



# Animal Control

Regular

<http://www.springfieldcityhall.com>

~ Agenda ~

Gladys Oyola-Lopez

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Thursday, June 26, 2025

10:00 AM

City Hall -- Room 205

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## Call to Order

10:00 AM Meeting called to order on June 26, 2025 at City Hall -- Room 205, 36 Court Street, Springfield, MA.

## Approval of Minutes

1. February 13, 2025 Minutes

## Dangerous Hearing

2. Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina.
3. Dangerous Dog Hearing for a Dog Named Lilly at 87 Massreco St Owned by Elizabeth Torres

## Non-Compliance Hearing

4. Nuisance Dog Hearing for a Dog Named Mia at 64 California Ave Owned by Peter Gallucci. First Hearing Held on July 18 and a Follow Hearing Held on August 15.
5. Dangerous Dog Hearing for a Dog Named Abby at 192 Harkness Ave Owned by Mark Tourangeau.
6. Dangerous Dog Hearing for Dogs Named Charlie, Deja and Brenda at 66 Leyfred Ter Owned by Abdul Kabba



# Animal Control

Regular

<http://www.springfieldcityhall.com>

~ Minutes ~

Gladys Oyola-Lopez

Thursday, February 13, 2025

10:00 AM

Hybrid Room 205

## Call to Order

10:00 AM Meeting called to order on February 13, 2025 at Hybrid Room 205, City Hall, Springfield, MA.

Attendee Name	Title	Status	Arrived
Melvin A. Edwards	Ward 3 Councilor	Present	
Keith Fleming	Police Officer	Present	
Camile Nelson Campbell	Deputy City Clerk	Present	
Joel Rosemond	Police Officer	Absent	
Megan Landry	Board Member	Present	
Veronica Johns	Board Member	Present	

## Approval of Minutes

### 1. December 19, 2024 Minutes

COMMENTS - Current Meeting:

Read.

**Board Member Edwards made a motion to accept the minutes the motion was seconded by Board Member Landry.**

### Roll call votes on the motion

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Abstained
Board member Landry	Yes
Board member Nelson Campbell	yes

Motion passed by roll call votes.

Minutes approved.

Communication: February 13, 2025 Minutes (Approval of Minutes)

***Dangerous Hearing***

**2. Dangerous Dog Hearing for Two (2) Dogs Named Kuma and Nikita at 85 Narragansett St Owned by Cortney Cheney.**

**COMMENTS - Current Meeting:**

Read.

Renee Robichaud, Animal Control Officer for Thomas J. O'Connor (TJO) and Adoption Center read their reports.

**Complainant**

Krystin Wanczyk stated it's not the first, second or third time, at least one of the dogs is dangerous to men and they are not safe dogs to be around.

**Respondent**

Cortney Cheney stated the first incident happened in October, and she felt like it was a disservice to the dogs by not properly introducing them by assuming they are all friendly animals. The dogs are not aggressive. The second incident was preventable, because they were aware not to let the dogs out unattended. She took the dog to the Vets; she feels terrible for what happened. Kuma is signed up behavioralist evaluation for his anxiety.

Tracy Cheney stated the dogs are good dogs and they are not aggressive. Cortney is very responsible from the day Kuma was born; she has done everything possible for Kuma. Krystin should take some of the responsibility for her action.

**Rebuttal**

Krystin Wanczyk stated most of the days the dogs are alone, and they are high energy. Their dogs have been outside unattended. Her dog was healthy and should still be her with her and there is nothing she can do to bring her dog back.

Cortney Cheney said she goes in and out on her lunch break on Tuesdays and Wednesdays. She has never let her dogs out unattended. It's a very unfortunate situation.

Tracy Cheney said the dogs just not vicious.

**Board Member Edwards made a motion to deem the dogs dangerous the motion was seconded by Board Member Fleming.**

**Roll call votes on the motion**

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	No

Communication: February 13, 2025 Minutes (Approval of Minutes)

Board member Landry	Yes
Board member Nelson Campbell	yes

Motion passed by roll call votes.

**The Advisory and Hearing Committee has imposed the following condition on the animals:**

1. That whenever the dog is removed from the premises of the owner, the dog shall be securely and humanely muzzled and restrained with a leash having a minimum tensile strength of 300 pounds and not exceeding three feet in length. As defined in Chapter 110, Section 10-B-3 of the Code of the City of Springfield Ordinance.

**Roll call votes on the condition**

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	No
Board member Landry	Yes
Board member Nelson Campbell	yes

Condition passed by roll call votes

***Non-Compliance Hearing***

**3. Dangerous Dog Hearing for Dogs Named Charlie, Deja and Brenda at 66 Leyfred Ter Owned by Abdul Kabba.**

He has failed to comply with the secure enclosure and has yet to provide proof of liability insurance.

**COMMENTS - Current Meeting:**

Read.

**Complainant**

Renee Robichaud, Animal Control Officer for Thomas J. O'Connor (TJO) and Adoption Center read their reports.

**Respondent**

Abdul Kabba said his dogs are well behaved. He built the dog handle that he was asked to build. TJO O'Connor came and took pictures of the handle, so he's not aware if it's did not meet their expectation. The dogs do not leave his yard, they are surrounded.

**Rebuttal**

Communication: February 13, 2025 Minutes (Approval of Minutes)

Officer Robichaud said the most visit on the 10th, it is missing one section of the wire. It is now a physical enclosure of some kind, which is progress. The recent pictures look much better.

