACO: ☐

BITE CASE INFORMATION

PERSON BITTEN: ☐ AGE: ☐

ADDRESS: ☐ PHONE #: ☐

DATE: ☐ HOSPITAL: ☐

JH/192

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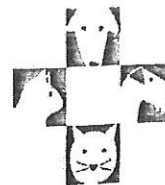
4

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18

15

**Columbus Central Veterinary
Hospital**
P. O. Box 220
Columbus, NJ 08022



Physical Exam Report Card

Owner's Name: A/C Hamilton Twp
Patient Name: Small dog #192
Breed: Mixed
Sex: Sex:
Color: Red And White

Doctor: Emergencies / *Stephan*

Date: 07-16-18
Time: 8:58p

07-03-19 Annual Preventative Blood Work

Physical Examination

Body Condition Score: 2 of 5
Weight: 9.6lbs
Temperature: 100°F

Heart Rate: 130 /min
Respiratory Rate: 36 /min

Presenting Problems

per Hamilton Twp Animal Control officer, he re states he received call that this patient was left inside a home alone in a cage for 4-5 days without food and water, when officer responded to call, dog was laying in urine and feces, was very wobbly, listless, and dehydrated

Exam Findings

Depressed, mm pink, tacky, 10% dehydrated, very weak

Coat and Skin: covered in urine and feces

Eyes: sunken eyes and facial features

Heart: no murmur

Lungs: clear

Abdomen: soft on palpation

Legs and Paws: overgrown toe nails

Neurological System: recumbent, unable to stand

Weight and Diet: cachexic, palpable spine, rib cage, hip bones

Normal: Ears, Nose and Throat, Mouth, Teeth and Gums, Gastrointestinal, Urogenital System,

Diagnosis

ZGE140	DEHYDRATION
ZGI130	DIARRHEA*
ZGE720	UNDERWEIGHT
	ELEVATED RENAL VALUES

Additional Client Instructions

She responded well to supportive treatment with intravenous fluids and medications. Her kidney values returned to normal. She has been eating and drinking well since and is no longer on any medication. It is recommended that you schedule a recheck appointment with your regular veterinarian in 2 weeks. A renal profile is recommended at that time.

INVOICE

Columbus Central Veterinary Hospital

P. O. Box 220
Columbus, NJ 08022
609-298-4600

Quality Medicine ... Compassionate Care

FOR: A/C Hamilton Twp
2100 Greenwood Ave
Hamilton, NJ 08609

Printed: 07-23-18 at 2:01p
Date: 07-23-18
Account: 15910
Invoice: 386948

Date	For	Qty	Description	Net Price
Services by Lisa Antas				
07-23-18	Small dog #192	1	RC K9 GI High Energy Dry 8.8#	41.75
Old balance				New balance
4930.48				4972.23
Charges				
41.75				
Payments				
0.00				

Reminders for: **Small dog #192** (Weight: 9.6 lbs - 20d) Last done

07-03-19 Annual Preventative Blood Work

Small dog #192's weight history (in lbs)

07-03-18 9.60

Now seeing Avian and Exotic Pets too!

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FOR: A/C Hamilton Twp
2100 Greenwood Ave
Hamilton, NJ 08609

Printed: 07-23-18 at 8:47a
Date: 07-12-18
Account: 15910
Invoice: 386217

Date	For	Qty Description	Net Price
Services by Kelly Stephan			
07-03-18	Small dog #192	1 VetLab Profile GHP, CBC, Electrolytes	206.00
	Includes:		
	Diagnostic Chemistry Profile		
	Electrolyte Panel		
	Complete Blood Count		
07-03-18		1 Hospitalization - Routine	81.50
	Includes:		
	Physical Exam (Doctor)		
	Monitoring (Technician)		
	Kennel Maintenance		
07-03-18		1 Catheterization - IV Fluid Setup	130.00
	Includes:		
	IV Catheterization		
	IV Line		
	Extension Sets		
	First Day of Fluids		
07-03-18		1 Fluid Therapy/ Management	67.50
	Includes:		
	IV Fluids for the Day		
	IV Pump Management		
07-03-18		1 Office Visit - Emergency Daytime	115.00
07-03-18		0.80 Ampicillin Inj 250Mg/MI administered	48.60
07-03-18		0.40 Cerenia Injectable administered	23.00
07-03-18		0.40 Famotidine Inj 20Mg/2MI Administered	40.80
07-03-18		1 Phone Call Notes	0.00
07-03-18		20 Metronidazole Syrup 100Mg/MI	53.00
07-03-18		DIAGNOSIS: UNDERWEIGHT	0.00
07-03-18		DIAGNOSIS: DIARRHEA*	0.00
07-03-18		DIAGNOSIS: DEHYDRATION	0.00
07-03-18		1 Scan New patient info	0.00
07-03-18		1 Daily SOAP	0.00
07-05-18		1 Phone Call Notes	0.00
07-05-18		1 Hospitalization - Routine	81.50

	Includes:		
	Physical Exam (Doctor)		
	Monitoring (Technician)		
	Kennel Maintenance		
07-05-18	1 Fluid Therapy/ Management	67.50	
	Includes:		
	IV Fluids for the Day		
	IV Pump Management		
07-05-18	0.40 Famotidine Inj 20Mg/2Ml Administered	28.80	
07-05-18	0.40 Cerenia Injectable administered	15.00	
07-05-18	1.20 Ampicillin Inj 250Mg/Ml administered	41.40	
07-05-18	0.20 Baytril Inj (100mg/ml) administered	15.00	
07-05-18	10 Amoxicillin Tab 200Mg	35.50	
07-05-18	10 Enrofloxacin 22.7mg	47.50	
07-05-18	1 Cerenia 16mg	27.50	
07-07-18	1 Hospitalization - Observation	54.50	
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-08-18	1 Daily SOAP	0.00	
07-08-18	1 Hospitalization - Observation	54.50	
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-10-18	1 Hospitalization - Observation	54.50	
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-11-18	1 Hospitalization - Observation	54.50	
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
Services by Lisa Antas			
07-10-18	1 Hospitalization - Observation	54.50	
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
Services by Lisa McKnight			
07-06-18	1 Medical Notes	0.00	
07-07-18	1 Chemistry - Renal Profile	164.50	
07-07-18	1 Medical Notes	0.00	
Services by Marian Boden			
07-04-18	1 Hospitalization - Routine	81.50	
	Includes:		

Physical Exam (Doctor)
Monitoring (Technician)
Kennel Maintenance

07-04-18	1 Fluid Therapy/ Management	67.50
	Includes:	
	IV Fluids for the Day	
	IV Pump Management	
07-04-18	0.40 Famotidine Inj 20Mg/2Ml Administered	28.80
07-04-18	0.40 Cerenia Injectable administered	15.00
07-04-18	1.20 Ampicillin Inj 250Mg/Ml administered	41.40
07-04-18	0.20 Baytril Inj (100mg/ml) administered	16.70
07-04-18	1 PCV - Total Protein	49.00
07-04-18	1 Medical Notes	0.00

Still very quiet and moderately dehydrated, but is more active, able to walk slowly after carried outside, is drinking water and as of 430 PM ate 2 helpings of baby food. No vomiting. Called Shaq and did not get an answer and no machine available..will continue fluids (did increase to 5 ml/kg/hr and changed to LRS since not going to check electrolytes today).. will leave to kelly again tomorrow since she was on the case. Cautiously optimistic since seems a good bit better today. PCV 54/ts 6.0. MB

Old balance	Charges	Payments	New balance
2628.48	1862.00	0.00	4490.48

Reminders for: **Small dog #192** (Weight: 9.6 lbs - 20d) Last done

07-03-19 Annual Preventative Blood Work

Small dog #192's weight history (in lbs)

