

Visit Summary MAY 09, 2024 AT 07:24 PM

DR. MACKENZIE BELL

Greenville

(864) 252-9520 1025 Woodruff Road, Greenville, SC, 29607

Hope

PATIENT ID: ED5375

D.O.B: 05/09/2023

Age: 1 year old **Species:** Dog

Breed: Mixed Breed Canine

Sex: Female

Client Name: Jenna Sahli **Phone:** (913) 530-3600 **Address:** 115 N Cedarbluff ct

Greer, SC, 29650

Email: dog.squad88@gmail.com

rDVM: Riverside Vet **Number:** (864) 469-4524

Fax:

PRESENTING COMPLAINTS

• Diarrhea • Vomiting

HISTORY

Hope presents from Riverside for continued overnight care for diarrhea and vomiting. Patient has been in foster care with an rescue and acutely had vomiting and black, tarry diarrhea. Patient was worked up with primary. BW showed, rads showed XX

INTAKE EXAM

Robyn Lee - May 10, 2024 at 05:35 AM

SYSTEM	STATUS	NOTES		
Abdomen	Normal			
Ears	Normal			
Eyes	Normal			
Heart	Normal			
Integument	Normal			
Lungs	Normal			
Lymphnodes	Normal			
Mouth	Normal			
Musculoskeletal	Normal			
Neurologic	Normal			
Nose	Normal			
Pulses	Normal			
Rectal	Normal			

SYSTEM	STATUS	NOTES
Urogenital	Normal	

INTAKE VITALS

SYSTEM	STATUS	NOTES
Check Mentation	BAR	
Check Mucous Membranes (MM)	pink	
Heart Rate	130 BPM	
Note Capillary Refill Time (CRT)	<2	
Respiratory Effort	sniff	
Respiratory Rate	100 BPM	
Temperature	100.3 °F	
Weight	14.7 KG	

PROBLEMS

SYSTEM	DIFFERENTIALS
Diarrhea	Dietary indiscretion , Food allergy , Stress induced gastroenteritis , Neoplasia , Parasitic gastroenteritis , Infection , Intestinal intussusception , ExtraGl disease
Vomiting	GI disease , ExtraGI disease

NOTES

ROBYN LEE - May 10, 2024 at 05:29 AM

Progress/Soap Note

Diagnostics

Blood work from rDVM

-CBC: HCT-27.5, WBC-34.24 (NEUT-25.44, MONO-2.3, EOS-1.83)

-Chemistry: GLOB-5.2 otherwise within normal limits

From VEG

-PCV/TS: 28% and 7.2g/dL--> recheck at 6AM was 25% and 7g/dL; buffy coat checked for microflaria and negative

-LAC: 1.9 mmol/L on intake--> recheck at 6AM was 1.7 mmol/L

-4DX: Negative X4

Blood smear: No extracellular parasites seen; confirmed monocytosis on smear

POCUS on intake to VEG:

-T-FAST: No b-lines present; La:ao subjectively normal

-A-FAST: No free fluid within the abdomen; mild concern for potential fluid within the right uterine horn

Radiographs:

Thorax: Subjectively small CVC likely secondary to hypovolemia; no overt mass like lesions or metastatic disease present. Cardiac silhouette subjectively within normal limits.

Abdomen: Mild decrease in serosal detail within the abdomen. Mild gas distension throughout different segments fo the small intestine. No overt obstructive pattern seen at this time.

Treatments

IVC placement
PCV/TS and LAC on intake
IVF:LRS@90ml/kg/day overnight
Unasyn 30mg/kg IV q8h
Onadestron 0.5mg/kg IV q12h
Monitoring RR/RE q1h
Recheck PCV/TS and LAC after 12 hours of IVF
NPO for AUS in AM

MACKENZIE BELL - May 10, 2024 at 07:21 AM

Progress/Soap Note

KUHLMAN 5/10/24

PHYSICAL EXAM:

EENT: clear au/ou, negative oral, no nasal d/c

PLN: wnl

H/L: no murmur, strong synch pulses, lungs clear & eupneic

Abd: soft non painful, no masses palpated MSI: Amb x 4, bcs 5/9, good hair coat

U/G: melena noted on rectal Neuro: alert & appropriate

DIAGNOSTICS: **5PM PCV/TS:** 24/7.2

UPDATED PROBLEM LIST:

