

**FM 1488 Animal Medical Center
Spay Surgical Discharge Instructions**

Client: Adopt a Rescued Friend **Patient Name:** 25-Elle
Phone: (713) 306-8045 **Breed:** Terrier Mix
Doctor: Jess T. Jeffrey, DVM **Species:** Canine
Age: 5 Mos. 2 Wks. 5 Days
Sex: Female
Current Weight: 12 pounds

Home Care Instructions: 25-Elle has had an ovariohysterectomy surgery (Spay). Your pet may be sore or tired for the next several hours or days. Please see instructions below for additional information about how to treat 25-Elle when you return home.

What to Expect: Some degree of nausea and grogginess is expected following general anesthesia. It is normal for your pet to not produce a bowel movement for up to 48 hours after anesthesia. Please monitor 25-Elle for lethargy, depression, inappetence, vomiting, diarrhea and changes in attitude.

Exercise Restrictions:

- Leash walk
- No running/jumping/climbing for 2 weeks
- No bathing until incision is healed (at least 14 days)

Feeding:

- Only give your pet 1/4 of their normal diet and water rations this evening.
- Regular Diet

Prescriptions: If 25-Elle has been given medications, please give them according to the following directions. If there is excessive vomiting, diarrhea, or if your pet will not take this medication, please stop giving the medication and call us immediately.

ITEM DESCRIPTION	DIRECTIONS	QUANTITY
DERAMAXX 12 mg	Give 1/2 tablet(s) by mouth with food every 24 hours for inflammation. Do not give with aspirin or other anti-inflammatory medications.	4.00

Begin Prescribed Medications: Tonight (7:00pm) Tomorrow (8:00am)

Wound Care: Please monitor the incision twice a day. If there is any excessive redness, swelling or opening of the incision call us immediately. Please keep the incision site clean and dry and do not apply any medications to the surgery site unless directed to do so. You should not allow your pet to swim or bathe your pet for two weeks following surgery.

- Please use an E-collar to prevent your pet from licking at the incision.

Special Instructions:

- Since 25-Elle was spayed, we recommend decreasing their daily food amount by 25% to prevent them from becoming overweight. Once the reproductive organs are removed, our pets require less energy overall.

If you have any questions or concerns please do not hesitate to call our office immediately at 281-259-8806 during business hours. If you have an emergent concern after normal business hours contact the Animal Emergency Clinic of Conroe at 936-539-3800 or 936-441-4631. We are here to help.



Adopt A Rescued Friend, Inc. ("AARF")
 PO Box 62736
 Houston, TX 77205
 (713) 854-1216
Info@AARFHouston.org
WWW.AARFHouston.org

Vaccination and Wormer Record

Name ELLIE Case # 14-0122 Est DOB 4/7/2014

Description of Dog: Boston Terrier mix

Rabies _____ Spay/Neuter _____ Heartworm Pos / Neg / N/A

Date 6/2/2014
 Age _____ Wt _____

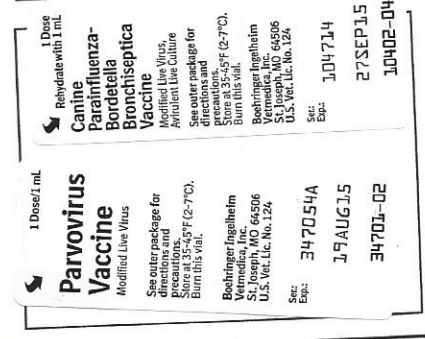
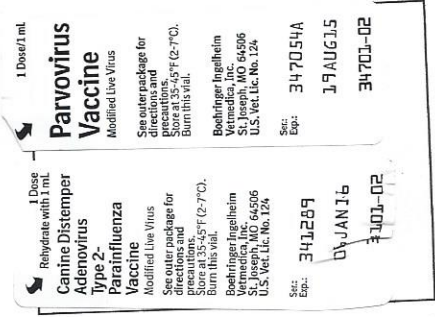
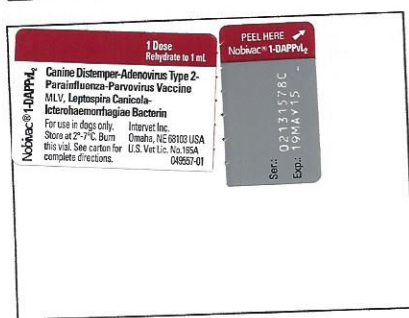
- Parvo
- Distemper
- Parainfluenza
- Cav-2
- Lepto
- Bordetella

Date 6/22/2014
 Age 2-1/2 mo Wt _____

- Parvo
- Distemper
- Parainfluenza
- Cav-2
- Lepto
- Bordetella

Date 7/26/2014
 Age _____ Wt _____

- Parvo
- Distemper
- Parainfluenza
- Cav-2
- Lepto
- Bordetella



Notes:

Dates Given


Strongid / Panacur 1st Series
 (Circle one given)
 1st 6/7/2014
 2nd 6/17/2014
 3rd 10/1/2014

Strongid / Panacur 2nd Series
 1st _____
 2nd _____
 3rd _____

Mange Treatment
 Ivermectin Dates:
 From: _____
 To: _____

Other Treatments Medication Dates Given

Microchip Label

RE 

FM 1488 Animal Medical Center
7002 FM 1488
Magnolia , TX 77354
(281) 259-8806

Rabies Certificate

Client ID: 6487
Client Name: Adopt a Rescued Friend
Address: P.O. Box 62736
Houston , TX 77205
Phone Number: (713) 306-8045

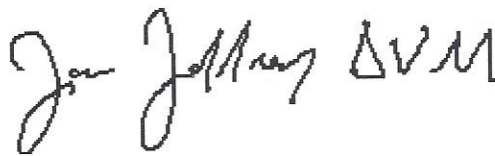
Patient ID: 6487-25
Patient Name: 25-Elle
Species: Canine
Breed: Terrier Mix
Color: Brindle
Birth Date: 4/20/2014
Weight: 12 pounds
Microchip ID:

Tag Number: 14174
Lot Number: 18229A
Producer: Merial
K/MLV: Killed Virus

Vaccination Date: 10/9/2014

Expiration Date: 10/9/2015

Doctor's Signature:



Doctor: Jess T. Jeffrey, DVM
License Number: 10413