07-03-18	9.60
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Quality Medicine ... Compassionate Care

FOR: A/C Hamilton Twp
2100 Greenwood Ave
Hamilton, NJ 08609

Printed: 07-23-18 at 8:49a
Date: 07-23-18
Account: 15910
Invoice: 386914

Date	For	Qty Description	Net Price
Services by Kelly Stephan			
07-12-18	Small dog #192	1 Hospitalization - Observation	54.50
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-16-18		1 Phone Call Notes	0.00
07-18-18		1 Daily SOAP	0.00
07-18-18		1 Phone Call Notes	0.00
07-21-18		4 Board - Canine	148.00
Services by Lisa Antas			
07-13-18		1 Hospitalization - Observation	54.50
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-14-18		1 Hospitalization - Observation	54.50
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-15-18		1 Hospitalization - Observation	54.50
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-16-18		1 Daily SOAP	0.00
07-17-18		1 Medical Notes	0.00
07-21-18		1 Board - Canine	37.00
07-22-18		1 Board - Canine	37.00
07-23-18		1 Daily SOAP	0.00
07-23-18		1 Phone Call Notes	0.00
Services by Lisa McKnight			
07-19-18		1 Daily SOAP	0.00
07-20-18		1 Medical Notes	0.00

Old balance	Charges	Payments	New balance
4490.48	440.00	0.00	4930.48

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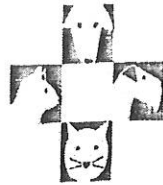
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ZGE720 UNDERWEIGHT
ELEVATED RENAL VALUES

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Old balance	Charges	Payments	New balance	
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07-03-18		1 Catheterization - IV Fluid Setup Includes: IV Catheterization IV Line Extension Sets First Day of Fluids	130.00
07-03-18		1 Fluid Therapy/ Management Includes: IV Fluids for the Day IV Pump Management	67.50
07-03-18		1 Office Visit - Emergency Daytime	115.00
07-03-18		0.80 Ampicillin Inj 250Mg/MI administered	48.60
07-03-18		0.40 Cerenia Injectable administered	23.00
07-03-18		0.40 Famotidine Inj 20Mg/2MI Administered	40.80
07-03-18		1 Phone Call Notes	0.00
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07-03-18		DIAGNOSIS: UNDERWEIGHT	0.00
07-03-18		DIAGNOSIS: DIARRHEA*	0.00
07-03-18		DIAGNOSIS: DEHYDRATION	0.00
07-03-18		1 Scan New patient info	0.00
07-05-18		1 Daily SOAP	0.00
07-05-18		1 Phone Call Notes	0.00
07-05-18		1 Hospitalization - Routine	81.50

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07-05-18	10 Enrofloxacin 22.7mg	47.50
07-05-18	1 Cerenia 16mg	27.50
07-07-18	1 Hospitalization - Observation	54.50
Includes:		
Monitoring (Technician)		
Kennel Maintenance		
07-08-18	1 Daily SOAP	0.00
07-08-18	1 Hospitalization - Observation	54.50
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Kennel Maintenance		
07-10-18	1 Hospitalization - Observation	54.50
Includes:		
Monitoring (Technician)		
Kennel Maintenance		
07-11-18	1 Hospitalization - Observation	54.50
Includes:		
Monitoring (Technician)		
Kennel Maintenance		
Services by Lisa Antas		
07-10-18	1 Hospitalization - Observation	54.50
Includes:		
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Includes:		

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07-14-18		1 Hospitalization - Observation	54.50
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-15-18		1 Hospitalization - Observation	54.50
	Includes:		
	Monitoring (Technician)		
	Kennel Maintenance		
07-16-18		1 Daily SOAP	0.00
07-17-18		1 Medical Notes	0.00
07-21-18		1 Board - Canine	37.00
07-22-18		1 Board - Canine	37.00
07-23-18		1 Daily SOAP	0.00
07-23-18		1 Phone Call Notes	0.00
Services by Lisa McKnight			
07-19-18		1 Daily SOAP	0.00
07-20-18		1 Medical Notes	0.00

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TOWNSHIP OF HAMILTON
DIVISION OF HEALTH
ANIMAL CONTROL

THE FOLLOWING ANIMALS HAVE BEEN ADOPTED OUT TO:

Sharon Kell Foster smiling 192

ID#

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |

THESE ANIMALS ARE ADOPTED AT NO FEE TO _____
AND BECOME THE PROPERTY OF THE ABOVE RESCUE ORGANIZATION. HAMILTON
TOWNSHIP AGREES TO TAKE BACK ANY ANIMAL WHICH IS NOT ADOPTED OR
FOSTERED ON THE BELOW DATE.

HAMILTON TOWNSHIP ALSO AGREES TO ACCEPT BACK ANY ANIMAL RETURNED TO
THEM WITHIN 30 DAYS FROM HAMILTON TOWNSHIP RESIDENTS ONLY, FOR A FEE
OF \$50.00

*I, the undersigned, having read this agreement, understand and agree to abide by all terms of this
Adoption Contract. In signing this agreement, we become the legal owners of the animal(s)
described on this contract, and we release the Township of Hamilton from any liability or damages
to a person or property caused by said animal(s).

HAMILTON TOWNSHIP

S. Pommers

RESCUE MEMBER (Print Name)

Sharon Kell

Signature

Sharon Kell

Date

8-1-18

At Columbus vet 1-8-19

Hamilton Township Animal Control

2100 Sylvan Ave.

Animal Information Sheet

Date: January 08, 2019

Animal ID #: dog 7

Attendant/ACO: sp

Where animal was found: 1720 s broad st

DESCRIPTION OF ANIMAL:

Species: canine Breed: pitbull

Weight: 45 Age: 5 Sex: male intact

Color: black Coat type: _____

Owners: _____ Stray: ☒ Expired: _____ Trapped: _____ Feral: _____ Born at Shelter: _____

Microchip Data:

Microchip #: n/a Date scanned #1: 1-8-19

Date scanned #2: _____ Scanned by: _____

Microchip Company: _____

Last Known Owner: _____ Contacted on: _____

Last Known Address: _____

LICENSE INFORMATION:

Year: _____ License #: _____

City: _____ State: _____

7 DAY CONFINEMENT PERIOD:

From: January 08, 2019 To: January 15, 2019

R# 0171

Safe Keep (no fee): _____

Reason: _____

Owner/next of Kin: _____ Phone#: _____

Address: _____

Euthanasia date: _____ Tranquilizer ml/cc: _____ Euthanasia Solution ml/cc: _____

ACO: _____ Route of Injection: _____

Reason: _____

Weight at time of euthanasia: _____

VETERINARIAN:

To be filled out for animals who have long stays at the vet

Veterinary Hospital: _____

Admission date: _____ Return date: _____

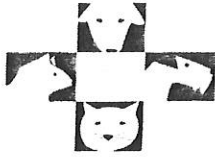
BITECASE INFORMATION:

Date of incident: _____ Confinement dates: _____ To: _____

Person Bitten: _____ Age: _____

Address: _____

Phone #: _____ Hospital: _____



Columbus Central Veterinary Hospital

Medical Discharge

A/C Hamilton Twp, Attn: Gail

1-8-19

Diagnosis: severe pyoderma (resolving with meds) ataxic in hind end.. suspect IVDD disc disease) this also improving with meds

Diet:

- ☒] Feed and water as normal.
- ☐] Special diet and instructions:

Activity:

- ☐] No exercise restriction.
- ☒] Restrict to: No running and jumping

Medications:

1. Cefpodoxime (antibiotic)
2. Ketoconazole (anti fungal)
3. Prednisone (decreasing dosage)
4. Pepcid (stomach protectant)

Start: 1/18/19 (Friday morning)

Start: tonight

Start: 1/18/19 (Friday morning) - that would be Day 3 of 7

Start: tonight

Special instructions: Please apply Osrnia to both ears when he gets to the shelter, then again in 1 week.. also has ear infections

Please give him a medicated bath twice weekly at the shelter

Recheck in: Dr. Boden will check at the shelter in a week

Recall: One of our technicians will be in touch with you in the next few days to check on your pets progress. If you have any questions or concerns before then, feel free to contact our office.

