Pets Name: ZUKI **Wt:** 5.4 kg **Date:** Aug 14, 2024

Owners Name: MARIA SOSA **Gender:**

Contact Number 0995-709-1120 **Species:**

Diagnosis: Cystotomy INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
2:00 pm	Ampicillin Q8H	/		0.7ml / SIV	
	Tetracycline	/		1ml / SC	
	EPO EOD	/		0.2ml / SIV	
	Tolfenamic	/		1.5ml / SC	
10:00 pm	Ampicillin	/		0.7mL / SIV	+ Urinary Singen
Aug. 15	Uticare	/		1 tablet	+ Liv-52
	AminAvast	/		1 capsule	+ Papi Bion
	Tolfenamic	/		0.5mL	+ Nacalvit-ZC
	Fercobsang	/		1mL	
	Papi Bion		PA	3mL	
	Nacalvit ZC		PA	3mL	
2:00 pm	Ampicillin	/		0.7 ml IV	
	Liv 52		PA	1 ml PO	
	Gabapentin 100mg	/		1 tab	
	Aminavast 300mg	/		1 cap	
	Uticare	/		1 tab PO	
10:00pm	Ampicillin	/		0.7mL	
Aug. 16	Fercobsang	/		1mL	
	Papi Bion		PA	3mL	
	Nacalvit ZC		PA	3mL	
	Liv 52		PA	2mL	
	Tolfenamic	/		0.5mL	
	Uticare	/		1 Tab	
	AminAvast (300mg)	/		1 capsule	
	Bladder flushing	/			
2:00 pm	Ampicillin	/		0.7 ml IV	
	Liv 52		PA	2ml	
	Gabapentin 100mg	/		1 tab	
	Aminavast 300mg	/		1 cap	
	Uticare	/		1 tab	
	EPO	/		0.2mL	
	Bladder flushing	/			

PATIENT'S BELONGINGS:

Renal P Powder
Mondex
(4) Bowelinex
(7) Bladder control
Black blanket
Towel
Collar
→ Red Ecobag

Paid
CBC /
BC SDMA /
IV Infusion /
Deposit 1000 /

Hyp
X-ray - 4 view
UTZ -

e: _____ Wt: _____ Date: _____

hers Name: _____ Gender: _____

Contact Number _____ Species: _____

Diagnosis: _____ INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
5:00	Ampicillin	✓		0.7mL	+ CBC ✓
Aug 17.2026	Fercobsang	✓		1mL	
	Tolfenamic	✓		0.5mL	
	Papi Bion		++	3mL	
	Nacalvit 2C		++	3mL	
	Liv 52		++	2mL	
	Uticare	✓		1 tablet	
	Aminavast 300mg	✓		1 capsule	
	Bladder flushing	✓		0.2mL	
	E.PO	✓			
	~~Ampicillin~~	✓		0.7 cc/50kl	
	~~Liv 52~~		++	2 ml / PO	
	~~Glucosamine 100 mg~~	✓		1 tab / PO	
	~~Aminavast 300mg~~	✓		1 cap / PO	
	~~Uticare~~ ~~Bladder flush~~	✓		1 tab / PO	
10:00 pm	Ampicillin	✓		0.7mL	
Aug. 18	Fercobsang	✓		1mL	
	Tolfenamic	✓		0.5mL	
	Papi Bion		++	3mL	
	Nacalvit		++	3mL	
	Liv 52		++	2mL	
	Uticare	✓		1tab	
	Aminavast 300mg	✓		1capsule	
	Bladder flushing	✓			
2:00 pm	Ampicillin	✓		0.7mL | IV	+ Fluid ✓ Administration IV
	Liv 52		++	2 ml / PO	
	Glucosamine 100 mg	✓		1 tab / PO	
	Aminavast 300mg	✓		1 cap / PO	
	Uticare	✓		1 tab / PO	
	Bladder flush	✓			
~~Aug 19~~	~~E.BIOA~~				
	~~CYSTOCURE~~				
	~~HEPATOCU PS~~				

PATIENT'S BELONGINGS:

