

"Lecheme", Elephant, Blue Unit, Boston, 10/20/99

HX - Routine exam

PE - LF #5 has an active NBA on the lateral aspect. LF between #4-5 interdigital tissue is still swollen. LF #4, old NBA. LF #1 abnormal nail growth. LR #5 has a small, but active NBA.

A: Active NBAs

P: Currently being treated.

"Romeo", Elephant, Blue Unit, Boston, 10/20/99

HX -Moved from CEC to Blue Unit. Just finished TB treatment.

PE - BAR, Good BC, Eating. RR and LR #3 and #4 toenails are grown together.

Mild lameness noted in the LR leg (stifle). This is reported to be a chronic problem

LB - Blood drawn for Tb Elisa

"Juliet", Elephant, Blue Unit, Boston, 10/20/99

HX - Moved from CEC to Blue Unit.

Currently being treated for Presumptive TB.

Previous CBC showed an elevated WBC with a monocytosis.

PE - BAR, Good BC, Eating.

Mild lameness noted in the LR leg (stifle). This is reported to be a chronic problem

Tx - Banamine 10 ml IM.

RX - Adequan 10 ml IM Q I week as needed.

LB - Blood drawn for Tb Elisa

Blood collected at 2,4,6 hours for drug levels

"Bonnie", Elephant, Blue Unit, Boston, 10/20/99

HX -Moved from CEC to Blue Unit

PE - BAR, Good BC, Eating.

LB - Blood drawn for Tb Elisa

"Shirley", Elephant, Blue Unit, Boston, 10/20/99

HX -Moved from CEC to Blue Unit

PE - BAR, Good BC, Eating.

LB - Blood drawn for Tb Elisa

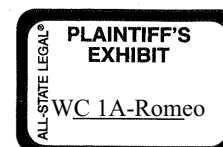
"Kelly Ann", Elephant, Blue Unit, Boston, 10/20/99

HX -Moved from CEC to Blue Unit. Just finished TB treatment.

PE - BAR, Good BC, Eating.

LB - Blood drawn for Tb Elisa

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FELD 0021843

ANIMAL VETERINARY REPORT

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Species: Elephas maximus.  
Common Name: Asian elephant.  
Sex: M.

Unit: Polk.  
Name: Romeo.  
Date of Birth: 01/10/1993.

MEDICAL HISTORY

1-11-93 TAT  
12/15/93 DW fenbendazole/os  
1/9/94 DW febendazole/os  
11/10 muscle spasm RF 5cc BoSe IM  
12/3 tetanus toxoid  
2/22/95 IV w/eqvalan, trim tusks  
10/10 laceration RF, PP & 8 gram amoxicillin IM/day x 7 days  
7/95 tetanus toxoid  
1/27/97 fecal neg for ova  
4/1 tetanus toxoid  
9/29 passed some connective tissue?  
10/3 partial anorexia  
10/29-11/3 4 culture washes for TB  
7/3/98 started Isoniazid 50 (300mgm) tabs per rectum slurry SID (wal)  
7/21 BT for Isoniazid (wal)  
7/25 off from medication (wal)  
8/17 appetite depressed(wal)  
8/20 treat w/Rifampin(wal)  
8/24 BT for Isoniazid & Rifampin levels(wal)  
10/14 3162 lbs.  
10/27 HX: Presented for a recurrence of a chronic (3 year) lameness of left leg or hip. Has been on/off and mild. Seems to be worse after lying down on that side.  
PE: BAR. General PE WNL. Observed walking and noted only a very mild lameness. Observed walking again after he got up from a short period (1 min) of lying down. The lameness was pronounced and seemed to be a stifle problem.  
A: Seem to be too young for typical elephant arthritis. Possible trauma or injury to the leg 3 years ago is not noted in the histry, but would be a likely cause. Need to investigate the possibility of mycoplasma arthritis.  
P: Monitor.(ri)  
11/16 HX: Chronic (3year) lameness of left leg or hip. Has been on/off and mild.  
PE: BAR. General PE WNL. No lameness noted today.  
A: Suspect stifle problem.  
P: Treat only if lameness is seen.(ri)

END OF REPORT

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