3075 Route 206, Columbus NJ 08022
(609) 298-4600



Hamilton Township
Animal Shelter

CANINE INTAKE EXAM

ANIMAL NAME: STINKY ID# D#7-19 DATE: 1/23/19

AGE: ~ 4-10^{1/2} BREED: pit bull COLOR: Black

SEX: (M) / MN / F / FS WEIGHT: 70 lbs

EXAM

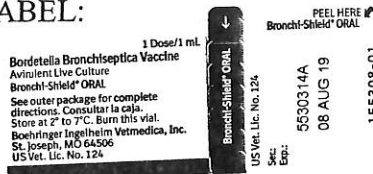
NOTES: Scanned 1/23/19 = Bordetella status AV - applied OSURNA
AV - negative, I made - nothing - ataxic in hind end -
but improved since hospitalized stay - still improving

DEWORM PRODUCT: ORAL DOSAGE/DATE 15 TAB of 136mg

HEARTWORM / TICK BORNE DISEASE TEST: (NEG) POS: DATE: 1/23/19

DISTEMPER COMBO LABEL:

BORDETELLA LABEL:



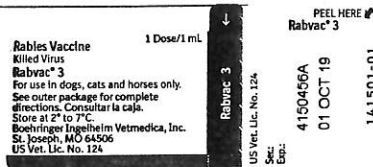
ADDITIONAL NOTES:

TECH INITIALS

RABIES VACCINATION:

DATE: 1/23/19 DR. M. Armenta

RABIES LABEL:



DR. NOTES

Continue pend until finished - finish KETO CONAZOLE -
2 more weeks of Cefprozil

OSURNA AV in 1 week
Ceporach Both given on 1/23/19

1/23/19 continue GMD DOSE of OSURNA AV - walking better in
hind end

2/7/19

- John looks better - a bit red, but not as obvious.
Winnie is good and, but gets more OK.

Dave Good for (b) (6) 54
(m)

30f

II

I.D.# DTH 7-19

MEDICATION



1. Prednisone 20mg - follow Directions on bottle
2. Pepcid 20mg - 1 tab by mouth 2x daily until gone
3. Ketoconazole 200mg - 1 tab by mouth 2x daily until gone
4. Cefpodoxime 200mg - 1 tab by mouth 1x daily until gone

SPECIAL INSTRUCTIONS:

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
1/17/19pm	Pepcid Ketoconazole	SP	1/22/19am	prednisone	CN
1/18/19am	Cefpodoxime Ketoconazole Pepcid prednisone	CN	1/23/19	prednisone	CN
1/18/19pm	Ketoconazole pepcid	JS	1/24/19	prednisone	CN
1/19/19am	Cefpodoxime Ketoconazole Pepcid prednisone	JC	1/25/19	skip	CN
1/19/19pm	Ketoconazole pepcid	S.P	1/26/19	prednisone	JC
1/20/19am	Cefpodoxime Ketoconazole Pepcid prednisone	S.P	1/27/19	skip	
1/20/19pm	Ketoconazole pepcid	S.P	1/28/19	prednisone	CN
1/21/19am	Cefpodoxime Ketoconazole prednisone	CN	1/29/19	skip	CN

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
1/30/19	prednisone	CN			
1/31/19	skip	CN			
2/1/19	prednisone	CN			
2/2/19	skip				
2/3/19	prednisone	RT			
2/4/19	skip				
2/5/19	prednisone	CN			
2/6/19	skip				
2/7/19	prednisone	SP			

I.D.# D# 7-19

MEDICATION



1. Cefpodoxime 200mg - give 1 tab 1X daily

2. _____

3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
1/25/19	cefpodoxime	CN	2/3/19	cefpodoxime	π
1/26/19	cefpodoxime	JC	2/4/19	cefpodoxime	JL
1/27/19	cefpodoxime	S.P	2/5/19	cefpodoxime	CN
1/28/19	cefpodoxime	CN	2/6/19	cefpodoxime	
1/29/19	cefpodoxime	CN			
1/30/19	cefpodoxime	CN			
1/31/19	cefpodoxime	Cn			
2/1/19	cefpodoxime	CN			
2/2/19	cefpodoxime	JC			

ANIMAL EXIT FORM

Microchip #: N/A

ACO/ Attendant: SP/AA

Date: February 09, 2019

Animal ID#: D#7-19

Redeemed by: _____

Address: _____

City: _____ State: _____ Phone#: _____

Date released: _____ Receipt #: _____ Fee: _____

Adopted by: Clifford Hlaing Address: 268 Fulmer Rd

City: Perkiomenvill State: PA Phone#: _____ Date released: February 09, 2019

Receipt #: 0171 Fee: 25.00

Safe Keep (no fee): _____

Reason: _____

Owner/next of Kin: _____ Phone#: _____

Address: _____

Euthanasia date: _____ Tranquilizer ml/cc: _____ Euthanasia Solution ml/cc: _____

Vet : _____ Route of Injection: _____

Reason: _____

Weight at time of euthanasia:

VETERINARIAN:

To be filled out for animals who have long stays at the vet

Veterinary Hospital: _____

Admission date: _____ Return date: _____

BITECASE INFORMATION:

Date of incident: _____ Confinement dates: _____ To: _____

Person Bitten: _____ Age: _____

Address: _____

Phone #: _____ Hospital: _____

Hamilton Township Animal Control

2100 Sylvan Ave.

Animal Information Sheet

Date: January 03, 2019

Animal ID #: D 3-19

Attendant/ACO: MM/AA/JS

Where animal was found: ACC/WHITE CITY

DESCRIPTION OF ANIMAL:

Species: CANINE Breed: AMERICAN BULLDOG

Weight: 65.0 Age: 3 YRS Sex: MALE/INTACT

Color: WHITE Coat type: SHORT

Owners: _____ Stray: ☒ Expired: _____ Trapped: _____ Feral: _____ Born at Shelter: _____

Microchip Data:

Microchip #: N/A Date scanned #1: 1/3/19

Date scanned #2: 3/13/19 - No chip Scanned by: _____

Microchip Company: _____

Last Known Owner: _____ Contacted on: _____

Last Known Address: _____

LICENSE INFORMATION:

Year: _____ License #: _____

City: _____ State: _____

7 DAY CONFINEMENT PERIOD:

From: January 03, 2019 To: January 11, 2019

Safe Keep (no fee): _____

Reason: _____

Owner/next of Kin: _____ Phone#: _____

Address: _____

Euthanasia date: _____ Tranquilizer ml/cc: _____ Euthanasia Solution ml/cc: _____

ACO: _____ Route of Injection: _____

Reason: _____

Weight at time of euthanasia: _____

VETERINARIAN:

To be filled out for animals who have long stays at the vet

Veterinary Hospital: _____

Admission date: _____ Return date: _____

BITECASE INFORMATION:

Date of incident: _____ Confinement dates: _____ To: _____

Person Bitten: _____ Age: _____

Address: _____

Phone #: _____ Hospital: _____



Hamilton Township
Animal Shelter

CANINE INTAKE EXAM

ANIMAL NAME: Boss ID# D# 3-19 DATE: 1/4/19

AGE: 3 yrs BREED: American Bulldog COLOR: White

SEX: M / MN / F / FS WEIGHT: 61.6

58.3 lbs 3/1/19

EXAM

NOTES: Scanned 1/4/19 = No chip All wnl, scratch red/irritated, seems Healthy
otherwise ears dirty/cleaned 1/4/19

