YZMA'S MEDICAL HISTORY

A5787652 6.00LBS DOG WHITE F POODLE MIN

7/6/2026

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7/6/2026

INTAKE EXAM OTHER 6.00LBS

Treatment Description:

Dog FAS Intake Medical/Behavior Form
S:intake exam
Behaviour observation:
Behavioral Observations :
1) Offer tasty food: Readily ate
2) Type of food offered: Canned
3) Overall body posture: Upright , Relaxed/Flexible , Wiggly , Approaches readily
4) Ears: Neutral
5) Eyes: Soft eye gaze
6) Mouth: Lips long and soft
7) Fear-Anxiety-Stress level observed at intale: Low FAS

Client information:
County of Los Angeles Department of Animal Care and Control
11258 Garfield Ave, Downey CA 90242
562-940-8870

Patient was brought in as :stray OTC
Age: 10 y
Wt: 6 lbs
Sex:female
No ID/Microchip
Medical observation:

P: 120 R: 30 BCS 2.5/9 Mm: pink CRT <2sec Mentation: BAR
EENT: cloudy lens ou,no oral exam
LNN: NSF
CVS: NSF
Resp: Eupneic, BV x 4, no obvious signs of distress
GI: NSF
UG: NSF

Neuro: mentation appears appropriate, no gross deficits noted
MS: Amb x 4, no lameness noted today
Integ: generalized alopecia with scabs

Routine vaccinations: Nobivac DHLPP SQ RFL (booster in 2-4 weeks), Bordetella Intratrac3 IN/SQ once,
Routine anti-parasitic: Nexgard-Afoxolaner po once:
4-10# (11.3mg)

Pyrantel pamoate suspension 50mg/ml- .6 ml po once
skin scraping:NSF
per SP:
RX:clavamox .6 ml po bid for 7 days
Chlorpheniramine 4 mg 1/2 tab po sid for 7 days
extra feeding
panacur 100 mg/ml 1 ml po sid for 3 days
vet for recheck
RVT#

A5787652 6.00LBS DOG WHITE F POODLE MIN

7/6/2026

0.60 CLAVAMOX 62.5MG/ML 2.00 TIMES/DAY FOR 7.00 DAYS	Date Given:7/6/2026
0.50 CHLORPHENIRAMINE 4MG 1.00 TIMES/DAY FOR 7.00 DAYS	Date Given:7/6/2026
EXTRA FEEDING	Date Given:7/6/2026
PANACUR 100MG/ML	Date Given:7/6/2026
NEXGARD 4-10LBS	Date Given:7/6/2026
BORDETELLA	Date Given:7/6/2026
DHLPP	Date Given:7/6/2026
0.60 DEWORM PYRANTEL 1.00 TIMES/DAY FOR 1.00 DAYS	Date Given:7/6/2026

7/7/2026

7/7/2026

VET EXAM OTHER

Treatment Description:

S: Patient is on vet check for geriatric health exam due to cloudy eyes and generalized alopecia w/scabbing. Staff reports good appetite.

O: PHYSICAL EXAM
HR: 90 Respiration: 20 CRT < 2sec BAR MM Pink BCS 2/9
EENT: Bilateral symmetric ocular opacities OU. Ears and nose grossly clean. Oral examination not performed today. Ears and nose grossly clean. No oral exam performed today.
LN: no obvious lesions
Thorax: Eupneic w/no increased respiratory effort. Grade 3 to 4/6 systolic heart murmur ausculted.
Abdomen: soft, non-painful, no obvious lesions noted
Genitourinary: clean, no discharge noted
Integument: Generalized alopecia w/multifocal scabbing. ~0.5 cm circular, firm mass on right lateral flank. ~1 cm open wound over right coxofemoral region. Mild erythema over left coxofemoral region.
Musculoskeletal: amb x4, no lameness noted today. Hunched while walking in kennel. Full ortho exam not performed.
Neuro: mentation appropriate, no gross deficits. Full neuro exam not performed.

