



Lake Lansing Road
**ANIMAL
CLINIC**
AND PET RESORT

Lake Lansing Road Animal Clinic
1615 Lake Lansing Road
Lansing, MI 48912
Ph. (517) 484-8031
Fax: (517) 484-8797
Web: www.LansingVetClinic.com

Feb 09, 2015

**Invoice Number
115929**

Jean Story (# 6678)

1283 Boichot Home Phone: 267-8838 (517)
Lansing, MI 48906 Work Phone: 636-4538 (517) ext:

Molly (# S)

Species: Canine Sex: Female
Age: 5 years old
Breed: West Highland White Terrier
Coat Color: White
Weight: 16.36 lbs.
Rabies Tag Number:

Parasite Screen (Fecal Exam): 08/10/2015
Heartworm Check (Blood Test): 02/07/2016
Adult Physical Exam: 02/07/2016
s-Distemper-Parvo in Series: 02/28/2015
s-Lepto in series: 02/28/2015

| Date | Code Description | Qty | Price |
|------------------------------------|------------------------------------|---------------|-----------------|
| 02/09/2015 | M473 Panacur Bulk per gram (10lbs) | 12.0 gram/10# | \$ 36.29 |
| Total for Molly: | | | \$ 36.29 |
| Total Invoice: | | | \$ 36.29 |
| Previous Balance: | | | \$ 0.00 |
| Total Amount Due: | | | \$ 36.29 |
| MasterCard(*****9025) | | | \$ 36.29 |
| Total Payments - Thank you: | | | \$ 36.29 |
| New Balance Due: | | | \$ 0.00 |

Dr. Chris Jones Med Refill

OT

I agree to pay above total amount according to card issuer agreement (Merchant agreement if credit voucher)

| RX Num | Code Description | Expire Date | Refills Left |
|----------------------|--|-------------|--------------|
| Molly (# S) 75993 | M473 Panacur Bulk per gram (10lbs) Mix 1 packet with wet or moistened dry food once daily for 6 days. | | 0 |

Keep Away From Children

| Patient Name | Date | Start Time | Appt. With |
|--------------|------------|------------|------------|
| Molly (# S) | 02/11/2015 | 05:20 PM | Dr. Zarka |
| | 02/28/2015 | 09:50 AM | Dr. Jones |
| | 03/19/2015 | 07:35 AM | Surgery |

Due to federal law and our liability insurance, we are unfortunately unable to accept returns for medications or other prescription products.



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Feb 07, 2015

**Invoice Number
115844**

Jean Story (# 6678)

1283 Boichot
Lansing, MI 48906

Home Phone: 267-8838 (517)
Work Phone: 636-4538 (517) ext:

Cookie (# A)

Species: Canine Sex: Female Spayed
Age: 7 years and 9 months old
Breed: West Highland White Terrier
Coat Color: White
Weight: 16.6 lbs.
Rabies Tag Number: 005666

Rabies Vaccination: 09/05/2017
Bordetella Vaccination: 08/29/2015
Distemper-Parvo Vaccination: 08/29/2015
Parasite Screen (Fecal Exam): 08/10/2015
Heartworm Check (Blood Test): 07/28/2015
Adult Physical Exam: 08/29/2015

| Date | Code Description | Qty | Price |
|--------------------------|---|-----|-----------------|
| 02/07/2015 | L003 Fecal Parasite Exam - In appointment | 1 | \$ 25.00 |
| Total for Cookie: | | | \$ 25.00 |

Molly (# S)

Species: Canine Sex: Female
Age: 5 years old
Breed: West Highland White Terrier
Coat Color: White
Weight: 16.36 lbs.
Rabies Tag Number:

Parasite Screen (Fecal Exam): 08/10/2015
Heartworm Check (Blood Test): 02/07/2016
Adult Physical Exam: 02/07/2016
s-Distemper-Parvo in Series: 02/28/2015
s-Lepto in series: 02/28/2015

| Date | Code Description | Qty | Price |
|-------------------------|---|----------------|------------------|
| 02/07/2015 | LAT615 Antech-Canine Heartworm Antigen | 1.00 | \$ 39.20 |
| | L003 Fecal Parasite Exam - In appointment | 1.00 | \$ 25.00 |
| | P60 Adult Physical Exam | 1.00 | \$ 33.50 |
| | V15 DHLPP in Series | 1.00 | \$ 27.00 |
| | M430 Comfortis 10.1-20# | 1.00 Chew Tabs | \$ 17.50 |
| | M023 Clavamox 125mg | 20.00 TABLET | \$ 42.53 |
| | M085 Prednisone 5mg | 6.00 TABLET | \$ 13.91 |
| Total for Molly: | | | \$ 198.64 |

Total Invoice: \$ 223.64
Previous Balance: \$ 0.00
Total Amount Due: \$ 223.64

Dr. Chris Jones

MasterCard(*****2736) \$ 25.00
MasterCard(*****9025) \$ 198.64
Total Payments - Thank you: \$ 223.64
New Balance Due: \$ 0.00

Jean Story

Jean Story (# 6678) - Continued

I agree to pay above total amount according to card issuer agreement (Merchant agreement if credit voucher)

| RX Num | Code | Description | Expire Date | Refills Left |
|-------------|------|---|---|--------------|
| Molly (# S) | | | | |
| 75986 | M430 | Comfortis 10.1-20# Give one tablet on the same day once a month during flea season to kill fleas and prevent flea infestation. GIVE WITH A FULL MEAL. | 02/07/2016 **Keep Away From Children** | 0 |
| 75987 | M023 | Clavamox 125mg Give 1 tablet TWICE daily for 10 days. Antibiotic - GIVE ALL MEDICATION AS PRESCRIBED GIVE WITH FOOD. STOP this medication if vomiting or diarrhea occurs, and call clinic right away. | 02/07/2016 **Keep Away From Children** | 0 |
| 75988 | M085 | Prednisone 5mg Give 1/2 tablet(s) once per day for 4 days, then Give 1/2 tablet(s) once every other day until gone *May increase thirst/urination* | **Keep Away From Children** | 0 |

| Patient Name | Date | Start Time | Appt. With |
|--------------|------------|------------|------------|
| Molly (# S) | 02/11/2015 | 05:20 PM | Dr. Zarka |
| | 02/28/2015 | 09:50 AM | Dr. Jones |
| | 03/19/2015 | 07:35 AM | Surgery |

Due to federal law and our liability insurance, we are unfortunately unable to accept returns for medications or other prescription products.



Lake Lansing Road Animal Clinic, Inc.
1615 Lake Lansing Road
Lansing MI
02/09/2015

CLIENT INFORMATION: Account ID: 6678

Name: Jean Story
Address: 1283 Boichot
Lansing, MI 48906
Phone: H: 267-8838 (517) W: 636-4538 (517) ext:
C: 775-5538 (517)

Spouse:
Balance: \$ 0.00

Vaccination Reminders

Rabies Vaccination
Bordetella Vaccination
Distemper-Parvo Vaccination
Parasite Screen (Fecal Exam) 08/10/2015
Heartworm Check (Blood Test) 02/07/2016
Adult Physical Exam 02/07/2016
Senior Physical Exam
Leptospirosis Vaccination
Wellness Blood Test
Lyme Vaccination

PATIENT INFORMATION:

Name: Molly
Sex: F
Birthday: 02/07/2010
ID: S
Color: White
SI:
Species: Canine
Breed: West Highland White Terrier
Age: 5 years old
Rabies Tag:
Weight: 16.36lbs.
Alert:

PROBLEM LIST(FIRST 6)

MEDICAL HISTORY:

| Date | By | Code | Description |
|------------|----|------|---|
| 02/09/2015 | 92 | M473 | Panacur Bulk per gram (10lbs) (Current Invoice) Mix 1 packet with wet or moistened dry food once daily for 6 days. |