DEWORM PRODUCT: Drontal plus ^{45/9 reuten} DOSAGE/DATE 1.5 Tabs 1/4/19
1.5 Tabs 3/1/19

HEARTWORM / TICK BORNE DISEASE TEST: NEG POS: _____ DATE: 1/4/19

DISTEMPER COMBO LABEL:



1/4/19

BORDETELLA LABEL: Bordetella Bronchiseptica Vaccine
Avirulent Live Culture
Bronchi-Shield* ORAL
See outer package for complete
directions. Consult a vet.
Store at 2° to 7°C. Burn this vial.
Boehringer Ingelheim Vetmedica, Inc.
St. Joseph, MO 64506
US Vet. Lic. No. 124



1/4/19

ADDITIONAL NOTES:

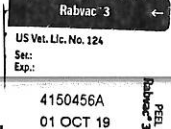
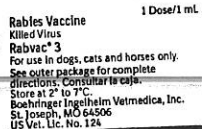
vetra 56-95 lbs 1/4/19

TECH INITIALS MM

RABIES VACCINATION:

DATE: 1/4/19 DR. Dr. [Signature]

RABIES LABEL:



DR. NOTES

White dandruff on back - wash & dry - mild flake - applied
200 mg Cefpodoxime (10) - 1 SID > 10 days
2/5/19 gabapentin 300 mg 1 cap 2x daily for 30 days
Prasidone 100 mg give 2 tabs 2x daily for 30 days to keep calm per mrs

2/28/19 ~~DD~~ Appears to be decided where on future report
A ~~trial~~ ^{camp} - per my inquiry - will add in CAPROGEN -
KEEP CAGE PRY

ANIMAL EXIT FORM

Microchip #: None

ACO/ Attendant: Schutz

Date: March 13, 2019

Animal ID#: D#3-19

Redeemed by:

Address:

City:

State:

Phone#:

Date released:

Receipt #:

Fee:

Adopted by: Jeannette Williams

Address: 1215 Chestnut Ave.

City: Trenton

State: NJ

Phone#:

Date released: March 13, 2019

Receipt #: 183

Fee: 25.00

Safe Keep (no fee):

Reason:

Owner/next of Kin:

Phone#:

Address:

Euthanasia date:

Tranquilizer ml/cc:

Euthanasia Solution ml/cc:

Vet :

Route of Injection:

Reason:

Weight at time of euthanasia:

VETERINARIAN:

To be filled out for animals who have long stays at the vet

Veterinary Hospital:

Admission date:

Return date:

BITECASE INFORMATION:

Date of incident:

Confinement dates:

To:

Person Bitten:

Age:

Address:

Phone #:

Hospital:

D# 3-19



Regular physical examinations and vaccinations can help your dog to live a healthy, happy life. You can protect your dog from the following common infectious diseases by following your veterinarian's recommended immunization schedule.

Rabies — Caused by a virus that affects the brain and the central nervous system. It can be transmitted by direct contact with saliva from an infected animal, usually through a bite.

Distemper — A highly contagious often fatal virus. The distemper virus generally spreads through saliva, urine and feces.

Hepatitis — An infectious viral disease that can lead to severe liver damage or death. Spread through contact with infected urine, this disease is very serious in puppies and older dogs.

Parvovirus — A highly contagious viral infection of the intestinal tract that is spread through contact with the feces of an infected dog. The disease strikes quickly and is especially dangerous for puppies.

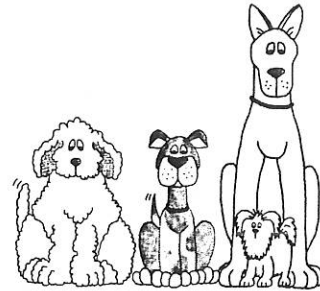
Coronavirus — A highly contagious intestinal disease. Symptoms include vomiting, diarrhea, fever and dehydration.

Leptospirosis — A bacterial disease that impairs kidney function and can lead to kidney failure. It is transmitted by contact with the urine of infected animals.

Parainfluenza — A viral respiratory infection responsible for kennel cough. Usually transmitted by contact with the nasal secretions of an infected dog. Puppies and older dogs are at a greater risk for complications than are healthy adult dogs.

Bordetellosis — A bacterial infection that is the primary cause of kennel cough. It can occur alone or in combination with other respiratory problems.

Lyme Disease — A complex bacterial disease that causes arthritis. Deer ticks transmit this disease.



Health Record of

Boss

Dog's Name

1/1/15

Birthdate

male-intact

Sex

American bulldog

Breed

White

Color and Markings

Allergies

Spay or Neuter Date

Owner's Name

Address

City

State

Zip

Home Phone

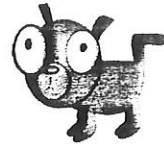
Work Phone

Emergency Contact

HAMILTON TOWNSHIP
ANIMAL SHELTER

I.D.# D 3-19

MEDICATION



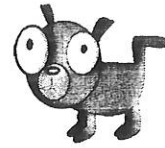
1. Gabapentin 300mg - give 1 Cap 2x daily for 30 days
2. Trazodone 100mg - give 2 tabs 2x daily for 30 days
3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
3/6/19	Gabapentin trazodone	<i>Dr. Mrs</i>	3/10/19	Gabapentin trazodone	<i>SP</i>
3/6/19	Gabapentin trazodone	<i>JS</i>	3/11/19	Gabapentin trazodone	<i>CN</i>
3/7/19	Gabapentin trazodone	<i>CN</i>	3/11/19	Gabapentin trazodone	<i>SP</i>
3/7/19	Gabapentin trazodone	<i>JS</i>	3/12/19	Gabapentin trazodone	<i>CN</i>
3/8/19	Gabapentin trazodone	<i>CN</i>	3/12/19	Gabapentin trazodone	<i>SP</i>
3/8/19	Gabapentin trazodone	<i>JS</i>	3/13/19	Gabapentin trazodone	<i>JC</i>
3/9/19	Gabapentin trazodone	<i>JC</i>	3/13/19	Gabapentin trazodone	
3/9/19	Gabapentin trazodone	<i>JS</i>	3/14/19	Gabapentin trazodone	
3/10/19	Gabapentin trazodone	<i>SP</i>	3/14/19	Gabapentin trazodone	

I.D.# 03-19

MEDICATION



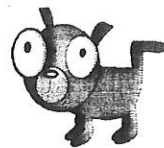
1. Cefpodoxime - 200mg - give 1 tab 1x daily for 10 days
2. Novox 100mg - give 1 tab 1x daily for 10 days
3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
3/8/19 3/9/19	Cefpodoxime novox	JC	3/17/19 3/18/19	Cefpodoxime novox	
3/9/19 3/10/19	Cefpodoxime novox	PT			
3/10/19 3/11/19	Cefpodoxime novox	CN			
3/11/19 3/12/19	Cefpodoxime novox	CN			
3/12/19 3/13/19	Cefpodoxime novox	JC			
3/13/19 3/14/19	Cefpodoxime novox				
3/14/19 3/15/19	Cefpodoxime novox				
3/15/19 3/16/19	Cefpodoxime novox				
3/16/19 3/17/19	Cefpodoxime novox				

