# MEDICAL RECORD

Date of Record: 3/19/2025

#### **Pet Profile**

**ID**: 2 **Birthday**: 3/12/2025

Name: Dog Age: 0 years, 0 months

Species: Dog (Standard)

Color: N/A

Breed: N/A

Status: Alive

Gender: male

### **Contact Details**

Owner: 1 1 Contact number: 1

Email: 1@test.com Address: 1

Emergency Contact 1: 1 - 1 Emergency Contact 2: N/A - N/A

#### **Vaccination Record**

Type of Vaccine	Number of Doses	Date
2 in 1 (for Dogs' 1st vaccine, usually for puppies)	1	2/27/2020

## **Medical Information**

Weight: 10.7 Has past surgeries: Yes
Temperature: 36.8 Date of surgery: 3/14/2025

Condition: Fever Type of surgery: Tumor Removal

**Symptoms:** Vomiting **Laboratories:** X-ray

# **Latest Diagnosis**

**Surgery Conflicts** 

#### **Visit Details**

**Recent Visit: 3/10/2025** 

Purpose of Visit: Follow up checkup to check for surgery effects

Recent Purchase: Antibiotic

# **Attached Lab File**