1.regenerative anemia

2.melena

3.leukocytosis

4.neutrophilia

5.monocytosis

6. eosinophilia 7.thrombocytosis

8.hyperglobulinemia

9. hematemesis - resolved

10. ileus

11. intestinal parasites (hooks, rounds, tapes)

TREATMENTS: 90 ml/kg/day LRS 1 mg/kg zofran q12h

30 mg/kg unasyn IV

added 1 mg/kg pantoprazole IV q12h added proviable kit for after abdominal ultrasound added panacur 50 mg/kg q24h for 3 days added reglyn 2 mg/kg/day into fluid bag increased walks to q3h to stimulate GI motility

discontinued NPO

added cerenia 1 mg/kg ~24 hours after initial dose at rDVM

PLAN:

Called owner with morning update- Hope is doing well for us in hospital, tolerating fluids and medications well. We will be doing an abdominal ultrasound at some point today with criticalist.

While waiting for abdominal ultrasound the results of fecal send out came back as hooks, tapes, and roundworms. POCUS with KO in hospital- ileus present. Recommended to start reglyn CRI to increase motility as well as start dewormer and probiotic. Likely cause for clinical signs seen.

Called owner to discuss results and plan moving forward throughout the day- would like to keep on medications to speed up the GI tract and monitor to make sure that PCV/ TS is not drastically decreasing. Owner to come visit around 5- if values are holding and no regurg then TGH on oral meds.

Shift updates: patient eating well in hospital; only one episode of diarrhea; one episode of burping prior to zofran administration. Plan to discharge with outpatient supportive care at 5.

TREATMENT SUMMARY

Medications

MEDICATION NAME	DOSE	ROUTE/FREQUENCY	LAST ADMINISTERED	INSTRUCTIONS
Ondansetron 2 mg/mL Injectable	7.35 mg	IV / every 12 hours	05/10/24 12:14 PM	
Ampicillin and Sulbactam 30 mg/ mL Injectable	441.00 mg	IV / every 8 hours	05/10/24 02:04 PM	
Pantoprazole 4 mg/mL Injectable	14.90 mg	IV / every 12 hours	05/10/24 08:31 AM	
Metoclopramide 5 mg/mL Injectable	23.84 mg	IV / once	05/10/24 10:21 AM	2 mg/kg/day (1.6 mg/kg) reglyn into 1000 mL LRS bag
Fenbendazole 10% 100 mg/mL Oral Suspension	7.50 ml	PO / every 24 hours	05/10/24 11:54 AM	
Maropitant 10 mg/mL Injectable	14.90 mg	IV / every 24 hours	05/10/24 05:14 PM	

Diagnostics

DIAGNOSTIC NAME	FREQUENCY	LAST RESULT	LAST RESULT DATE	INSTRUCTIONS
Respiratory Rate	every 6 hours	24 BPM	05/10/24 01:35 PM	

DIAGNOSTIC NAME	FREQUENCY	LAST RESULT	LAST RESULT DATE	INSTRUCTIONS
Temperature	every 12 hours	100.2 °F	05/10/24 06:28 AM	
Heart Rate	every 6 hours	126 BPM	05/10/24 01:58 PM	
Check Mentation	every 6 hours	QAR	05/10/24 01:35 PM	
Note Capillary Refill Time (CRT)	every 6 hours	<2	05/10/24 01:35 PM	
Check Mucous Membranes (MM)	every 6 hours	pink	05/10/24 01:35 PM	
Respiratory Effort	every 6 hours	normal	05/10/24 01:35 PM	
Weight	every 12 hours	14.9 KG	05/10/24 07:00 AM	
Packed Cell Volume (PCV)	once	25	05/10/24 06:04 AM	
Total Solids (TS) - Refractometer	once	7	05/10/24 06:04 AM	
Blood Lactate - Lactometer	once	1.7	05/10/24 06:04 AM	
Note Urination / Straining	every 6 hours	++++	05/10/24 05:04 PM	
Note Defecation	every 6 hours	none	05/10/24 05:04 PM	
Note Vomiting/Regurgitation	every 6 hours	nonr	05/10/24 05:04 PM	
4DX - SNAP Pro	once	direct/idexx_results/ visit_155761_instruction_2665493.p	05/10/24 07:30 AM odf	
Packed Cell Volume (PCV)	every 12 hours	24	05/10/24 05:03 PM	
Total Solids (TS) - Refractometer	every 12 hours	7.2	05/10/24 05:03 PM	