I.D.# D3-19

MEDICATION



1. Cefpodoxime 200mg - give 1 tab 1x daily = 10 days

2. _____

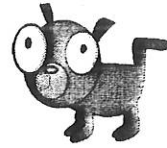
3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
1/5/19	cefpodoxime	JC	1/14/19	cefpodoxime	Ch
1/6/19	cefpodoxime	Ch			
1/7/19	cefpodoxime	Ch			
1/8/19	cefpodoxime	Ch			
1/9/19	cefpodoxime	JC			
1/10/19	cefpodoxime	JC			
1/11/19	cefpodoxime	Ch			
1/12/19	cefpodoxime	JC			
1/13/19	cefpodoxime	PT			

I.D.# 03-19

MEDICATION



1. Novox 100mg - give 1 tab 1X daily for 10 days

2. _____

3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
3/1/19	novox	CN	3/10/19	novox	
3/2/19	novox	SP			
3/3/19	novox	PT			
3/4/19	novox	CN			
3/5/19	novox	CN			
3/6/19	novox	CN			
3/7/19	novox	CN			
3/8/19	novox	CN			
3/9/19	novox				

I.D.# D3-19

MEDICATION



1. Cefpodoxime 200mg - give 1 tab 1x daily for

2. 10 Days

3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
2/26/19	cefpodoxime	CN	3/7/19	cefpodoxime	CN
2/27/19	cefpodoxime	CN			
2/28/19	cefpodoxime	SC			
3/1/19	cefpodoxime	CN			
3/2/19	cefpodoxime	SC			
3/3/19	cefpodoxime	S.P			
3/4/19	cefpodoxime	CN			
3/5/19	cefpodoxime	CN			
3/6/19	cefpodoxime	CN			



Hamilton Township
Animal Shelter

CANINE INTAKE EXAM

ANIMAL NAME: BOSS ID# D# 3-19 DATE: 1/4/19

AGE: 3 yrs BREED: American Bulldog COLOR: White

SEX: M / MN / F / FS WEIGHT: 61.6

58.3 LBS 3/1/19

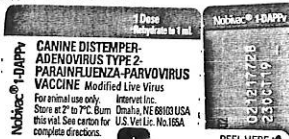
EXAM

NOTES: Scanned 1/4/19 = No chip All wnl, scrotum red/irritated, seems Healthy
otherwise ears dirty/cleaned 1/4/19

DEWORM PRODUCT: Dronal plus ^{45/9 reuten} DOSAGE/DATE 1.5 tabs 1/4/19
1.5 tabs 3/1/19

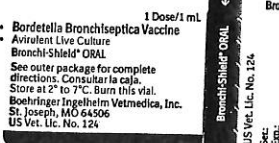
HEARTWORM / TICK BORNE DISEASE TEST: NEG POS: _____ DATE: 1/4/19

DISTEMPER COMBO LABEL:



1/4/19

BORDETELLA LABEL: Bordetella Bronchiseptica Vaccine



1/4/19

ADDITIONAL NOTES:

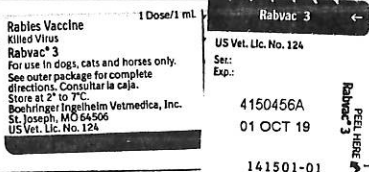
vetra 56-95 1/4/19

TECH INITIALS MM

RABIES VACCINATION:

DATE: 1/4/19 DR. Dr. [Signature]

RABIES LABEL:



DR. NOTES

Wife dantrolene can back up a protein - mild this ad - applied
250 mg 2x daily 2ND DOSE 1W 1 week
200 mg (4/1/19) (10) - 1 SID 2-10 days
OBUNIA 1/1/19 pen m3 to both ears
Cefpodoxime 2/25/19 200mg SID pen m3 wrists inflamed/pain infection
2/5/19 gabapentin 300 mg 1 cap 2x daily for 30 days
Traxadone 100 mg give 2 tabs 2x daily for 30 days to keep calm pen m3

2/28/19 ~~10~~ Appears to be decalated above on Patient report
↑ ~~17th~~ ~~remains~~ - per mm signing - will add to CAPPRSEN -
↑ KEEP CABG PRY

Animal View Report

Animal

Animal: A41120912



Printed: 05/13/2019 03:32PM

Animal Details

A41120912	Patch	Terrier, Pit Bull/Mix, White/Brindle, Large, 50.00 pound
190207-042-D	Dog	Spayed/Neutered: No
	Male	Declawed: None
	Young Adult	Bitten: Unknown

Animal Point In Time

Intake

02/07/2019 10:16AM	<u>Stray</u>	Jurisdiction: Hamilton Township, Record Owner: Nicole Muller
Status: Completed	ACO Pickup / Drop Off	Location found: Hamilton Ave/ Moffat
	<u>P32656687</u>	Shaquille Pennerman, (609) 890-3550, 2100 Sylvan Avenue, Hamilton, Hamilton Township, MERCER NJ 08610

Outcome

05/13/2019 03:28:00PM	<u>Adoption</u>	Record Owner: Nicole, Muller, Released: 05/13/2019 Outcome Created Date: 5/13/2019
Status: Completed	Onsite	3:29:00 PM Release Created Date: 05/13/2019
	<u>P33198753</u>	Jurisdiction: Hamilton Township
		Gregory Vitulli, [REDACTED] 174 Van Winkle Street, EAST RUTHERFORD, BERGEN NJ 07073
		No Promotion

Ownership / Guardianship

<u>PersonID</u>	<u>Date From</u>	<u>Person Name</u>	<u>Phone</u>	<u>Address</u>	<u>City</u>	<u>Completed By</u>
P33198753	5/13/2019	Gregory Vitulli	[REDACTED]	174 Van Winkle Street	EAST RUTHERFORD, BERGEN NJ 07073	Nicole Muller

Stage

<u>Stage</u>	<u>From (Date/Time)</u>	<u>Review Date</u>	<u>By</u>	<u>Stage Change Reason</u>
Released	5/13/2019 3:28:00 PM		Nicole Muller	
Available	2/7/2019 10:16:00 AM		Nicole Muller	

Location

<u>Location</u>	<u>SubLocation</u>	<u>From (Date/Time)</u>	<u>By</u>
Released		5/13/2019 3:28:00 PM	Nicole Muller

Dog Kennel #1 (New)

Dog Run 33

2/7/2019 10:16:00 AM

Nicole Muller

PetID



Hamilton Township Animal Control

2100 Sylvan Ave.

Animal Information Sheet

Date: February 07, 2019

Animal ID #: dog 23-19

Attendant/ACO: sp

Where animal was found: hailton ave.moffat

DESCRIPTION OF ANIMAL:

Species: canine Breed: pitbull

Weight: 50 Age: 2 1/2 yrs Sex: mintact M-neutered

Color: brindle patch/white Coat type: _____

Owners: _____ Stray: ☒ Expired: _____ Trapped: _____ Feral: _____ Born at Shelter: _____

Microchip Data:

Microchip #: 981020017627097 Date scanned #1: 2-7-19

Date scanned #2: _____ Scanned by: sp

Microchip Company: _____

Last Known Owner: marilyn hondorp Contacted on: 2-7-19

Last Known Address: 251 hickory corner rd

LICENSE INFORMATION:

Year: _____ License #: _____

City: _____ State: _____

7 DAY CONFINEMENT PERIOD:

From: February 07, 2019 To: February 14, 2019

Receipt # 0204
\$25.00

Safe Keep (no fee): _____

Reason: _____

Owner/next of Kin: _____ Phone#: _____

Address: _____

Euthanasia date: _____ Tranquilizer ml/cc: _____ Euthanasia Solution ml/cc: _____

ACO: _____ Route of Injection: _____

Reason: _____

Weight at time of euthanasia: _____

VETERINARIAN:

To be filled out for animals who have long stays at the vet

Veterinary Hospital: _____

Admission date: _____ Return date: _____

BITECASE INFORMATION:

