

Special Pals

3830 Greenhouse Road
Houston, TX 77084
281-579-7387 • www.SpecialPalsShelter.org

Pet Medical History

PET NAME: _____ OWNERS LAST NAME: _____

IS YOUR PET ON HEARTWORM PREVENTATIVE?	YES	NO
HAS HE/SHE BEEN TESTED FOR HEARTWORMS IN THE LAST 6 MONTHS?	YES	NO
HAS YOUR PET SUFFERED FROM ANY SEIZURES?	YES	NO
HAS YOUR PET BEEN SICK THIS WEEK?	YES	NO
HAS YOUR PET HAD DIARRHEA THIS WEEK?	YES	NO
DID YOUR PET HAVE A FLEA BATH OR DIP IN THE LAST TWO WEEKS?	YES	NO
HAS YOUR PET SUFFERED FROM ANY PHYSICAL TRAUMA?	YES	NO

LIST ANY ALLERGIES YOUR PET HAS _____

LIST ANY MEDICATIONS YOUR PET IS ON, include dosage and time last given: _____

LIST AND DATE ANY OTHER SURGERIES YOUR PET HAS HAD (even a dental cleaning): _____

SIGNATURE _____ DATE _____

SURGERY TREATMENT (STAFF USE)

ANIMAL ID # _____ **NAME:** _____ **BREED:** _____ **AGE:** _____ **COLOR:** _____

DOG _____ **CAT** _____ **MALE** _____ **FEMALE** _____
WEIGHT (LBS): _____

CUSTOMER WANTS

NEXT DAY PAIN MEDS: _____ cc Meloxicam (1.5 mg/ml) **MICRO CHIP** _____ **E-COLLAR** _____ **VACCINES:** _____
HWT _____ **FELV/FIV TEST** _____

ANESTHESIA

____ cc Dexdormitor IM ____ cc Ketamine IM ____ cc Butorphanol IM = ____ **cc TOTAL DKT**
____ cc Atropine SQ ____ cc B-P penicillin SQ ____ cc LRS/0.9% Saline SQ IV ____ cc Meloxicam IM SQ
____ Other _____
____ Maintained on isoflurane + O2

SPAY **ALREADY SPAYED** **IN HEAT** **PREGNANT** **OBESE**

Ventral midline incision: ovarian pedicles: __ instrument tie __ circumferential __ Millers suture ____
Uterine stump: __ circumferential __ Millers __ Transfixation
Abdominal closure: __ cruciate __ simple interrupted __ simple continuous
Subcutaneous closure: __ simple continuous __ Intra dermal
Skin: __ surgical glue __ staples

NEUTER _____ **ALREADY NEUTERED** _____ **CRYPTORCHID** _____

Skin incision: __ pre-scrotal __ scrotal Technique: __ closed __ open suture _____
Cord ligation: __ instrument tie __ circumferential __ Millers __ Transfixation
SQ/skin closure: __ simple continuous __ mattress __ surgical glue __ staples
other _____

DENTAL: Grade I II III IV Extractions: _____

NOTES: _____