**Board Member Johns made a motion to imposed the five hundred dollar (500.00) fine for non- compliance the motion was seconded by Board Member Edwards.**

**Roll call votes on the motion**

Board member Edwards	Yes
Board member Fleming	No
Board member Johns	Yes
Board member Landry	No
Board member Nelson Campbell	No

Motion failed by roll call votes.

**Board Member Edwards made a motion that the secured enclosure to be completed by Monday, February 17th, 2025 the motion was seconded by Board Member Johns.**

**Roll call votes on the motion**

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	yes
Board member Landry	Yes
Board member Nelson Campbell	Yes

Motion passed by roll call votes.

**The Advisory and Hearing Committee has imposed the following conditions on the animal:**

1. That the secured enclosure to be completed by Monday, February 17th, 2025. Thomas J. O'Connor (TJO) will do a follow in the same week to make sure compliance are met. As defined in Chapter 110, Section 10-B-9 of the Code of the City of Springfield Ordinance.

Communication: February 13, 2025 Minutes (Approval of Minutes)



Brief Description of Incident: ATTACHMENT: YES / NO

Yaelis was walking to school when a grey pitbull type dog from this address ran out of the yard and bit her on the leg resulting in one suture. Post exposure rabies shots were started at the ER left knee puncture wounds:

RESPONDENT INFORMATION

Do you know the name or address of the owner of the dog(s)? YES / NO

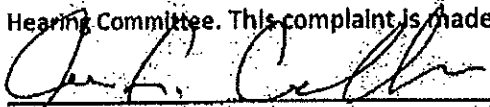
Name: \_\_\_\_\_  
Street Address: 10 Sanderson st Springfield MA  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

DOG INFORMATION

Name: \_\_\_\_\_ Sex: \_\_\_\_\_  
Breed: pit bull type  
Primary Color: gray Secondary Color: \_\_\_\_\_  
Name: \_\_\_\_\_ Sex: \_\_\_\_\_  
Breed: \_\_\_\_\_  
Primary Color: \_\_\_\_\_ Secondary Color: \_\_\_\_\_

STATEMENT

I understand that I will be required to attend the hearing and make my complaint before the Advisory and Hearing Committee. This complaint is made under the penalties of perjury.

  
Signature of Complainant

3/31/25  
Date of Complaint

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Nelson, Camile**

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**From:** Nelson, Camile  
**Sent:** Monday, June 2, 2025 3:57 PM  
**To:** Shewchuk, Robert P.; Oyola, Gladys; Landry, Megan; Veronica Johns; Keith Fleming; Rosemond, Joel D.; Edwards, Melvin A.; Robichaud, Renee; Cahillane, Heather; Anzalotti, Megan  
**Subject:** DDH- 6-5-25 Canceled & Reschedule

Good afternoon Everyone,

I am canceling the meeting for Thursday, June 5, 2025 @10:00 A.M. Can everyone make for June 29? Please let me know as soon as you can.

Mr. Pettway appeared today in the City Clerk's Office and told me that he's not the owner of the dogs. He gave me his tenant information, Ana Nina, 10 Sanderson St, Springfield, MA 01107.

Thanks,

*Camile Nelson Campbell*

*Assistant City Clerk*

*36 Court Street RM 123*

*Springfield, MA 01103*

Direct:1-413-787-6561

Fax:1-413-787-6502

Office:1-413-787-6096

[cnelson@springfieldcityhall.com](mailto:cnelson@springfieldcityhall.com)

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)



**Activity Card**  
**A25-084296-1**

**A25-084296-1**    **INV/BITEF**    **Priority Level: 4**    **Total Animals: 1**    **Animal Type: DOG**

**Activity Address:** 10 SANDERSON ST

**Activity Comment:** Citizen came to TJO today to fill out DDH after his child was bitten by a dog at this residence on 3/17. ACO's never notified. Attempt to gather information for bite report. UTMC left notice

**Owner Information:**

P057905    UNKNOWN UNKNOWN  
              SPRINGFIELD, MA 01107  
              10 SANDERSON ST  
              000-0000

**Animal Information:**

UNKNOWN GRAY U PIT BULL

<b>Officer:</b> P052479    LAWSON	<b>Clerk:</b> 117246	<b>Results:</b>
Call Date:            03/31/25 02:50 PM		1 UTMC
New Date:            03/31/25 02:50 PM		1 NOTIC
Dispatch Date:		1 RPRT
Working Date:        03/31/25 03:04 PM		
Complete Date:      03/31/25 03:08 PM		