Date of incident: _____ Confinement dates: _____ To: _____

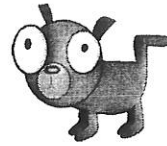
Person Bitten: _____ Age: _____

Address: _____

Phone #: _____ Hospital: _____

I.D.# D23-19 patch

MEDICATION



1. Trazodone 100mg - give 2 tabs 2x daily

2. _____

3. _____

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
3/15/19	trazodone	AM	3/19/19	trazodone	JS
3/15/19	trazodone	JS	3/20/19	trazodone	JC
3/16/19	trazodone	JC	3/20/19	trazodone	JS
3/16/19	trazodone	S.P	3/21/19	trazodone	JC
3/17/19	trazodone	PT	3/21/19	trazodone	JS
3/17/19	trazodone	PT	3/22/19	trazodone	JC
3/18/19	trazodone	JK	3/22/19	trazodone	JS
3/18/19	trazodone	SP	3/23/19	trazodone	JC
3/19/19	trazodone	JC	3/23/19	trazodone	SP

8/19

6209 3691

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
3/24/19	trazodone	RT	3/28/19	trazodone	JS
3/24/19	trazodone	PT	3/29/19	trazodone	JC
3/25/19	trazodone	JK	3/29/19	trazodone	JS
3/25/19	trazodone	SP	3/30/19	trazodone	JC
3/26/19	trazodone	JC	3/30/19	trazodone	SP
3/26/19	trazodone	JS	3/31/19	trazodone	JC
3/27/19	trazodone	JC	3/31/19	trazodone	NG PM shift
3/27/19	trazodone	JS	4/1/19	trazodone	JR
3/28/19	trazodone	JC	4/1/19	trazodone	SP

74

I.D.# 023-19

"Patch"

MEDICATION



1. Trazodone 100 mg - give 2 tabs 2x daily

2. _____

3. _____

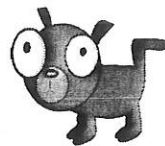
SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
4/2/19	trazodone	PT	4/6/19	trazodone	JS
4/2/19	trazodone	PT	4/7/19	trazodone	PT
4/3/19	trazodone	JL	4/7/19	trazodone	PT
4/3/19	trazodone	PT	4/8/19	trazodone	SP
4/4/19	trazodone	JK	4/8/19	trazodone	SP
4/4/19	trazodone	JS	4/9/19	trazodone	JL
4/5/19	trazodone	JL	4/9/19	trazodone	JS
4/5/19	trazodone	JS	4/10/19	trazodone	JL
4/6/19	trazodone	JL	4/10/19	trazodone	JS

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
4/11/19	trazodone	JC	4/15/19	trazodone	SP
4/11/19	trazodone	JB	4/16/19	trazodone	JC
4/12/19	trazodone	JC	4/16/19	trazodone	JB
4/12/19	trazodone	JB	4/17/19	trazodone	JC
4/13/19	trazodone	JC	4/17/19	trazodone	JB
4/13/19	trazodone	SP	4/18/19	trazodone	JC
4/14/19	trazodone	PT	4/18/19	trazodone	JB
4/14/19	trazodone	PT	4/19/19	trazodone	JC
4/15/19	trazodone	JK	4/19/19	trazodone	SP

I.D.# D# 23-19 (patch)

MEDICATION



1. Cefpodoxime 200mg - give ⁽¹⁾ tab 1X daily until gone
2. Trazodone 100mg - give 2 tabs daily 2 X daily until gone
3. _____

SPECIAL INSTRUCTIONS: Started meds @ Columbus vet, 2 days
of meds @ the shelter

[illegible]



Hamilton Township
Animal Shelter

CANINE INTAKE EXAM

ANIMAL NAME: Patch ID# 23-19 DATE: 3/21/19

AGE: 4 YRS BREED: pit bull mix COLOR: white w/ patch on eye

SEX: M / (MN) / F / FS WEIGHT: 69.0

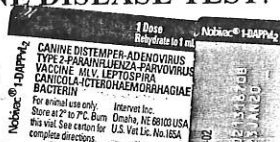
EXAM

NOTES: Scanned 3/21/19 = 981020017627097 bilateral left ear infection, Happy tail healing
seems healthy otherwise, cleaned ears 3/21/19 OSURVIA applied to both ears
on 3/21/19, OSURVIA Applied to both ears 3/28/19

DEWORM PRODUCT: 45/9 Reater Drontal plus DOSAGE/DATE: 1.5 tabs 3/21/19

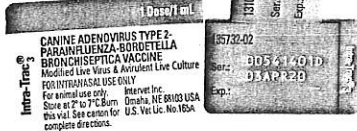
HEARTWORM / TICK BORNE DISEASE TEST: (NEG) POS: _____ DATE: 3/21/19

DISTEMPER COMBO LABEL:



3/21/19

BORDETELLA LABEL:



3/21/19

ADDITIONAL NOTES:



3/21/19

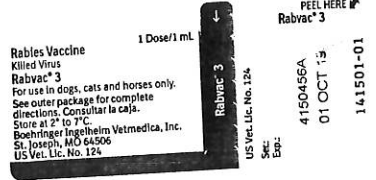
Bravecto 4/24/19 good for 3 months

TECH INITIALS MW/AA

RABIES VACCINATION:

DATE: 3/21/19 DR. M. B. [signature]

RABIES LABEL:



DR. NOTES



Hamilton Township
Animal Shelter

CANINE INTAKE EXAM

ANIMAL NAME: Patch ID# D23-19 DATE: 2/10/19

AGE: 4yrs BREED: pit bull COLOR: White w/ Brindle patch on eye

SEX: M / MN / F / FS WEIGHT: 60 lbs 3/1/19

EXAM

NOTES: Scanned 2/10/19 = #981020017627097

DEWORM PRODUCT: DeanFol plus ^{45/gw} DOSAGE/DATE ^{17lb} 3/1/19

HEARTWORM / TICK BORNE DISEASE TEST: NEG POS: _____ DATE: _____

DISTEMPER COMBO LABEL:

BORDETELLA LABEL:

ADDITIONAL NOTES:

TECH INITIALS _____

RABIES VACCINATION:

DATE: _____ DR. _____

RABIES LABEL:

DR. NOTES _____

CERTIFICATE OF SPAY/NEUTER

This is to certify that on 06/02/2017, the animal described below
was altered by People for Animals spay/neuter clinic.

Pet Name: 121-17 Jackson
Species: Canine
Date of Birth: 05/25/2015
Breed: Staffie mix
Color: White/Brindle
Sex: MN
Microchip #: 981020017627097

Owner: AFEW
PO Box 1341
Hightstown, NJ 08520
Telephone: (609) 209-9327

Given:

Booster Due:

Vaccinations:
Rabies Vaccination
Canine Distemper Vaccination
Bordetella Vaccination
Lyme Vaccination
Leptospirosis Vaccination
Canine Influenza Vaccine

Iris Bieby

Patient Chart

Columbus Central Veterinary Hospital

P. O. Box 220
Columbus, NJ 08022
609-298-4600

Printed: 03-13-19 at 10:26a

CLIENT INFORMATION

Name Attn: Gail A/C Hamilton Twp (15910)
Address 2100 Greenwood Ave
Hamilton, NJ 08609

PATIENT INFORMATION

Name	D #23-19Patches	Species	Canine
Sex	Male, Neutered	Breed	Pit Bull
Birthday	02-11-19	Age	4w
ID		Rabies	
Color	White - Blk Spo	Weight	0.00 lbs
Reminded	(none)	Codes	