Tasks

TASK NAME	FREQUENCY	LAST COMPLETED	INSTRUCTIONS
Inpatient Exam / Update	every 12 hours	05/10/24 07:13 AM	
Walk Patient / Clean Cage	every 6 hours	05/10/24 06:29 AM	
Change Bedding	every 6 hours	05/10/24 05:03 PM	
Offer / Refill Water	every 6 hours	05/10/24 05:03 PM	
Place Peripheral IV Catheter	once	05/09/24 08:00 PM	
IV Catheter Breakdown / Change Bandage	every 12 hours	05/10/24 12:14 PM	
IV Catheter Care / Maintenance	every 6 hours	05/10/24 05:03 PM	
Dr Updates rDVM	every 24 hours	05/10/24 07:28 AM	
Dr Updates Customer	every 12 hours	05/10/24 07:28 AM	
Walk Patient / Clean Cage	every 3 hours	05/10/24 05:03 PM	
Administer Customer's Medication	every 8 hours	05/10/24 11:53 AM	
Administer Customer's Medication	every 24 hours	05/10/24 11:53 AM	
Feed Patient / Offer Food	every 6 hours	05/10/24 05:03 PM	

Fluids

FLUID NAME	RATE (ML/HR)	ROUTE	START/END	INSTRUCTIONS/ADDITIVES
Lactated Ringers (LRS)	50.0 ml / hr	IV	05/09/24 11:30 PM 05/10/24 10:09 AM	
Lactated Ringers (LRS)	50.0 ml / hr	IV	05/10/24 10:30 AM 05/10/24 05:53 PM	with 2 mg/kg/day reglyn

TREATMENT DETAILS

Medications

MEDICATION NAME	DOSE	ROUTE	DATE/TIME	ADMINISTERED BY/NOTES
Ondansetron 2 mg/mL Injectable				
	7.35 mg	IV	05/09/24 11:51 PM	Administered: 3.675 ml Wasted: 0.0 ml Robyn Lee
	7.35 mg	IV	05/10/24 12:14 PM	Administered: 3.675 ml Wasted: 0.0 ml Nikki Larocca
Ampicillin and Sulbactam 30 mg/mL Injectable				
	441.00 mg	IV	05/10/24 06:04 AM	Maggie Wood
	441.00 mg	IV	05/10/24 02:04 PM	Nikki Larocca
Pantoprazole 4 mg/mL Injectable				
	14.90 mg	IV	05/10/24 08:31 AM	Nikki Larocca
Metoclopramide 5 mg/mL Injectable				
	23.84 mg	IV	05/10/24 10:21 AM	Nikki Larocca
Fenbendazole 10% 100 mg/ mL Oral Suspension				
	7.50 ml	PO	05/10/24 11:54 AM	Nikki Larocca
Maropitant 10 mg/mL Injectable				
	14.90 mg	IV	05/10/24 05:14 PM	Nikki Larocca

Diagnostics

DIAGNOSTIC NAME	RESULT	DATE/TIME	COMPLETED BY/NOTES
Respiratory Rate			
	100 BPM	05/09/24 07:29 PM	Stephanie Carroll
	36 BPM	05/10/24 12:59 AM	Maggie Wood
	32 BPM	05/10/24 06:29 AM	Maggie Wood
	24 BPM	05/10/24 01:35 PM	Nikki Larocca
Temperature			