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Date of Report: 03/31/2025

# ANIMAL BITE REPORT

## Rabies Control Investigation

### Thomas J. O'Connor Animal Control

1. Bite Number:  
B25-004063

<b>I. ANIMAL/PERSON BITTEN</b>	<b>IDENTIFICATION</b>	2. Name (Last, First) CANDELARIA, Yaelis	3. ID # P057906	4. Sex	5. Age	DOB 11/22/20	6. Telephone (413) 219-2169			
		7. Address (No. & Street) (City) (State) (Zip) 42 SANDERSON ST SPRINGFIELD, MA 01107								
		8. Name of Parent or Guardian (if victim is a minor) CANDELARIA, JOSE (P057907) (NONE)			9. Address (if different) 70 BURR ST, SPRINGFIELD, MA 01109					
		10. Source of information P057907			Victim Telephone - Other					
<b>II. ANIMAL/OWNER</b>	<b>EXPOSURE</b>	11. Place of attack 10 SANDERSON ST		12. Time and Date of attack March 17, 2025 12:00 am						
		13. Circumstances of attack: UNPROVOKED								
		14. Location and description of wound(s): L KNEE, LVL 3								
		15. Was wound treated? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Date: 3/17								
<b>TREATMENT</b>	16. Wound treated by: <input type="checkbox"/> Self <input type="checkbox"/> Parent <input checked="" type="checkbox"/> Dr. Baystate			Telephone						
	17. Details of wound treatment <input type="checkbox"/> Washed <input checked="" type="checkbox"/> Sutured			18. Anti-Rabies Treatment Recommended? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes By Whom? Baystate						
	19. Anti-Rabies Treatment Given? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes By Whom? Baystate Telephone:									
<b>MISC.</b>	Yaelis was walking to school when a grey pitbull type dog from this address ran out of the yard and bit her on the leg resulting in one suture. Post exposure rabies shots were started at the ER.									
	20. Animal Owner (custodian) UNKNOWN, UNKNOWN		21. ID # P057905	Telephone: 000-0000						
<b>IDENTIFICATION</b>	22. Address (No. & Street) (City) (State) (Zip) 10 SANDERSON ST SPRINGFIELD, MA 01107									
	23. Type of animal UNKNOWN SEX, DOG		ID # A000000	<input checked="" type="checkbox"/> Owned	<input type="checkbox"/> Stray	<input type="checkbox"/> Wild	Est. Age: 20			
	24. Description: (Breed, color, etc.) BROWN PIT BULL Grey UNKNOWN			25. License NO						
	26. Behavior <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal			27. Prior Bites? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
	28. Vaccinated against rabies? Vaccination Date Rabies Tag Number <input type="checkbox"/> 1 Year Vaccine <input type="checkbox"/> 3 Year Vaccine									
	29. <input checked="" type="checkbox"/> Unable to locate animal <input type="checkbox"/> Confined at TJO <input type="checkbox"/> Animal Confined From Date: 03/17/2025 To Date: 03/27/2025									
<b>QUARANTINE</b>	30. If at owner's home, have quarantine guidelines been explained? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						31. Date sent to Animal Inspector/Board of Health emailed 4/1/25 MM			
	31. Cause of Death <input type="checkbox"/> Illness <input type="checkbox"/> Injury <input type="checkbox"/> Euthanasia Date:									
<b>REVIEW</b>	32. Veterinarian <input type="checkbox"/> Did see animal <input type="checkbox"/> Did not see animal			33. Head examination is <input type="checkbox"/> Requested <input type="checkbox"/> Not Warranted						
	34. Remarks:									
<b>DISPOSITION OF ANIMAL</b>	<b>LABORATORY</b>	35. Head sent to Lab:		DATE		BY		TELEPHONE		
		36. Results <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> UNSATISFACTORY								
		37. Victim notified by: <input type="checkbox"/> Person <input type="checkbox"/> Phone <input type="checkbox"/> Mail								
		38. <input type="checkbox"/> Case Closed: Date: By:								
39. Officer Completing Form: LAWSON Telephone: 413 781 1484										

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Robert P. Shewchuk  
 Associate Solicitor  
 Law Department  
 36 Court Street, Room 210  
 Springfield, MA 01103  
 Office: (413) 787-6085  
 Direct Dial: (413) 787-6511 Fax: (413) 787-6173  
 Email: [rshevwchuk@springfieldcityhall.com](mailto:rshevwchuk@springfieldcityhall.com)



THE CITY OF SPRINGFIELD, MASSACHUSETTS

SENT BY FIRST CLASS AND CERTIFIED MAIL RETURN RECEIPT REQUESTED

May 15, 2025

Luther Pettway  
 10-12 Sanderson Street  
 Springfield, MA 01107

RE: Identification of owner of potentially dangerous dog.

Mr. Pettway:

The Thomas J. O'Conner Animal Control and Adoption Center has received a request for dangerous dog hearings based on a child being bitten by a dog on her way to school from your address. Attached hereto please an Activity Report of the incident. The dog is described as a grey, pit bull type dog, which was observed coming from your property.

If the dog is owned by you please be advised you will be sent notification of a dangerous dog hearing, which is tentatively scheduled for June 5, 2025. If the dog is owned by a tenant of yours, please contact me via telephone or email with their name and contact information so the owner may get proper notification of the above referenced dangerous dog hearing.

Please be advised Massachusetts caselaw has found landlords can be found responsible for the actions of their tenant's dogs. Factors include whether the dog has dangerous propensities, and whether the landlord had notice that their tenant was keeping a dangerous dog. Please allow this correspondence to serve as notice of a potentially dangerous dogs living at 10-12 Sanderson Street, Springfield, MA 01107.

Thank you for your attention to, and anticipated cooperation on this important matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

Robert P. Shewchuk, Esq.

