

# Homeopathic Consultation Intake Form

AVH Certification Committee

## ACUTE CASE

Instructions: Fill out form completely using typing or printing. Hand written forms are not acceptable.

Veterinarian's Social Security #: (courtesy of Sid Storozum DVM) Date of Intake: 10/29/97

Animal Name (first and last): Nickie Smith

(circle) Dog/Cat/Horse/Bird/Other: \_\_\_\_\_ M F M/N F/S: (date neutered) \_\_\_\_\_

Age: 1 year Weight: 45 lbs (normal weight = 45 lbs) Breed: Siberian Husky

### Chief Complaint(s):

Swollen face- sudden onset, cause unknown, but suspect insect bite/sting, or allergic reaction to something ingested or contacted through the skin, or inhaled.

**History:** Provide a chronological list of previous medical problems and/or the progression of this episode of disease. Underline the characteristic symptoms (those that are peculiar to the case and thus represent the animal's unique response to the disease).

After having been outdoors unsupervised, Nickie was found to have a swollen face, particularly around the eyes and upper lips. She was presented to me 20 minutes later.

My findings: swollen, puffy eyelids, chemosis, both eyes, edematous swelling of upper lips – mild to moderately sensitive to touch and pressure. No evidence of a causative influence was found by me or known to the owner. Assume she had "allergic reaction" to insect bite or something she ate or inhaled or contacted through her skin. She prefers to be outdoors, though it is cool out, and was not interested in coming indoors even after the "incident". She was not observed to be rubbing her face.

**Present Symptoms:** Provide details of each important symptom, including duration, modalities, changes in behavior, etc. Underline the characteristic symptoms ( those that are peculiar to the case and thus represent the animal's unique response to the disease).

Swelling of eyelids  
Chemosis of both eyes } All of a puffy edematous nature.  
Swelling of upper lips  
Sensitive to touch

Diet: Nutromax

Animal's Name: Nickie Smith

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**Prior Rx**

Homeopathic (list)

Conventional (list)

None

vaccines when a puppy

**Present Medication(s):** None

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**Your Analysis**

Repertory used (circle): Kent    Kunzli    Phatak    Boger  
   Knerr    Boericke    Murphy    Synthetic  
   Synthesis    Complete    Other\_\_\_\_\_

**Symptoms used in analysis (list)**

**Corresponding Rubric Used (list)**

Use characteristic symptoms underlined on the previous page.

Chemosis of eyes  
Swollen puffy lids  
Swollen upper lips  
Preference for outdoors  
Resisted touching swollen areas

Eye, chemosis  
Eye, swollen, lids, edematous  
Face, swelling, lips, upper  
Generals, air, open, desire for  
Skin, sensitive

**Provide a copy of your repertory based analysis (hand written or computer based) on a separate sheet of paper. Also provide a Ddx of the 3 most appropriate remedies from the analysis and a detailed discussion of prognosis (see instructions).**

**Your Prescription:** Include potency and repetition. Explain your choices based on your assessment of the strength of the life force, intensity of the symptoms, extent of pathology, etc. Use facts from the case to support your selection. When will you follow up on the case?

Apis 1M q4 hrs\* x 3 doses (owner gave at 5:30 p.m., 11:00 p.m., and 8:00 a.m.) No-brainer here- all symptoms are characteristic symptoms of Apis. High potency due to intensity and rapid onset; young vital patient. Repetition scheduled to allow adequate time to observe response.

\* Owner told to repeat dose if no improvement is noted or if improvement has not progressed in a 4-hr period.

**Case Management:** Tell us what supportive or ancillary therapy you will use, diet changes you made, long term strategy (for chronic cases), what symptoms you will monitor, etc.

Of the remedies high in the analysis, I chose 3 to differentiate based on my intention to use acute



remedies and also to emphasize the swelling in the case. Those I did not choose were eliminated because of the lack of expected characteristic symptoms to be seen with those remedies. An example is Belladonna, which would have dilated pupils and excitability, and delirium as part of the presentation.

Rhus-t

Lach

Apis

The characteristic symptoms in this case were the edematous swellings in the face (acute onset), the sensitiveness to touch and the preference for cool outdoor air (did not want to come in).

Rhus-tox is aggravated by cold, ameliorated by warmth (all complaints), and typically has redness and itching with the swellings.

Lachesis patients are sensitive to touch and ameliorated in cool outdoor air (fits the case), but their swellings, though puffy, usually do not "pit", and they typically have a blue/purple discoloration.

Apis fits the case perfectly: pitting edema, sensitive to touch, and cool outdoor air ameliorates. The location of the swellings is characteristic, and the chemosis of the eyes is more pronounced in Apis than the other remedies.

#### Potency selection

As mentioned, a high potency was selected because of the rapid onset of this condition in a young and vital animal. Repetition was used to elicit a fast response, the client instructed not to continue this remedy once improvement was noted. No more than 3 doses were prescribed, as failure of response after 3 doses would indicate the unsuitability of the prescription.