DIACNOCTIC NAME	DECULT	DATE/TIME	COMPLETED DV/NOTES
DIAGNOSTIC NAME	RESULT		COMPLETED BY/NOTES
	100.3 °F	05/09/24 07:29 PM	Stephanie Carroll
	100.2 °F	05/10/24 06:28 AM	Maggie Wood
Heart Rate			
	130 BPM	05/09/24 07:29 PM	Stephanie Carroll
	112 BPM	05/10/24 12:59 AM	Maggie Wood
	104 BPM	05/10/24 06:28 AM	Maggie Wood
	126 BPM	05/10/24 01:58 PM	Nikki Larocca
Check Mentation			
	BAR	05/09/24 07:29 PM	Stephanie Carroll
	BAR	05/10/24 12:59 AM	Maggie Wood
	QAR	05/10/24 06:29 AM	Maggie Wood
	QAR	05/10/24 01:35 PM	Nikki Larocca
Note Capillary Refill Time (CRT)			
	<2	05/09/24 07:29 PM	Stephanie Carroll
	<2	05/10/24 12:59 AM	Maggie Wood
	<2	05/10/24 06:29 AM	Maggie Wood
	<2	05/10/24 01:35 PM	Nikki Larocca
Check Mucous Membranes (MM)			
	pink	05/09/24 07:29 PM	Stephanie Carroll
	pink	05/10/24 12:59 AM	Maggie Wood
	pink	05/10/24 06:29 AM	Maggie Wood
	pink	05/10/24 01:35 PM	Nikki Larocca
Respiratory Effort			
	sniff	05/09/24 07:29 PM	Stephanie Carroll
	Normal	05/10/24 12:59 AM	Maggie Wood
	normal	05/10/24 06:29 AM	Maggie Wood
	normal	05/10/24 01:35 PM	Nikki Larocca
Weight			
	14.7 KG	05/09/24 07:29 PM	Stephanie Carroll
	14.9 KG	05/10/24 07:00 AM	Maggie Wood
Packed Cell Volume (PCV)			
	28	05/09/24 09:02 PM	Bekki Giagtzoglou
	25	05/10/24 06:04 AM	Maggie Wood
		,,,	

DIAGNOSTIC NAME	RESULT	DATE/TIME	COMPLETED BY/NOTES
Total Solids (TS) - Refractometer			
	7.2	05/09/24 09:02 PM	Bekki Giagtzoglou
	7	05/10/24 06:04 AM	Maggie Wood
Blood Lactate - Lactometer			
	2	05/09/24 09:02 PM	Bekki Giagtzoglou
	1.7	05/10/24 06:04 AM	Maggie Wood
Note Urination / Straining			
	urinated on sidewalk outside	05/10/24 12:00 AM	Maggie Wood
	urinated	05/10/24 03:34 AM	Maggie Wood
	None	05/10/24 12:13 PM	Nikki Larocca
	++++	05/10/24 05:04 PM	Nikki Larocca
Note Defecation			
	None	05/10/24 12:01 AM	Maggie Wood
	small amount of bloody d+ on blanket	05/10/24 03:34 AM	Maggie Wood
	None	05/10/24 12:13 PM	Nikki Larocca
	Tarry Stool in Kennel	05/10/24 02:06 PM	Nikki Larocca
	none	05/10/24 05:04 PM	Nikki Larocca
Note Vomiting/ Regurgitation			
	None	05/10/24 12:01 AM	Maggie Wood
	none	05/10/24 03:35 AM	Maggie Wood
	None	05/10/24 12:13 PM	Nikki Larocca
	Pt regurgitated when she got excited, nothing came up	05/10/24 02:07 PM	Nikki Larocca
	nonr	05/10/24 05:04 PM	Nikki Larocca
4DX - SNAP Pro			
	direct/idexx_results/visit_155761_instruction_2665493.pdf	05/10/24 07:30 AM	Maggie Wood
Packed Cell Volume (PCV)			
	24	05/10/24 05:03 PM	Nikki Larocca
Total Solids (TS) - Refractometer			
	7.2	05/10/24 05:03 PM	Nikki Larocca
Tasks			

TASK NAME	DATE/TIME	COMPLETED BY/NOTES
Inpatient Exam / Update		
	05/10/24 07:13 AM	Mackenzie Bell