Attachments (1)

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# RESIDENTIAL PROPERTY RECORD CARD

CITY OF SPRINGFIELD

Status: 10 - 10 SANDERSON ST

Map ID: 10550002

Class: 104 - Two-Family

Card 1 of 1

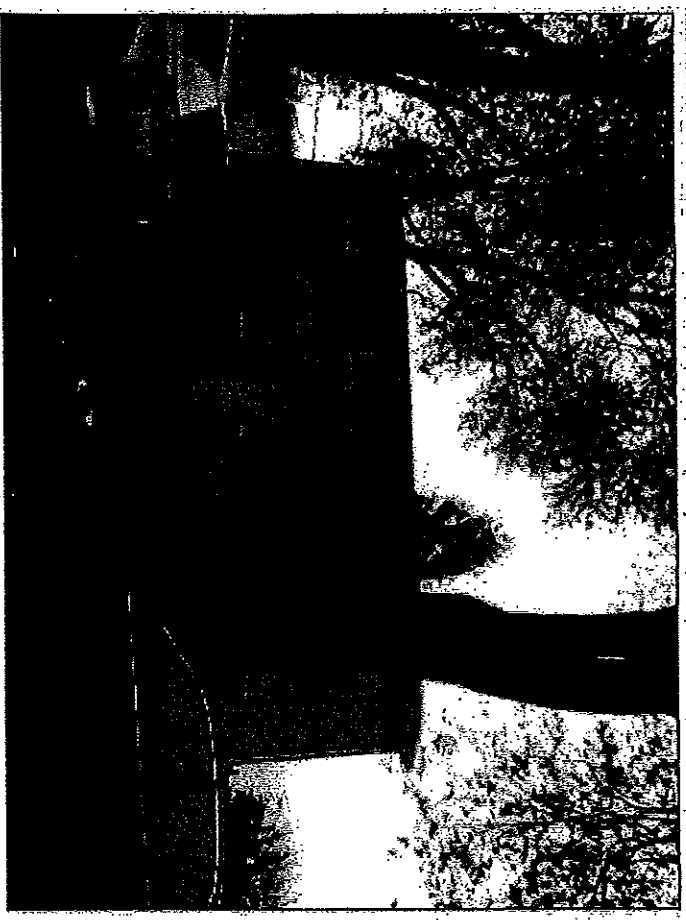
### Assessed Owner:

PETTYAN LUTHER  
10-10 SANDERSON ST  
SPRINGFIELD MA 01107

### General Information

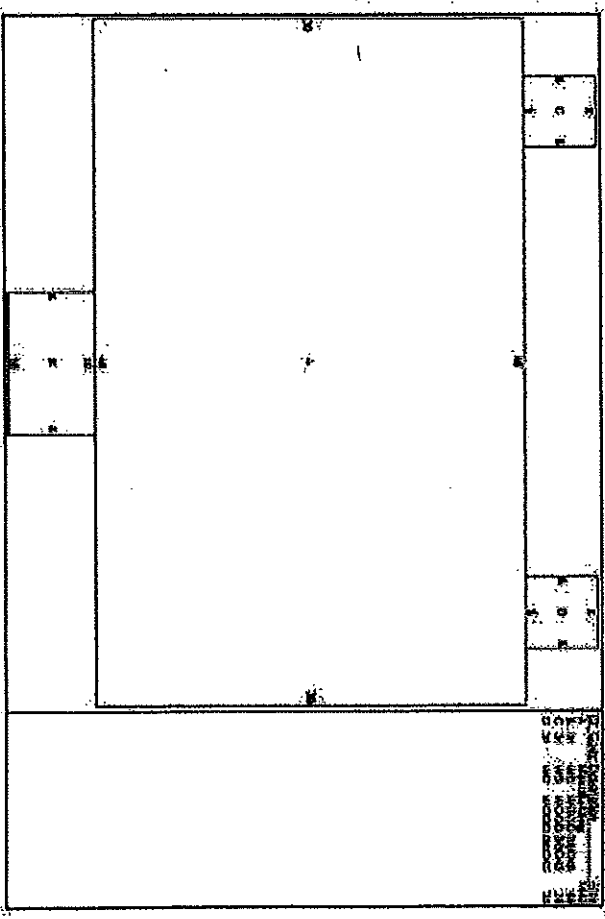
Living Units: 2  
Neighborhood: 109  
Alternate:  
Zoning: RC  
Class: RESIDENTIAL

### Photo



Open enlarged photo

### Diagram



Click to view enlarged version

Dad - Jose Candelaria

Auth (Verified)

### Emergency Department Discharge Summary

Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199  
(413) 794-0000

**Name:** Yaelis Candelaria

**DOB:** 11/22/2011

**Visit:** 3/24/2025 13:25:00

**Current Date:** 03/24/2025 14:03

**MRN:** 1985063

**Account:** 865899984

**Address:** 42 SANDERSON STREET  
SPRINGFIELD MA 01107

**Phone:**

## Discharge Instructions

We would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your injury/illness. Our entire staff strives to provide an excellent experience for our patients and their families. PLEASE REMEMBER you have been evaluated and treated today on an Emergency Care basis, PLEASE ENSURE YOU FOLLOW-UP PER THE INSTRUCTIONS BELOW!

YOUR OPINION IS IMPORTANT TO US! Please complete the survey you may receive by mail or email. Your feedback will be used to make improvements to the healthcare experiences of our patients and their families. Surveys are administered by Press Ganey Associates, Inc.

If further treatment with your primary care physician or another doctor is recommended, it is important for you to keep the appointment. Call your primary care physician or return to the Emergency Department immediately if your condition worsens, fails to improve, or new symptoms develop. If you need to find a doctor, you can call Baystate Health Link for a referral at 413-794-2255.

You have a right to receive a written discharge plan and meet with Emergency Department physicians and nurse/discharge planner if you disagree with the written discharge plan. If you have any questions regarding these instructions after you leave, please call us and we will be happy to assist you (413) 794-3066.

X-ray readings are preliminary. A radiology specialist will review your films. If you need copies of your x-rays, please call the Film Library.