#### Prognosis

Patient's condition (resistance and defenses)- This is a young dog with good vitality as evidenced by the lack of prior illness and also the rapid swelling reaction (to localized the disease). In spite of the inimical agent, the life force was able to keep the disease localized to the area of injury (e.g. not becoming systemic or experiencing shock) and the dog felt reasonably well throughout the experience.

Extent of the disease progression- Presumably the original assault on the organism was a single sting or puncture. The best that could have been accomplished was local swelling around that injury. The disease extended further than that, involving the face (eyes and lips). So the disease did not extend far, but further than the best possible reaction. A worse condition would have been swelling involving the throat or parts further from the head; worse yet, a systemic involvement and anaphylactic shock.

Outline of the disease progression- In this acute case, a simple progression was  
Sting/injury----- to local swelling-----to swelling of the eyes and lips.

#### Long term case strategy

There is no history of prior disease and, because of the acute nature of this condition there was not time for a full workup. That there was this much swelling (though it could have been worse) suggests a certain degree of susceptibility, perhaps to underlying (latent) psora. I plan to evaluate this dog after the crisis for some of the typical signs of latent psora and initiate constitutional treatment if indicated.

## Homeopathic Consultation Follow-up Form AVH Certification Committee

Instructions: Fill out form completely using typing or printing.

Date of first intake:   10/29/97  

Veterinarian's Social Security # \_\_\_\_\_ Date of follow-up:   10/30/97  

Animal Name (first and last):   Nickie Smith  

Last Prescription: (include date administered, remedy, potency, & repetition if any)  
Apis 1M given on 10/29/97 at 5:30 p.m., 11:00 p.m., on 10/30/97 at 8:00 a.m.

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**INSTURCTIONS:** List every symptom that is characteristic and was used in the analysis or that you are monitoring .

### Characteristic Symptoms (list)

Chemosis of eyes  
Swollen puffy eyes            }  
Swollen lips  
Sensitive skin

### Responses or Changes Seen ("same" if no change)

All symptoms began to improve  
20 minutes following first dose. She  
was back to "normal" by 12:00 noon  
on 10/30/97

**New Symptoms:** (never seen before)  
none

**Your Evaluation of Response:** (Towards cure, palliation, suppression, no change, or disease aggravation). Use details from the case to explain your answer.

The response is clearly curative because of the rapid resolution of the symptoms while the dog, as a whole being, felt very well and acted quite normal. There was no observed aggravation which is typical of acute disease treatment. There are also no new symptoms to indicate another prescription.

**Your Next Move:** If you change remedies, explain why and include a new analysis. If you choose to wait, explain what you are waiting for. If you repeat the same remedy explain why it is time to repeat. Use details from the case in your explanations. Tell us when will you follow up on the case.

The proper action at this point is to wait and observe the dog's condition and later, as planned, to evaluate for constitutional treatment. Client is instructed to inform me of any return of original symptoms or any appearance of new symptoms.

## Homeopathic Consultation Follow-up Form AVH Certification Committee

Instructions: Fill out form completely using typing or printing.

Date of first intake: 10/29/97

Veterinarian's Social Security # \_\_\_\_\_ Date of follow-up: 12/5/97

Animal Name (first and last): Nickie Smith

Last Prescription: (include date administered, remedy, potency, & repetition if any)

Apis 1M given 10/29/97 at 5:30 p.m., 11:00 p.m., and 10/30/97 at 8:00 a.m.

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Instructions: list every symptom that is characteristic and was used in the analysis or that you are monitoring .

### Characteristic Symptoms (list)

### Responses or Changes Seen ("same" if no change)

Chemosis of eyes  
Swollen puffy eyes  
Swollen lips  
Sensitive skin

Resolved  
Resolved  
Resolved  
Resolved

### New Symptoms: (never seen before)

None.

**Your Evaluation of Response:** (Towards cure, palliation, suppression, no change, or disease aggravation). Use details from the case to explain your answer.

The prescription is still considered curative because of the well-being exhibited by Nickie and because of the long period without further symptoms. The client was satisfied with the treatment and has not sought further care until this routine examination.

**Your Next Move:** If you change remedies, explain why and include a new analysis. If you choose to wait, explain what you are waiting for. If you repeat the same remedy explain why it is time to repeat. Use details from the case in your explanations. Tell us when will you follow up on the case.

Careful examination of Nickie and detailed questioning of the client revealed some symptoms of latent psora: Tendency for soft stools if the diet is changed; excessive waxiness of the ears; "doggy" smell to the body and some occasional chewing of the base of the tail. These symptoms are more noticeable now than before.

Interpretation: There is evidence of psora, perhaps more apparent now because of the treatment of the acute condition, or perhaps because more time has gone by (as psora tends to develop with time). I am evaluating this dog for constitutional treatment.