Reminders for: D #23-19Patches Last done
02-11-20 Annual Preventative Blood Work

MEDICAL HISTORY

Date	By	Code	Description	Qty (Variance)
02-19-19	HD	MC0051	Scan txt sheets and anesthesia	
02-13-19	MB	MA1044	Discharge Notes	
02-12-19	MB	HOG020	Hospitalization - Observation Doing well.. tail still not bleeding.. trazodone seems to calm him down. Will watch until tomorrow and if not bleeding. MB	
02-11-19		WLIST\$	By: LF, Rx Refill IN HOUSE Please fill trazodone and cefpodoxime.. staying for a few days for observation... subtract 2 trazodone and 1 cefpo from what is filled as these were given this morning MB SK: 02-11-19 at 12:40p: filled by LF, checked	
02-11-19	MB	MC0054	Prescription Filled	
		HOG031	Daily Treatment Sheet	5
		AB7003	Cefpodoxime 200 mg	
			give 1 tablet once daily until finished	
		AT009	Trazodone 100mg Tablet	18
			give 2 tablets every 8-12 hours for sedation	
		HOG020	Hospitalization - Observation	
		HOG032	Medical Notes	
			Had looked at Patches at the shelter when there was blood all over the cage from "happy tail" and decided we needed to amputate.. today when dropped off was NOT bleeding, and see 2 superficial wounds that are scabbed over .. decided to try trazodone and antibiotics and observe for a couple of	

Columbus Central Veterinary Hospital
P. O. Box 220
Columbus, NJ 08022
609-298-4600

Patient Chart for D #23-19Patches
Date: 03-13-19, Time: 10:26a

Client: Attn: Gail A/C Hamilton Twp
Page: 2

Date	By	Code	Description	Qty (Variance)
			days to see what happens. MB	
02-11-19	MB	MC0051	Scan: new client info	
		APPT\$	Appointment notes for 02-11-19	
			tail amputation ok per MB	
		VI\$IT	Patient check-in	
			tail amputation ok per MB	

Age:

SUBJECTIVE SECTION

tail amputation ok per MB

Hamilton Township Animal Control

2100 Sylvan Ave.

Animal Information Sheet

Date: March 27, 2019

Animal ID #: D#63-19

Attendant/ACO: AA

Where animal was found: 12 Sayen Dr.

DESCRIPTION OF ANIMAL:

Species: Canine Breed: Beagle Shephard mix

Weight: 35 Age: Adult Sex: M-N

Color: Black/Tan Coat type: short

Owners: _____ Stray: ☒ Expired: _____ Trapped: _____ Feral: _____ Born at Shelter: _____

Microchip Data:

Microchip #: N/A Date scanned #1: 3/27/19

Date scanned #2: _____ Scanned by: AA

Microchip Company: _____

Last Known Owner: _____ Contacted on: _____

Last Known Address: _____

LICENSE INFORMATION:

Year: _____ License #: _____

City: _____ State: _____

7 DAY CONFINEMENT PERIOD:

From: March 27, 2019 To: April 03, 2019

Safe Keep (no fee): _____

Reason: _____

Owner/next of Kin: _____ Phone#: _____

Address: _____

Euthanasia date: _____ Tranquilizer ml/cc: _____ Euthanasia Solution ml/cc: _____

ACO: _____ Route of Injection: _____

Reason: _____

Weight at time of euthanasia: _____

VETERINARIAN:

To be filled out for animals who have long stays at the vet

Veterinary Hospital: _____

Admission date: _____ Return date: _____

BITECASE INFORMATION:

Date of incident: _____ Confinement dates: _____ To: _____

Person Bitten: _____ Age: _____

Address: _____

Phone #: _____ Hospital: _____



Hamilton Township
Animal Shelter

CANINE INTAKE EXAM

ANIMAL NAME: _____ ID# 063-19 DATE: 3/28/19

AGE: 7yrs BREED: Beagle / Shepherd mix COLOR: Tan / Black

SEX: M / (MN) / F / FS WEIGHT: _____

(cleaned ears 3/28/19)

EXAM

NOTES: Went to Columbus vet for skin 3/28/19 Applied ointment 3/28/19
to both ears, Sebacole Bath given 3/28/19, Sebacole Bath given 4/1/19

DEWORM PRODUCT: _____ DOSAGE/DATE _____

HEARTWORM / TICK BORNE DISEASE TEST: NEG POS: _____ DATE: _____

DISTEMPER COMBO LABEL: _____

BORDETELLA LABEL: _____

ADDITIONAL NOTES: _____

TECH INITIALS _____

RABIES VACCINATION:

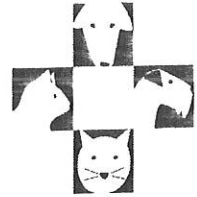
DATE: _____ DR. _____

RABIES LABEL: _____

DR. NOTES _____

**Columbus Central Veterinary
Hospital**

P. O. Box 220
Columbus, NJ 08022



Physical Exam Report Card

Owner's Name: Attn: Gail A/C Hamilton Twp
Patient Name: D#63-19
Breed: Shepherd Mix
Sex: Neutered Male
Color: Black - Brown

Doctor: Emergencies

Date: 03-27-19
Time: 2:50p

03-26-20 Annual Preventative Blood Work

Physical Examination

Body Condition Score: 3 of 5
Weight: 35lbs
Temperature: 101.7°F

Heart Rate: /min
Respiratory Rate: /min

Presenting Problems

check skin,,, just brought to shelter.. concerned about skin and possible mange

Exam Findings

B and A and very nice dog... neutered male.. no microchip... bacterial infections both ears..
negative skin scrapings.. deep pyoderma (yeast and bacterial) ventral chest and abdomen,
dermatitis legs and feet

Rest of PE N/R

Diagnosis

ZDL150DERMATITIS, ALLERGIC

ZDL520PYODERMA, DEEP*

ZEA050 OTITIS EXTERNA DUE TO BACTERIA *

Additional Client Instructions

MEDS YOU HAVE AT SHELTER

Cefpodoxime 100 mg (30) 1 tablet once daily

Clean and apply Osumia to both ears, now and in 1 week

prednisone 20 mg (14) give 1/2 tablet every 12 hours for 7 days, then once daily for 7 days, the
every other day until finished

Medicated bath 2-3 times weekly until skin healed

MEDS GOING TO SHELTER

Ketoconazole.. give as directed

2x daily
2 tabs 7 days
2 tabs 1x daily 7 days
2 tabs 1x every other day 7 days

I.D.# D-63-19

MEDICATION



1. Cefpodoxime 100mg - give 1 TAB daily until gone
2. Prednisone ~~5~~mg - follow Directions on Bottle
3. Ketoconazole 200mg - give 1/2 tab 2 x daily

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
3/28/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	mm	4/1/19	KETOCONAZOLE PREDNISONE	Redeemed
3/28/19	KETOCONAZOLE PREDNISONE Seborrhea bath given	JS	4/2/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	
3/29/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	JL	4/2/19	KETOCONAZOLE PREDNISONE	
3/29/19	KETOCONAZOLE PREDNISONE	JS	4/3/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	
3/30/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	JL	4/3/19	KETOCONAZOLE PREDNISONE	
3/30/19	KETOCONAZOLE PREDNISONE	SP	4/4/19	KETOCONAZOLE CEFPODOXIME Prednisone	
3/31/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	JL	4/4/19	KETOCONAZOLE	
3/31/19	KETOCONAZOLE PREDNISONE	No pm shift 2	4/5/19	PREDNISONE KETOCONAZOLE CEFPODOXIME	
4/1/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	JK	4/5/19	KETOCONAZOLE	