- Baystate Franklin Medical Center - (413) 773-2234
- Baystate Medical Center - (413) 794-4625
- Baystate Noble Hospital - (413) 794-2460
- Baystate Wing Hospital - (413) 283-7651

Baystate Health, in keeping with MA DPH guidance, no longer requires face masks for staff, patients or visitors in most situations. Similiar to time spent indoors at other locations, there is the chance that you were exposed to respiratory viruses during your time with us (such as flu or COVID-19). If you develop symptoms concerning for a viral respiratory infection, please seek testing (and treatment if indicated) from your medical provider or home test kit.

You can view and manage your care through the patient portal or by using a health care app of your choosing. MyBaystateHealth is a website that allows you to securely view your medical information including your hospital discharge summary, office visit summaries, medications and follow-up visits. You can also request appointments, renew

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

medications, and request access to your medical information using a health care app of your choosing, or just ask a question. You can enroll at <https://my.baystatehealth.org> or register during your next office visit.



Smoking can increase your chances of developing chronic health problems and can cause harmful effects to other family members in your house. If you smoke, you are strongly encouraged to quit. Please call Baystate Health Link at 413-794-2255 or 1-800-377-HEALTH (4325) or log in to [www.baystatehealth.org](http://www.baystatehealth.org) for referrals to smoking cessation programs.

The National Suicide Prevention Hotline is available 24/7 if you or someone you know needs to find a reason to keep living. By calling 1-800-273-talk (8255) you'll be connected to a skilled, trained counselor at a crisis center in your area.

### Emergency Department Provider

Goodman MD, Ian S

## What to Do Next

You were treated today on an emergency basis; it may be wise to contact your primary care provider to notify them of your visit today. You may have been referred to your regular doctor or a specialist, please follow up as instructed. If your condition worsens or you can't get in to see the doctor, contact the Emergency Department.

### Instructions from Your ED Provider

REturn in 7 days for the final rabies vaccine in the series

## Medications

If you received medications in the Emergency Department, below is the list of those medications. It is important that you review your medications with your primary care provider and that you carry an updated list of your medications with you at all times in case of an emergency.

#### Medications Given During Visit

No medications given during this visit.

#### Prescriptions Given

No new prescriptions during this visit.

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# Education Materials

Below is the list of Educational Leaflet Provided with your Discharge Instructions.  
WebMD Ignite Patient Education - Rabies Vaccine

# Allergies

NKA

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# Valuables and Belongings

I fully understand and agree that Baystate Heath accepts no responsibility for all my personal property including clothing, toilet articles, radios, jewelry, dentures, hearing aids, rings, money, or any other property that is in my possession or is brought to me after admission.

I understand certain valuables may be placed in a hospital safe for a short period of time.

I understand that the hospital is not liable for loss or damage due to accident, fire, or other natural occurrence while said property is in the safe.

I accept full responsibility for any personal property that I keep with me, and will not hold the hospital responsible in case of loss or disappearance. I acknowledge that i have been encouraged to send valuables and belongings home.

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# Additional Information

**Call 911 if the patient has:**

- A very pale, gray or blue skin color
- Trouble waking up
- Continuous vomiting
- Difficulty breathing

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)



**Baystate  
Health**

ADVANCING CARE.  
ENHANCING LIVES.

9667-02

## Rabies Vaccine

**Brand Name(s):** Imovax®, RabAvert®

### What is rabies?

Rabies is a serious disease. It is caused by a virus. Rabies is mainly a disease of animals. Humans get rabies when they are bitten by infected animals.

At first there might not be any symptoms. But weeks, or even years after a bite, rabies can cause pain, fatigue, headaches, fever, and irritability. These are followed by seizures, hallucinations, and paralysis. Rabies is almost always fatal.

Wild animals, especially bats, are the most common source of human rabies infection in the United States. Skunks, raccoons, dogs, and cats can also transmit the disease.

Human rabies is rare in the United States. There have been only 55 cases diagnosed since 1990. However, between 16,000 and 39,000 people are treated each year for possible exposure to rabies after animal bites. Also, rabies is far more common in other parts of the world, with about 40,000 to 70,000 rabies-related deaths each year. Bites from unvaccinated dogs cause most of these cases. Rabies vaccine can prevent rabies.

### Rabies vaccine

Rabies vaccine is given to people at high risk of rabies to protect them if they are exposed. It can also prevent the disease if it is given to a person after they have been exposed.

Rabies vaccine is made from killed rabies virus. It cannot cause rabies.

### Who should get rabies vaccine and when?

#### Preventive Vaccination (No Exposure):

- People at high risk of exposure to rabies, such as veterinarians, animal handlers, rabies laboratory workers, spelunkers, and rabies biologics production workers should be offered rabies vaccine.
- The vaccine should also be considered for: (1) people whose activities bring them into frequent contact with rabies virus or with possibly rabid animals, and (2) international travelers who are likely to come in contact with animals in parts of the world where rabies is common.
- The pre-exposure schedule for rabies vaccination is 3 doses, given at the following times: (1) Dose 1: As appropriate, (2) Dose 2: 7 days after Dose 1, and (3) Dose 3: 21 days or 28 day after Dose 1.

- For laboratory workers and others who may be repeatedly exposed to rabies virus, periodic testing for immunity is recommended, and booster doses should be given as needed. (Testing or booster doses are not recommended for travelers.) Ask your doctor for details.