02/07/2015 2 EXAM, RESCUE DOG, 1 OF 2 DHLPP: Weight today was 16.36 pounds. Just got last night. Had evidence of fleas, has been bathed.
BCS 3/5. G2PD. Heart/Lungs/LN's Normal.
Bilateral otitis externa - cleaned - No Cytology done.
Skin generalized erythema, some hair loss on inside of thighs bilateral. Coat matted. No fleas seen on exam today.
Nails over grown - trimmed
R/O: FAD, Otitis Externa.
Plan: Mometamax, Clavamox, Pred taper dose, Comfortis
1 of 2 DHLPP today. Gave only one vaccine today as we know little about her general health status.
Owner would like to do spay and dental at same time. cj

02/28/2015 Recheck: Recheck Ears ..

| | | | |
|------------|---|------------|--|
| 02/07/2015 | 2 | M362 | Mometamax 15gm |
| 02/07/2015 | 6 | 02/07/2015 | Apply 6-8 drops into each ear ONCE daily for 3 weeks. Recheck ears in 3 weeks. Discontinue use if irritation/redness develops or worsens. |
| 02/07/2015 | 2 | M085 | Prednisone 5mg |
| 02/07/2015 | 6 | 02/07/2015 | Give 1/2 tablet(s) once per day for 4 days, then Give 1/2 tablet(s) once every other day until gone *May increase thirst/urination* |
| 02/07/2015 | 2 | M023 | Clavamox 125mg |
| 02/07/2015 | 6 | 02/07/2015 | Give 1 tablet TWICE daily for 10 days. Antibiotic - GIVE ALL MEDICATION AS PRESCRIBED GIVE WITH FOOD. STOP this medication if vomiting or diarrhea occurs, and call clinic right away. |
| 02/07/2015 | 2 | M430 | Comfortis 10.1-20# |
| 02/07/2015 | 6 | 02/07/2015 | Give one tablet on the same day once a month during flea season to kill fleas and prevent flea infestation. GIVE WITH A FULL MEAL. |

02/24/2015 Recheck: Revaccinate in 3 Weeks

| | | | |
|------------|---|----------|--|
| 02/07/2015 | 2 | SNDHLPP1 | DuramuneMax5/4L SN:CE961A-326A 14NOV15 |
| 02/07/2015 | 2 | V15 | DHLP-P in Series |

***Vaccination reactions although rare, are possible in any animal. Some pets are lethargic for 12 to 24 hours.
Page 1 of 2

Diet: _____ Chronic Meds; _____

Any Changes in stool or urine habits; _____
Wellness Testing ___ Discussed ___ Declined Needs Heartworm meds Y N Needs Flea Y N

Client Email Address: j_story@att.net



hours. Others may exhibit local tenderness or develop a small lump at the injection site. More severe allergic reactions that produce vomiting, hives or facial swelling may need treatment. Please call us if your pet has a vaccine reaction.

| | | | |
|------------|---|--------|--------------------------------------|
| 02/07/2015 | 2 | P60 | Adult Physical Exam |
| 02/07/2015 | 2 | L003 | Fecal Parasite Exam - In appointment |
| 02/07/2015 | 2 | LAT615 | Antech-Canine Heartworm Antigen |

02/07/2015 2 FECAL EXAM POSITIVE-WHIPS:

We consider your pet's health our first concern.

Diet: _____ Chronic Meds; _____

Any Changes in stool or urine habits; _____

Wellness Testing ___ Discussed ___ Declined Needs Heartworm meds Y N Needs Flea Y N

Client Email Address: j_story@att.net

Zoasis - Heartworm Antigen
Date Performed: 02/08/2015 06:29 AM

Patient Info:

ID: 6678 S
Name: Molly
Owner: Jean Story
Provider: 2

Species: Canine
Breed: West Highland White Terrier
Birthdate: 02/07/2010
Sex: F

Clinic:

Lake Lansing Road Animal Clinic,
Inc.
1615 Lake Lansing Road
Lansing, MI 48912

Accession Result ID CHHW36027942

Heartworm Antigen

Heartworm Antigen Negative

Negative for adult heartworm antigen (mature female heartworms). Infection occurring sooner than 5 to 7 months prior to testing may not be detected.