TASK NAME	DATE/TIME	COMPLETED BY/NOTES
Walk Patient / Clean Cage		
	05/10/24 12:25 AM	Maggie Wood
	05/10/24 06:29 AM	Maggie Wood urinated outside
Change Bedding		
	05/09/24 09:00 PM	Robyn Lee
	05/10/24 03:35 AM	Maggie Wood changed bed due to small amount of bloody diarrhea on it
	05/10/24 11:42 AM	Nikki Larocca
	05/10/24 05:03 PM	Nikki Larocca
Offer / Refill Water		
	05/09/24 11:35 PM	Robyn Lee
	05/10/24 04:37 AM	Maggie Wood
	05/10/24 11:43 AM	Nikki Larocca
	05/10/24 05:03 PM	Nikki Larocca
Place Peripheral IV Catheter		
	05/09/24 08:00 PM	Robyn Lee
IV Catheter Breakdown / Change Bandage		
	05/09/24 08:00 PM	Robyn Lee
	05/10/24 12:14 PM	Nikki Larocca Re Wrapped & Taped
IV Catheter Care / Maintenance		
	05/09/24 08:00 PM	Robyn Lee
	05/10/24 04:47 AM	Maggie Wood
	05/10/24 12:14 PM	Nikki Larocca
	05/10/24 05:03 PM	Nikki Larocca
Dr Updates rDVM		
	05/10/24 07:28 AM	Nikki Larocca
Dr Updates Customer		
	05/10/24 07:28 AM	Nikki Larocca
Walk Patient / Clean Cage		
	05/10/24 11:42 AM	Nikki Larocca
	05/10/24 02:04 PM	Nikki Larocca
	05/10/24 05:03 PM	Nikki Larocca
Administer Customer's Medication		

TASK NAME	DATE/TIME	COMPLETED BY/NOTES
	05/10/24 11:53 AM	Nikki Larocca
Administer Customer's Medication		
	05/10/24 11:53 AM	Nikki Larocca
Feed Patient / Offer Food		
	05/10/24 11:54 AM	Nikki Larocca Ate 1/4 can of ID Wet food VERY well
	05/10/24 05:03 PM	Nikki Larocca

Fluids

FLUID NAME	RATE (ML/HR)	START/END	STARTED BY/NOTES
Lactated Ringers (LRS)			
	50.0 ml / hr	05/09/24 11:30 PM 05/10/24 10:09 AM	Robyn Lee
Lactated Ringers (LRS)			
	50.0 ml / hr	05/10/24 10:30 AM 05/10/24 05:53 PM	Nikki Larocca

Treatment Sheet

Hope (Jenna) | #ed5375 | 1y 0m, FI, Dog

(864) 252-9520

Dr. Mackenzie Bell

Thursday, May 9, 2024 (Day 1 of 2)

ORDER		1AM	2AM	ЗАМ	4AM	5AM	6AM	7AM	8AM	9AM	10AM	11AM	12PM	1PM	2PM	3РМ	4PM	5PM	6РМ	7PM	8PM	9PM	10PM	11PM
VITALS																								
Weight																								
Temperature																								
Heart Rate																								
Respiratory Rate																								
Respiratory Effort																								
Check Mucous Membranes (MM)																								
Note Capillary Refill Time (CRT)																								
Check Mentation																								
DIAGNOSTICS																								
Packed Cell Volume (PCV)																								
Total Solids (TS) - Refractometer																								
Blood Lactate - Lactometer																								
MEDICATIONS																								
Ondansetron 2 mg/mL Injectable 7.35mg: IV: q12hr																								
CRI, FLUIDS, O2																								
Lactated Ringers (LRS)																								
TASKS																								
Change Bedding																								
Offer / Refill Water																								

(864) 252-9520

Dr. Mackenzie Bell

Hope (Jenna) | #ed5375 | 1y 0m, FI, Dog

Thursday, May 9, 2024 (Day 1 of 2) cont.

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ORDER	12AM	1AM	2AM	ЗАМ	4AM	5AM	6AM	7AM	8AM	9AM	10AM	11AM	12PM	1PM	2PM	3РМ	4PM	5PM	6PM	7PM	8PM	9PM	10PM	11PM
TASKS																								
Place Peripheral IV Catheter																								
IV Catheter Breakdown / Change B																								
IV Catheter Care / Maintenance																								