GROOMING CENTER

Name: _____ Wt: _____ Date: _____

Owners Name: _____ Gender: _____

Contact Number _____ Species: _____

Diagnosis: _____ INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS		DOSE/ROUTE	REMARKS
Aug. 19	Percobsang		1mL	
	Papi Bion	TH	3mL	
	Nacalvit	TH	3mL	
	Liv 52	TH	2mL	
	Tolfenamic		0.5mL	
	Uticare		1Tab	
	Aminavast (200mg)		1cap	
2 pm	[illegible]		0.7 cc / SC	
4:30 pm	[illegible]		0.7ml / IM	40 ~
	[illegible]	YH	2 cc / IM	
	[illegible]		1 tab / PO	1 Tolfenamic
	[illegible]		1 cap / PO	
	Bladder flush		1 tab / PO	
10:00 pm	Ampicillin			
Aug. 20 / AM	Papi Bion		0.7cc SC	
	Nacalvit	TH	2ml	
	Liv 52	TH	3ml	
	Uticare	TH	2ml	PO
	Aminavast 300mg		1 tab	
	Tolfenamic Acid		1 cap	
6:00 pm	Ampicillin		0.5 ml SC	
	Fluids		0.7cc SC	
	[illegible]		———	
	[illegible] 10mg	TH	2cc / IM	
	[illegible] 300mg		1 tab / IM	
	[illegible]		1 cap / PO	
	[illegible]		1 tab / PO	
10:00 pm	Ampicillin		0.7cc SC	
Aug 21 / AM	Epo		0.2 cc SC	PATIENT'S BELONGINGS:
6:00 am	Ampicillin		0.7cc SC	
	Bion	TH	3ml	
	Nacalvit	TH	3ml	
	Liv 52	TH	2ml	
	Uticare		1 tab	
	Aminavast		1 cap	
	Tolfenamic		0.5cc SC	
	Fluids		———	

Name: ZUKI
Owners Name:
Contact Number
Diagnosis:
Wt:
Date:
Gender:
Species:
INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
	~~Gabapentin 100mg~~			1 cap / po	
	~~Aminavast 300mg~~			1 tab / po	
	~~Uticare~~			1 cap / po	
Aug. 22 - AM	~~[illegible]~~			1 tab / po	~~Co - Amox (Clavamox)~~
	Bion				
	Nacalvit		0	3ml	
	LW 52		0	2ml	
	Uticare		0	1ml	
	Aminavast 300mg.	/		1 tab	po
	Co - Amox	/		1 cap	
	Epo EOD		0	1.8ml	Laser
	~~[illegible]~~	/		0.2ml / SC	
	~~Gabapentin 100mg~~	/	#	2 [illegible]	
	~~Aminavast 300mg~~	/		1 tab / po	
Aug. 23 / AM	~~Uticare~~	/		1 cap / po	
	Bion	/		1 tab / po	
	Nacalvit		#	3 ml	
	Uticare		#	2 ml	
7:00 am	Aminavast 300 mg.	/		1 tab	po
4:20 pm	Ampicillin	/		1 cap	
	Tranexamic	/		0.7ml SW	
10 PM	clindamycin	/		0.5ml / SC	
11 PM	Ampicillin	/		0.2ml IV	
Aug. 24 AM	Ferobrang	/		0.7ml SIV	
	1. Bion	/		1.5ml /	
	nacalvit 20		#	3ml	
	LW 52		#	3ml	
	Uticare		#	2ml	
	aminavast	/		1tab	PATIENT'S BELONGINGS:
3pm	~~Ampicillin~~	/		1 cap	
PM	LW 52	/		0.7ml IV	
			#	2ml	
	Gabapentin 100mg	/		1 tab	
	Aminavast	/		1 cap	
	Uticare	/		1 tab	
11 pm	Ampicillin	/		0.7ml SIV	
11:30 PM	Analgin	/		1ml IV	

ZUKI

Owner's Name: Wt:

Contact Number: Date:

Diagnosis: (+) Babesiosis Gender:

Species:

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
Aug 25 AM	Ferrobrang				
	EPO	/		1.5ml / SC	
	P Dion	/		0.2ml / SC	
	Nacalvit C		TH	3ml	
	Lc-Vit		TH	3ml	
	Aminovet		TH	2ml	
	Unicasc	/		1cap	
	~~Ampicillin~~	/		1cap	
	~~[illegible]~~	/		0.7 ml / SIV	
	~~Gabapentin 100mg~~		TH	2 ml / PO	
	~~[illegible] 300mg~~	/		1 tab / PO	
	~~Cetirizine~~	/		1 cap / PO	
11 am		/		1 tab / PO	
11:10	Ampicillin	/			
	Analgin	/		0.7ml SIV	
Aug. 26 AM	Ferrobrang	/		2ml SIV	
	Clindamycin	/		2ml / SC	
	EPO	/		0.2ml IV	
7 AM	Ampicillin	/		0.4ml IV	
7:20 am	Cerenia	/		0.7ml SIV	
7:40	Papi Dion	/		0.5ml IV	
	~~Ampicillin~~		TH		
	~~[illegible]~~	/		0.7 ml / SIV	IV ~~[illegible]~~
	~~Gabapentin 100mg~~		TH	2 ml / PO	
	~~[illegible] 300mg~~	/		1 tab / PO	3 day test.
	~~Cetirizine~~	/		1 cap / PO	
	~~Clindamycin~~	/		1 tab / PO	
4pm	Ampicillin	/		0.4 ml / SIV	
Aug. 27 am	5am Ranitidine	/		0.7ml SIV	
	Ferrobrang	/		0.2ml SIV	Stop Ampicillin
	Clindamycin	/		1.5ml / SC	PATIENT'S BELONGINGS:
7am	Ampicillin	/		0.4ml IV	
	Papi Dion	/		0.7ml SIV	
			TH	3ml	

Deposit - 20,000 Aug 26 / 8:10 Cerenia / 0.5ml

Name: Zuki

Owners Name: ______ Wt: ______

Contact Number ______ Date: ______

Diagnosis: ______ Gender: ______

Species: ______

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
12noon	Metronidazole	/		16mL	
1 noon	Hyoscine	/		0.54 cc / SIV	
	[illegible]		PA	2 cc / po	
	Gabapentin 100mg	/		1 tab / po	
	Aminovast 300mg	/		1 cap / po	
	Clindamycin	/		0.4 cc / SIV	
12 AM	Hyosine	/		0.54 ml SIV	
	Metronidazole	/		16ml SIV	
6:20 am	clindamycin	/		0.4ml SIV	
	Fercobsang	/		1.5ml SC	
	EPO	/		0.4ml	
7:20 am	coenica	/		0.54ml	
	— Blood Transfusion —				
1:10 pm	Metronidazole	/		16ml SIV	
	Hyoscine			0.54 cc / SIV	
	[illegible]		PA	2 cc / po	
	Gabapentin 100mg	/		1 tab / po	
	Aminovast 300mg	/		1 cap / po	
	Clindamycin	/		0.4 cc / SIV	
12:00am	Metronidazole	/		16mL	
	Hyoscine	/		0.54mL	
	Fercobsang	/		1.5mL	
	P.Bion	/	PA	3mL	
	Uticare	/		1 tablet	
	Aminavast 300mg	/		1 capsule	
	Clindamycin	/		0.4mL	
12 Noon	Metronidazole	/		16 cc SIV	
	[illegible]		PA	3 cc / po	
	[illegible]		PA	2 cc / po	PATIENT'S BELONGINGS:
	Gabapentin 100mg	/		1 tab / po	
	Aminovast 300mg	/		1 cap / po	
	Clindamycin	/		0.4 cc / SIV	
Aug 30 12mn	Metronidazole	/		16mL	
	Fercobsang	/		1.5mL	
	P.Bion	/	PA	3mL	
	Uticare	/		1tab	
	Aminavast	/		1cap	
	Clindamycin	/		0.4mL	

Name: Zafu'

Owners Name: Wt:

Date:

Contact Number Gender:

Diagnosis: Species:

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
Aug. 30 / 11:40 pm	Metronidazole	/		16ml SW	
PM	Gabapentin 100mg.	/		1 tab PO	
	Aminovast 300mg.	/		1 cap PO	
	Bion		TH	3 ml PO	
	Liv 52		TH	2 ml PO	
	Clindamycin	/		0.4 ml SW	
	Epo	/		0.4 ml SW	
12:00 am	Metro	/		16mL	
Aug 31	Fercobsang	/		1.5mL	
	Bion		TH	3mL	
	Uricare	/		1 tab	
	Aminovast	/		1 Cap	
	Clindamycin	/		0.4mL	
PM	Liv 52		TH	2mL	+ LC Dox Syrup / Renal N
	Aminovast	/		1cap	
	LC DOX		TH	2.7mL	
	Renal N		TH	1mL	
Sep 1	Fercobsang	/		1.5mL	
	Papi Bion		TH	3mL	
	Uricare	/		1 tab	
	Aminovast 300mg	/		1cap	
	Broncure		TH	3ml / PO	
PM					
	Cerenia	/		0.5ml / SW	
	Aminovast 300mg	/		1 cap / PO	+ 1 Singen Semi liquid
	Broncure		TH	3ml / PO	6:15 1/9
	Renal N		TH	1cc PO	
	Liv-52		TH	2ml / PO	
	LC Dox		TH	2.7ml / PO	PATIENT'S BELONGINGS:
Sept. 2 am	Fercobsang	/		1.5ml / SC	
	P-Bion		TH	3ml	
	Uricare	/		1 tab	
	Aminovast	/		1cap	
	Broncure		TH	3ml	
	Epo	/		0.3ml / SW	

Name: 24K | Wt: 4.7 kg.

Owners Name:

Contact Number

Diagnosis:

Date:

Gender:

Species:

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
	LC 7.4		TH	2.7ml / PO	
	Amikacin 7.5mg			1 cap / PO	
Sept 3 AM	Ferrobrang			1.5ml / SC	#Fluid
	P-Bion		TH	3ml	
	Uticore			1 tab	
	Aminavast			1 cap	
	Renal N		TH	3ml	
12:00 pm	Bion		M	3ml / PO	
PM	Aminavast 300mg			1 capsule	
	Renal N		M	1 mL	#1 IV administration
	Liv 52			1 tab	#1 pet stuck
	LC Dox		M	2.7mL	
	Broncure		M	3mL	
7:00 pm	Maropitant			0.55 ml SC	
Sept. 4 AM	Ferrobrang			1.5ml / SC	
	P-Bion		M	3ml	
	Uticore			1 tab	
	Aminavast			1 cap	
	Broncure		M	3ml	
12:30 pm	Bion		M	3ml / PO	
PM	Liv 52			1 tab	
	Aminavast			1 cap	
	Broncure		M	3mL	
	Renal N		M	1mL	
	LC Dox		M	2.7mL	
Sept. 5 AM	Ferrobrang			1.5ml / SC	
	P-Bion		M	3ml / PO	
	Uticore			1 tab	PATIENT'S BELONGINGS:
	Aminavast			1 cap	
	Broncure		M	3ml	
	Ursodiol 300mg			1/4 tab	
12:30 pm	Maropitant			0.5 ml SC	
	Bion		TH	3ml / PO	
	Liv 52			1 tab PO	
PM	Aminavast 300mg			1 cap	
	Renal N		M	1 g. scoop	
	LC Dox		TH	2.7 ml / PO	
	Ursodiol		M	1/4 tab	
	Broncure				