#### Vaccination After an Exposure:

- Anyone who has been bitten by an animal, or who otherwise may have been exposed to rabies, should see a doctor immediately. The doctor will determine if they need to be vaccinated.
- A person who is exposed and has never been vaccinated against rabies should get 4 doses of rabies vaccine--one dose right away, and additional doses on the 3rd, 7th, and 14th days. They should also get another shot called Rabies Immune Globulin at the same time as the first dose.
- A person who has been previously vaccinated should get 2 doses of rabies vaccine--one right away and another on the 3rd day. Rabies Immune Globulin is not needed.

#### Tell your doctor if ...

Talk with a doctor before getting rabies vaccine if you:

- ever had a serious (life-threatening) allergic reaction to a previous dose of rabies vaccine, or to any component of the vaccine; tell your doctor if you have any severe allergies.
- have a weakened immune system because of: HIV/AIDS or another disease that affects the immune system; treatment with drugs that affect the immune system, such as steroids; cancer, or cancer treatment with radiation or drugs.

If you have a minor illness, such as a cold, you can be vaccinated. If you are moderately or severely ill, you should probably wait until you recover before getting a routine (nonexposure) dose of rabies vaccine. If you have been exposed to rabies virus, you should get the vaccine regardless of any other illnesses you may have.

#### What are the risks from rabies vaccine?

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions. The risk of a vaccine causing serious harm, or death, is extremely small. Serious problems from rabies vaccine are very rare.

#### Mild Problems:

- soreness, redness, swelling, or itching where the shot was given (30% to 74%)
- headache, nausea, abdominal pain, muscle aches, dizziness (5% to 40%)

#### Moderate Problems:

- hives, pain in the joints, fever (about 6% of booster doses)

Other nervous system disorders, such as Guillain-Barré Syndrome (GBS), have been reported after rabies vaccine, but this happens so rarely that it is not known whether they are related to the vaccine.

NOTE: Several brands of rabies vaccine are available in the United States, and reactions may vary between brands. Your provider can give you more information about a particular brand.

### What if there is a moderate or severe reaction?

What should I look for?

- Any unusual condition, such as severe allergic reaction or a high fever. If a severe allergic reaction occurred, it would be within a few minutes to an hour after the shot. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, swelling of the throat, hives, paleness, weakness, a fast heart beat, or dizziness.

What should I do?

- Call a doctor, or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at <http://vaers.hhs.gov/index>, or by calling 1-800-822-7967. VAERS does not provide medical advice.

### How can I learn more?

- Ask your doctor or other health care provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC): call 1-800-232-4636 (1-800-CDC-INFO) or visit the CDC's rabies website at <http://www.cdc.gov/rabies/>

Rabies Vaccine Information Statement. U.S. Department of Health and Human Services/Centers for Disease Control and Prevention. 10/6/2009

This report on medications is for your information only, and is not considered individual patient advice. Because of the changing nature of drug information, please consult your physician or pharmacist about specific clinical use.

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)



# Emergency Department Discharge Summary

Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199  
(413) 794-0000

**Name:** Yaelis Canelaria  
**Visit:** 3/31/2025 18:23:00  
**MRN:** 1985063  
**Address:** 42 Sanderson Street  
Springfield MA 01107

**DOB:** 11/22/2011  
**Current Date:** 03/31/2025 19:21  
**Account:** 865950993  
**Phone:**

## Discharge Instructions

We would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your injury/illness. Our entire staff strives to provide an excellent experience for our patients and their families. PLEASE REMEMBER you have been evaluated and treated today on an Emergency Care basis, PLEASE ENSURE YOU FOLLOW-UP PER THE INSTRUCTIONS BELOW!

**YOUR OPINION IS IMPORTANT TO US!** Please complete the survey you may receive by mail or email. Your feedback will be used to make improvements to the healthcare experiences of our patients and their families. Surveys are administered by Press Ganey Associates, Inc.

If further treatment with your primary care physician or another doctor is recommended, it is important for you to keep the appointment. Call your primary care physician or return to the Emergency Department immediately if your condition worsens, fails to improve, or new symptoms develop. If you need to find a doctor, you can call Baystate Health Link for a referral at 413-794-2255.

You have a right to receive a written discharge plan and meet with Emergency Department physicians and nurse/discharge planner if you disagree with the written discharge plan. If you have any questions regarding these instructions after you leave, please call us and we will be happy to assist you (413) 794-3066.

X-ray readings are preliminary. A radiology specialist will review your films. If you need copies of your x-rays, please call the Film Library.

- Baystate Franklin Medical Center - (413) 773-2234
- Baystate Medical Center - (413) 794-4625
- Baystate Noble Hospital - (413) 794-2460
- Baystate Wing Hospital - (413) 283-7651

Baystate Health, in keeping with MA DPH guidance, no longer requires face masks for staff, patients or visitors in most situations. Similar to time spent indoors at other locations, there is the chance that you were exposed to respiratory viruses during your time with us (such as flu or COVID-19). If you develop symptoms concerning for a viral respiratory infection, please seek testing (and treatment if indicated) from your medical provider or home test kit.

You can view and manage your care through the patient portal or by using a health care app of your choosing. MyBaystateHealth is a website that allows you to securely view your medical information including your hospital discharge summary, office visit summaries, medications and follow-up visits. You can also request appointments, renew

CANDELARIA, Yaelis

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

medications, and request access to your medical information using a health care app of your choosing, or just ask a question. You can enroll at <https://my.baystatehealth.org> or register during your next office visit.