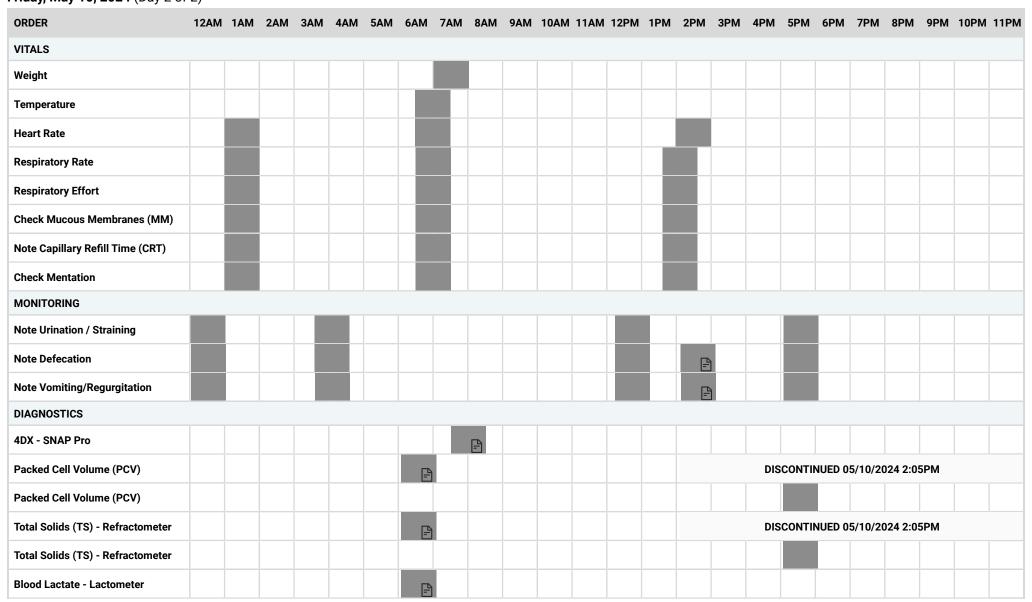
Treatment Sheet

(864) 252-9520

Dr. Mackenzie Bell

Hope (Jenna) | #ed5375 | 1y 0m, Fl, Dog

Friday, May 10, 2024 (Day 2 of 2)



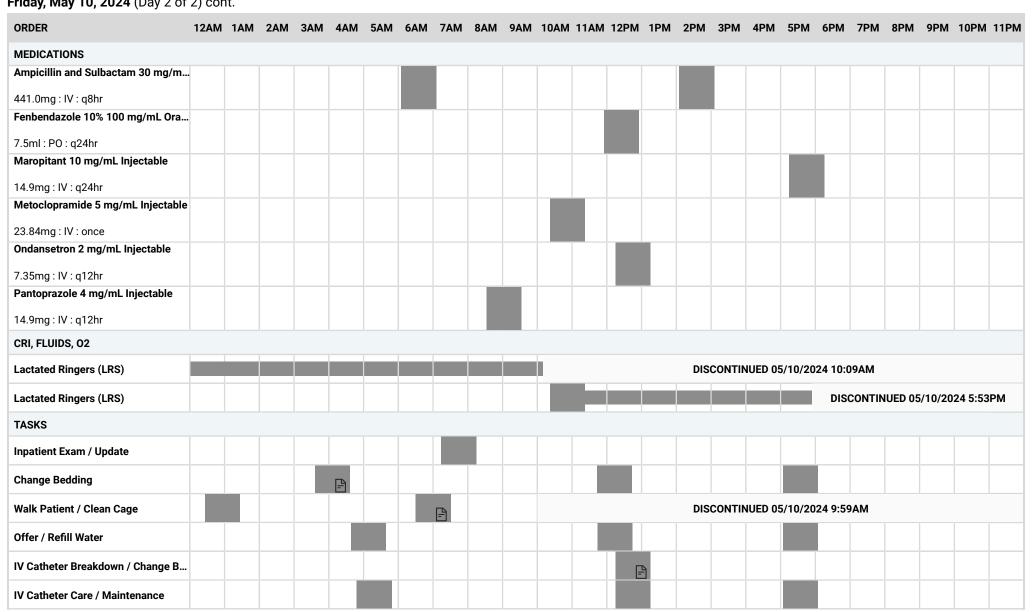
Treatment Sheet

(864) 252-9520

Dr. Mackenzie Bell

Hope (Jenna) | #ed5375 | 1y 0m, Fl, Dog

Friday, May 10, 2024 (Day 2 of 2) cont.