Name: _____ Wt: _____

Contact Number _____ Date: _____

Diagnosis: _____ Gender: _____

Species: _____

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
Sep. 6 AM	Calcium (12mn)	✓		3mL	
	Papi Bion		///	3mL	
	Uticare	✓		1tab	
	AminAvast	✓		1cap	
	Broncure	✓	//	3mL	
	Urso 1/4	✓		1/4 tab	
	Fercobsang	✓		1.5mL	
12:00 PM	Bion	✓	///	3ml PO	
PM	Liv 52	✓		1 tab PO	
	Ammavast 300mg	✓		1cap	
	Renal N		1	1 tab	
	Lc Dnx		///	2.7ml	
	Broncure		///	3 ml	
	Liv 52	✓		1 tab	PO
	Urso Udal 1 tab	✓		1/4 tab	
12:00	Calcium	✓	1	3mL	
Sep. 7	Fercobsang	✓		1.5mL	
	Papi Bion	✓	///	3mL	
	Uticare	✓		1tab	
	AminAvast	✓		1cap.	
	Broncure	✓	//	3mL	
	Urso 2 1/4	✓		1/4 tab	
	Opthacyn		///	2 gtt	
12 NN	Liv 52			1 tab	
	Papi Bion		///	3ml PO	#1 Reinsertion
	Opthacyn		///	2 gtt	#1 CBC
PM	Liv 52	✓		1 TAB	
	Aminavast 300mg	✓		1 cap	
	Bonare		///	3ml	PATIENT'S BELONGINGS:
	Renal N		///	1cc	
	Lc 500		///	2.7ml	
	Urso 2 1/2	✓		1/4 tab	
	Opthacyn		///	2gtt	
	EPO	✓		0.3 mL SC	
12mn -	Calcium	✓		3mL	

Name:

Contact Number: Wt:

Diagnosis:

Date:

Gender:

Species:

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
Sep. 8	Papi Bion				
	Uricare			3mL	1 opthacyn
	Aminovast 300mg			1tab	
	Broncure			1cap	
	Urso 2 1/4			3mL	
12:10 pm	Opthacyn			1/4 tab	
	Bion			2gtt	
	Livwell			2ml	
1:30 pm	Furobian			3ml	
	Amlgin			1.5ml sc	
pm				1cc sc	
	Aminovast				
	Renal N			1 cap	
Sept. 9 2026	12mn. Calcium				
	Papi Bion			3ml SIV	
	Uricare			3ml	
	Aminovast			1tab	
	Broncure			1cap	
	Urso 2			3ml	
	Opthacyn			1/4 tab	
	EPO			2gtt OE	
12:10 pm				0.5ml	
	Bion			3ml po	
pm	Furobian			1.5a sc	
	Aminovast 300mg			1 cap	
	Renal N			1 w	
	Livwell			1 tab	
	Urisdial			1/4 tab po	
	LC-Dox			2.5ml	
	Opthacyn			—	PATIENT'S BELONGINGS:
Sept 10 am	12mn Calcium			3ml sc	
	P. Bion			3ml	
	Uricare			1tab	

Amin Avast — 1cap

Broncure — 3ml

Urso — 1/4 tab

Opthacyn — 2gtt

1:10 pm Bion — 3ml po

Furobian — 1.5a sc

Rx - Hepatic

Rx - [illegible]

...ING CENTER

...'s Name: Zuki

Contact Number

Diagnosis:

Wt:

Date:

Gender:

Species:

INF ☐ NON-INF ☐

DATE/TIME	MEDICATIONS			DOSE/ROUTE	REMARKS
Sept. 10 2026 PM	Aminavast				
	Renal N	/		1 cap	
	Doxodil		O	1 tab.	
	Liv 52	/	/	1/4 tab	
	LC-Dox		/	1 tab	
	Opthacyn	.	TH	2.5 ml	
Sept 11 2026	12mn calcium		TH		
	* EPO	/		3ml SC	
	P-Bion	/		0.2ml/SC	
	Uticare		O	3ml	
	Aminavast	/		1 tab	
	Oroncure	/			
	* Urso				
	Opthacyn				
	Gabon 50mg	/			

Change → HEPATIC DIET
Kopog Uoor na po food!
TY!

EPO — 0.3ml

Sept. 7 (ok)

Sept. 9 (ok) :)

Sept. 11 ok :)

Sept. 13

Sept. 15

Sept. 17

12 AM - 3ml Calcium

MORNING:

1.) Papi Bion - 3ml
2.) Uticare - 1 tab
3.) Aminavast - 1 cap
4.) Oroncure - 3ml
5.) Urso - 1/4
6.) Opthacyn - 2 gtt.

12 NOON

1.) Papi Bion - 3ml PO
2.) [illegible]
3.) Ferrobrang - 1.5ml

EVENING:

1.) Livor - 1 tab — Forte
2) Aminavast - 1 cap
3) Renal N - 1 cc PO
4) LC Dox - 2.5ml PO
5) Ursodiol - 1/4
7) Opthacyn - 2 gtt