Redeemed 4-1-19

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
4/6/19	KETOCONAZOLE CEFPODOXIME Prednisone		4/10/19	KETOCONAZOLE	
4/6/19	KETOCONAZOLE		4/11/19	PREDNISONE KETOCONAZOLE CEFPODOXIME	
4/7/19	PREDNISONE KETOCONAZOLE CEFPODOXIME		4/11/19	KETOCONAZOLE	
4/7/19	KETOCONAZOLE		4/12/19	KETOCONAZOLE CEFPODOXIME	
4/8/19	KETOCONAZOLE CEFPODOXIME Prednisone		4/12/19	KETOCONAZOLE	
4/8/19	KETOCONAZOLE		4/13/19	PREDNISONE KETOCONAZOLE CEFPODOXIME	
4/9/19	PREDNISONE KETOCONAZOLE CEFPODOXIME		4/13/19	KETOCONAZOLE	
4/9/19	KETOCONAZOLE		4/14/19	KETOCONAZOLE CEFPODOXIME	
4/10/19	KETOCONAZOLE CEFPODOXIME Prednisone		4/14/19	KETOCONAZOLE	

I.D.# _____

MEDICATION



1. _____
2. _____
3. _____

Redeemed 4-1-19

SPECIAL INSTRUCTIONS: _____

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
4/15/19	KETOCONAZOLE PREDNISONE CEFPODOXIME		4/19/19	KETOCONAZOLE	
4/15/19	KETOCONAZOLE		4/20/19	KETOCONAZOLE CEFPODOXIME	
4/16/19	KETOCONAZOLE CEFPODOXIME		4/20/19	KETOCONAZOLE	
4/16/19	KETOCONAZOLE		4/21/19	KETOCONAZOLE PREDNISONE CEFPODOXIME	
4/17/19	KETOCONAZOLE PREDNISONE CEFPODOXIME		4/21/19	KETOCONAZOLE	
4/17/19	KETOCONAZOLE		4/22/19	KETOCONAZOLE CEFPODOXIME	
4/18/19	KETOCONAZOLE CEFPODOXIME		4/22/19	KETOCONAZOLE	
4/18/19	KETOCONAZOLE		4/23/19	PREDNISONE KETOCONAZOLE CEFPODOXIME	
4/19/19	KETOCONAZOLE PREDNISONE CEFPODOXIME		4/23/19	KETOCONAZOLE	

Redeemed 4-1-19

DATE/TIME	MEDICATION	INITIALS	DATE/TIME	MEDICATION	INITIALS
4/24/19	KETOCONAZOLE CEFPODOXIME	↓			
4/24/19	KETOCONAZOLE				
4/25/19	KETOCONAZOLE CEFPODOXIME				
4/25/19	KETOCONAZOLE				
4/26/19	KETOCONAZOLE CEFPODOXIME				
4/26/19	KETOCONAZOLE	↓			

Columbus Central Veterinary Hospital

P. O. Box 220
Columbus, NJ 08022
609-298-4600



COLUMBUS CENTRAL
**VETERINARY
HOSPITAL**

Quality Medicine ... Compassionate Care

FOR: Attn: Gail A/C Hamilton Twp
2100 Greenwood Ave
Hamilton, NJ 08609

Printed: 04-01-19 at 2:34p
Date: 03-29-19
Account: 15910
Invoice: 403253

Date	For	Qty	Description	Net Price
Services by Emergencies				
03-27-19	D#63-19	1	Scan New client/patient info	0.00
Services by Marian Boden				
03-12-19	Jimmy D Cat # 3	1	Scan: Txt sheets	0.00
03-27-19	D#63-19	1	Office Visit - Emergency Daytime	115.00
03-27-19		30	Ketoconazole 200mg	58.00
03-27-19		1	Skin Scrape and Analysis	54.50
03-27-19		1	Prescription Filled	0.00
03-27-19		1	Prescription Checked	0.00
03-27-19		1	Fecal Ova and Parasites w/ Giardia	71.00
Old balance				New balance
31728.40				32026.90
Charges				
298.50				
Payments				
0.00				

Reminders for: D#63-19 (Weight: 35.0 lbs - 5d)		Last done
03-26-20	Fecal Parasite Test	03-27-19
03-26-20	Annual Preventative Blood Work	

D#63-19's weight history (in lbs)

03-27-19	35.00
----------	-------

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Tell us how we are doing! The veterinarians and staff at CCVH strive to give you and your pet the highest quality service and attention. Please visit our website and fill out our survey or complete one at your next visit! Thank you for your feedback!

Animal View Report

Animal

Animal: A41783836



Printed: 06/20/2019 04:19PM

Animal Details

A41783836	Arya	Terrier/Mix, White/Beige, Small, 15.00 pound
190526-188-d	Dog	Spayed/Neutered: No
	Female	Declawed: None
	Adult	Bitten: Unknown

Animal Point In Time

Intake

05/29/2019 09:55AM	<u>Transfer In</u>	Jurisdiction: Hamilton Township , Record Owner: Nicole Muller
Status: Completed	Coalition Partner	Reason: Medical attention , Length Owned: 3.00 Days , Source: Found Stray
	<u>P32605676</u>	Marian Boden , [REDACTED] 2100 Sylvan Avenue, Hamilton, NJ 08610
		Columbus Central Veterinary Hospital, (609) 298-4600
05/27/2019 11:21AM	<u>Stray</u>	Jurisdiction: Hamilton Township , Record Owner: Nicole Muller
Status: Completed	Public Drop Off	Location found: 908 cedar In
	(No Person)	

Outcome

06/04/2019	<u>Adoption</u>	Record Owner: Nicole, Muller , Released: 06/04/2019 Outcome Created Date: 6/4/2019
11:31:00AM		11:32:00 AM Release Created Date: 06/04/2019
Status: Completed	Onsite	Jurisdiction: Hamilton Township
	<u>P33333469</u>	Karen Applegate , [REDACTED] 15 Kerr Drive, Hailton NJ 08610
		No Promotion
05/27/2019	<u>Transfer Out</u>	Record Owner: Nicole, Muller , Released: 05/27/2019 Release Created
11:22:00AM		Date: 05/27/2019
Status: Completed	Coalition Partner	Jurisdiction: Hamilton Township
	<u>P32605676</u>	Marian Boden , [REDACTED] 2100 Sylvan Avenue, Hamilton, MERCER NJ 08610
		Columbus Central Veterinary Hospital, (609) 298-4600

Ownership / Guardianship

<u>PersonID</u>	<u>Date From</u>	<u>Person Name</u>	<u>Phone</u>	<u>Address</u>	<u>City</u>	<u>Completed By</u>
<u>P33333469</u>	6/4/2019	Karen Applegate	[REDACTED]	15 Kerr Drive	Hailton NJ 08610	Nicole Muller

Stage

<u>Stage</u>	<u>From (Date/Time)</u>	<u>Review Date</u>	<u>By</u>	<u>Stage Change Reason</u>
Released	6/4/2019 11:31:00 AM		Nicole Muller	

Waiting for Pick Up 6/3/2019 10:14:48 AM
On Hold 5/29/2019 9:55:53 AM
Released 5/27/2019 11:22:00 AM
Medical Treatment 5/27/2019 11:21:02 AM

Nicole Muller
Shaquille Pennerman
Shaquille Pennerman
Shaquille Pennerman

Location

<u>Location</u>	<u>SubLocation</u>	<u>From (Date/Time)</u>	<u>By</u>
Released		6/4/2019 11:31:00 AM	Nicole Muller
Small Animal Rm	Small Rm	5/29/2019 9:55:53 AM	Shaquille Pennerman
Released		5/27/2019 11:22:00 AM	Shaquille Pennerman
External Transfer	Colombus Animal Hosp	5/27/2019 11:21:02 AM	Shaquille Pennerman

Microchip

PetID