Smoking can increase your chances of developing chronic health problems and can cause harmful effects to other family members in your house. If you smoke, you are strongly encouraged to quit. Please call Baystate Health Link at 413-794-2255 or 1-800-377-HEALTH (4325) or log in to [www.baystatehealth.org](http://www.baystatehealth.org) for referrals to smoking cessation programs.

The National Suicide Prevention Hotline is available 24/7 if you or someone you know needs to find a reason to keep living. By calling 1-800-273-talk (8255) you'll be connected to a skilled, trained counselor at a crisis center in your area.

### Emergency Department Provider Fisher DO, Geoffrey W

## What to Do Next

You were treated today on an emergency basis; it may be wise to contact your primary care provider to notify them of your visit today. You may have been referred to your regular doctor or a specialist, please follow up as instructed. If your condition worsens or you can't get in to see the doctor, contact the Emergency Department.

### Instructions from Your ED Provider

Your child was seen here at Baystate Medical Center for the fourth rabies vaccine. Your child tolerated the vaccine without difficulty was monitored here in the emergency department afterwards for any reactions, your child had no adverse reactions to the vaccine and was subsequently discharged. Please return to the emergency department if child begins having any rash itching nausea vomiting or difficulty breathing as this could represent a delayed reaction to the vaccine

### You Need to Schedule the Following Appointments

Follow Up with Olivieri MD,  
Blanca

Where: 140 High St Baystate General Pediatrics  
Springfield, MA 01107-  
(413) 794-5673

## Medications

If you received medications in the Emergency Department, below is the list of those medications. It is important that you review your medications with your primary care provider and that you carry an updated list of your medications with you at all times in case of an emergency.

CANDELARIA, YAELIS

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

### Medications Given During Visit

Medication  
rabies vaccine, human  
diploid cell

Dose  
2.50 International\_Units

Route  
Intramuscular

Last Dose Times  
31-MAR-2025 18:59:00.00

### Prescriptions Given

No new prescriptions during this visit.

## Education Materials

Below is the list of Educational Leaflet Provided with your Discharge Instructions.

## Allergies

NKA

# Valuables and Belongings

I fully understand and agree that Baystate Heath accepts no responsibility for all my personal property including clothing, toilet articles, radios, jewelry, dentures, hearing aids, rings, money, or any other property that is in my possession or is brought to me after admission.

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CANDELARIA, Yaelis

Page 4 of 6

3/31/2025 19:21 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# Additional Information

**Call 911 if the patient has:**

- A very pale, gray or blue skin color
- Trouble waking up
- Continuous vomiting
- Difficulty breathing

CANDELARIA, Yaelis

Page 5 of 6

3/31/2025 19:21 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# Emergency Department Discharge Summary

Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199  
(413) 794-0000

**Name:** Yaelis Candelaria  
**Visit:** 3/17/2025 08:00:00  
**MRN:** 1985063  
**Address:** 42 Sanderson Street  
Springfield MA 01107

**DOB:** 11/22/2011  
**Current Date:** 03/17/2025 11:40  
**Account:** 865848759  
**Phone:**

## Discharge Instructions

We would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your injury/illness. Our entire staff strives to provide an excellent experience for our patients and their families. PLEASE REMEMBER you have been evaluated and treated today on an Emergency Care basis, PLEASE ENSURE YOU FOLLOW-UP PER THE INSTRUCTIONS BELOW!

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### Emergency Department Provider

Weitzen MD, Samuel

## What to Do Next

You were treated today on an emergency basis; it may be wise to contact your primary care provider to notify them of your visit today. You may have been referred to your regular doctor or a specialist, please follow up as instructed. If your condition worsens or you can't get in to see the doctor, contact the Emergency Department.

### Instructions from Your ED Provider

**DIAGNOSIS:** Dog Bite

**Your specific PATIENT CARE INSTRUCTIONS (what to do / when to return):**

Yaelis was seen in the ED today due to a dog bite. The wound appears clean noninfected at this time. Because we are unable to monitor the dog, Yaelis needs to get rabies preventative medications. We gave her her first dose of the rabies vaccine and we also gave her a dose of the tetanus vaccine. She will need to come back to the emergency room on March 20, 24th, and 31st for rabies vaccines. As we discussed, the wound will be sore because of the abrasions on the skin as well as the soft tissue bruising beneath the skin. Bruising is normal. Please return to the emergency room if you notice any discharge from the wound, increased redness or swelling, or any new or concerning symptoms. We placed one stitch in the bite wound. We will remove the stitch in 7 days

Please follow-up with the pediatrician in the next few days.

**MEDICATIONS (what medications you should start (or stop) taking):**

Augmentin 875mg twice daily for 5 days  
May take Tylenol or Motrin for pain

### You Need to Schedule the Following Appointments

CANDELARIA, Yaelis

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Follow Up with** Olivieri MD,  
 Bianca  
**When:** Within 3-5 day: call to  
 discuss follow up visit

**Where:** 140 High St Baystate General Pediatrics  
 Springfield, MA 01107-  
 (413) 794-5673

# Medications

If you received medications in the Emergency Department, below is the list of those medications. It is important that you review your medications with your primary care provider and that you carry an updated list of your medications with you at all times in case of an emergency.