A:
- Bilateral ocular opacities OU: r/o cataracts vs. age-related lenticular/nuclear sclerosis vs other
-
Grade 3 to 4/6 systolic heart murmur: r/o cardiac disease (e.g., valvular disease, cardiomyopathy)
-
Generalized alopecia w/scabbing: r/o flea allergy dermatitis, allergic dermatitis, parasitic disease, endocrine disease (e.g., hypothyroidism/Cushing's), nutritional deficiency, or other dermatopathy.
-
Right coxofemoral open wound and left coxofemoral erythema: r/o pressure-related lesion, trauma/self-trauma, or inflammatory skin disease

P: Cont tx per SP
- Diet: Canned/soft food only
- Clean, monitor right coxofemoral wound for healing, discharge, swelling, redness, or worsening irritation. Provide a thick, clean bedding.
- Monitor for appetite, behavior and worsening condition and contact veterinarian if this occurs.
PERMANENT TRUST. DEFER in SHELTER. HEALTH WAVIER. Adopter should follow up w/ their primary veterinarian for evaluation for a complete senior work-up, including cardiac assessment, dermatologic evaluation, nutritional support, and further diagnostics/treatment as indicated.

Input by

7/8/2026

7/8/2026

RVT EXAM OTHER

Treatment Description:

Clipped and cleaned pressure sore on right hip
Area on hip bone scabbed- scab came off and had mild purulent discharge with edges granulating in - too much tension for staples
Applied small honey bandage secured with hypaflex bandage tape
Bandage change every 2 days until healed or small enough to provide staple closure
Provide soft bedding at all times

Vet to recheck

BANDAGE CHANGE Date Given:7/8/2026

BANDAGE CHANGE Date Given:7/8/2026

7/9/2026

VET EXAM OTHER

Treatment Description:

Brief recheck:
BCS 1-2/9, blind but BAR today MM pink AMb x 4
1.5cm circular granulating wound noted at right hip over bony protuberance suspected due to BCS
Rec soft bedding at all times, ok to cont bandaging and all other scheduled treatments. Monitor wound for increased discharge or changes in size

7/10/2026

VET EXAM INJURY

Treatment Description:

Brief recheck today
S: blind but BAR today MM pink Amb x 4; BCS 2/9, interested in sniffing hands but unable to eval oral/facial areas due to sensitivity

O:
Integ:
--- ~1.5cm circular granulating wound noted at right hip over bony protuberance suspected due to BCS

P:
Cont soft bedding at all times, ok to cont bandaging and all other scheduled treatments. Monitor wound for increased discharge or changes in size. Flag overseeing veterinarian for any further concerns.

7/13/2026

VET EXAM OTHER

Treatment Description:

S: Patient presented for recheck of wound over the right hip. Hx of bilateral blindness. BAR today and remained primarily in sternal recumbency.

O: PHYSICAL EXAM

BCS: 2/9. Blind OU. BAR. MM pink. Eupneic w/no evidence of respiratory distress. Amb x4.

Integument: ~1–1.5 cm circular granulating wound over the right hip at a bony prominence. No purulent discharge, marked swelling, or necrotic tissue appreciated.

A:

Healing granulation wound over the right hip: r/o pressure sore/decubital ulcer secondary to poor BCS and prolonged recumbency.

Thin body condition (BCS 2/9).
Chronic bilateral blindness.

P:

OK to cont current txt as prescribed.

Maintain soft, well-padded bedding at all times and encourage frequent repositioning if prolonged recumbency is observed.

Monitor wound daily for increased discharge, swelling, odor, pain, enlargement, or delayed healing, and notify veterinarian of any concerns.
Monitor appetite, body condition, and overall behavior.

Input by

7/14/2026

7/14/2026

VET EXAM OTHER

Treatment Description:

S: Patient presented for recheck of right hip wound. Hx of chronic bilateral blindness. BAR today; remained primarily in sternal recumbency.

O: PHYSICAL EXAM

BCS: 2/9. Blind OU. BAR. MM pink. Eupneic w/out respiratory distress. Amb x4.
Integument: Small circular granulating wound over the right hip at a bony prominence. No purulent discharge, significant swelling, or necrotic tissue noted.

A:

Right hip wound: Healing granulation tissue consistent w/resolving pressure sore/decubital ulcer; no evidence of active infection.

Poor body condition: BCS 2/9.

Chronic bilateral blindness.

P:

Cont Clavamox for an additional 7d & discontinue chlorpheniramine

Provide extra feeding

Maintain soft, well-padded bedding and reposition frequently if prolonged recumbency is observed.

Monitor wound healing, appetite, body condition, and behavior.

Input by

0.60 CLAVAMOX 62.5MG/ML 2.00 TIMES/DAY FOR 7.00 DAYS Date Given:7/14/2026

IF YOU OR YOUR VETERINARIAN HAVE ANY QUESTIONS REGARDING THE MEDICAL TREATMENT YOUR ANIMAL HAS RECEIVED
PLEASE CALL US AT (562) 940-6898