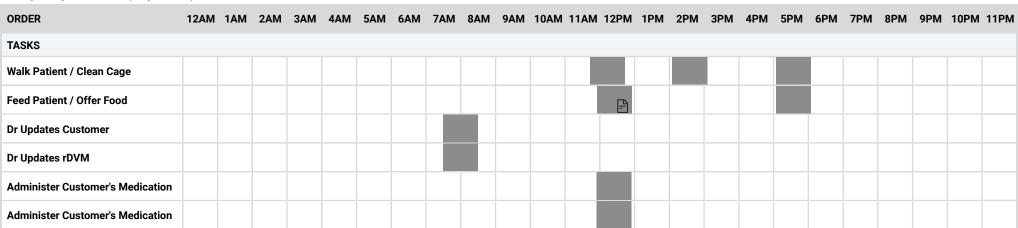


(864) 252-9520

Dr. Mackenzie Bell

Hope (Jenna) | #ed5375 | 1y 0m, Fl, Dog

Friday, May 10, 2024 (Day 2 of 2) cont.





Discharge Summary

May 09, 2024 at 07:24 PM Dr. Mackenzie Bell

Greenville

(864) 252-9520 1025 Woodruff Road. Greenville, SC, 29607

Hope Patient ID: ed5375

D.O.B: 05/09/2023 Age: 1 year old

Breed: Mixed Breed Canine

Sex: Female

Species: Dog

Client Name: Jenna Sahli Phone: (913) 530-3600 Address: 115 N Cedarbluff ct

Greer, SC, 29650

Email: dog.squad88@gmail.com

rDVM: Riverside Vet Number: (864) 469-4524

Fax:

Medication

Fenbendazole 10% 100 mg/mL Oral Suspension - Total Qty 22.5 ml - in hospital - Give 7.5 mL by mouth every 24 hours until

Proviable Forte Kit 30 mL TGH - Total Qty 1.0 kit - in hospital - Give 3 mL by mouth every 8 hours for the next 72. Sprinkle 1 capsule over food every 24 hours until gone.

Discharge Instructions

Recommended Primary Vet Follow-up:

Please also monitor for general signs of complications. If Hope is exhibiting any of these signs please contact your primary care veterinarian or Veterinary Emergency Group if after hours:

- 1. Labored breathing, excessive panting, persistent cough.

- Vomiting, if persistent, bloody, or nonproductive.
 Pain. Hope has trouble getting comfortable, cries, or is painful to the touch.
 Gums which are not their normal pink color, especially if white, gray, or blue.
- 5. Diarrhea, especially if persistent, bloody, or painful.6. Excessive sleepiness (Hope can not be roused).
- 7. Straining to urinate or defecate, especially if nonproductive.
- 8. Seizures, loss of consciousness, or episodes of bizarre behavior.
- 9. Hope does not eat or drink for more than 24 hours.

MONITORING:

Please monitor for any vomiting, worsening diarrhea, decreased appetite, lethargy, or weakness. If you notice these, or any other concerning signs or behaviors, please contact your primary care veterinarian, or Veterinary Emergency Group if after hours.

Please note, it may take several days for the diarrhea to completely resolve, but it should be getting better and not worse. It is also common for animals who have had diarrhea to go several days without defecating. As long as your pet is eating and not straining to defecate they will eventually go to the bathroom.

FOLLOW-UP:

Recheck with your primary veterinarian on Monday for a recheck PCV/TS. We discussed holding off on a spay at this time until we recheck PCV/TS with your primary vet.

Hope may need to be de-wormed multiple times, so follow up with your primary care veterinarian about additional fecal exams.



HOPE SAHLI

PET OWNER: JENNA SAHLI

SPECIES: Canine

BREED:

GENDER: Female AGE: 1 Years PATIENT ID: ed5375 **VEG Greenville**

1025 WOODRUFF RD SUITE K103 Greenville, SC 29607

ACCOUNT #:

ATTENDING VET: Robyn Lee

LAB ID:

ORDER ID: 235842717 DATE OF RECEIPT: 5/10/24

DATE OF RESULT: 5/10/24

IDEXX Services: Handheld SNAP Device

Serology

Antigen



5/10/24 7:30 AM

TEST RESULT Heartworm Negative