## Medications Given During Visit

Medication	Dose	Route	Last Dose Times
Acetaminophen	650.00 mg	By Mouth	17-MAR-2025 08:06:00.00
Amoxicillin-Clavulanate	1.00 tablet	By Mouth	17-MAR-2025 10:31:00.00
Ibuprofen	400.00 mg	By Mouth	17-MAR-2025 08:06:00.00
Rabies Immune Globulin, Human	1050.00 units	Intramuscular	17-MAR-2025 10:30:00.00
tetanus/diphtheria/pertussis, acel(Tdap)	0.50 mL	Intramuscular	17-MAR-2025 10:30:00.00
rabies vaccine, human diploid cell	2.50 International_Units	Intramuscular	17-MAR-2025 10:30:00.00
Lido/Epi/Tetra Top Sol	1.00 application	Topically	17-MAR-2025 10:31:00.00

## Prescriptions Given

**Prescription**

Amoxicillin-Clavulanate (Augmentin 875 mg-125 mg oral tablet)

**Display**

1 tablet, By Mouth, Every 12 hours, # 9 tablet, 0 Refills, Tal first dose 3/17 before bedtime, CVS/pharmacy #4471, 600 State St Springfield, MA 01109 4137360351

Next Dose: tonight

# Education Materials

Below is the list of Educational Leaflet Provided with your Discharge Instructions.  
 WebMD Ignite Patient Education - Dog Bite

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

NKA

CANDELARIA, Yaelis

Page 4 of 11

3/17/2025 11:40 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

# Valuables and Belongings

I fully understand and agree that Baystate Heath accepts no responsibility for all my personal property including clothing, toilet articles, radios, jewelry, dentures, hearing aids, rings, money, or any other property that is in my possession or is brought to me after admission.

I understand certain valuables may be placed in a hospital safe for a short period of time.

I understand that the hospital is not liable for loss or damage due to accident, fire, or other natural occurrence while said property is in the safe.

I accept full responsibility for any personal property that I keep with me, and will not hold the hospital responsible in case of loss or disappearance. I acknowledge that i have been encouraged to send valuables and belongings home.

CANDELARIA, Yaelis

**Call 911 if the patient has:**

- A very pale, gray or blue skin color
- Trouble waking up
- Continuous vomiting
- Difficulty breathing

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

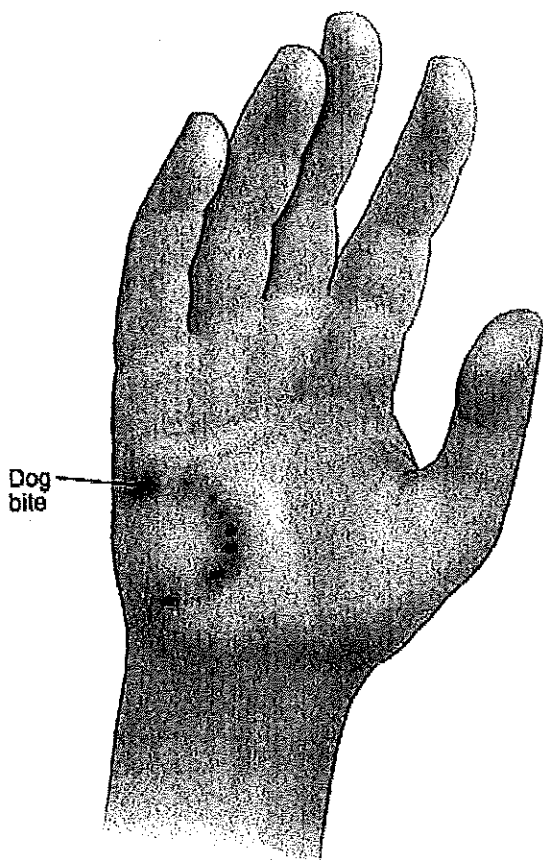
CANDELARIA, Yaelis

Page 6 of 11 3/17/2025 11:40 EDT



## Dog Bite

A dog bite can cause a wound deep enough to break the skin. In these cases, the wound is cleaned and sometimes closed with stitches. Wounds will be closed if they're gaping open or in an area where scarring is a concern, such as the face. If the wound is closed, it usually isn't completely closed. This is so that fluid can drain if the wound gets infected. Often, wounds will be left open to heal. A tetanus shot may be given.



### Home care

- Wash your hands well with soap and warm water before and after caring for the wound. This helps lower the risk of infection.
- Care for the wound as directed by your provider. If a dressing was applied to the wound, be sure to change it as directed.
- If the wound bleeds, place a clean, soft cloth on the wound. Then, apply firm pressure until the bleeding stops. This may take up to 5 minutes. Don't release the pressure and look at the wound during this time.

CANDELARIA, Yaelis

Page 8 of 11

3/17/2025 11:40 EDT

- Check the wound daily for signs of infection (see below).  
But an infection can occur even with correct treatment.
- If you're given antibiotics, take them as directed. These medicines help prevent or treat infection. Be sure to take all of the medicine.

## Rabies prevention

Rabies is a virus that can be carried in certain animals. These can include dogs and cats. Pets vaccinated against rabies are at very low risk of infection. But because human rabies is almost always fatal, any biting pet should be confined for 10 days as an extra precaution. In general, if there's a risk for rabies, you may need to take the following steps:

- If someone's dog has bitten you, it should be kept in a secure area for the next 10 days to watch for signs of illness. (If the pet owner won't allow this, contact your local animal control center.) Ask to see the pet's vaccination records. If the dog stays healthy for the next 10 days, there's no danger of rabies in the animal or you. If the dog becomes ill or dies during that time, contact your local animal control center at once so the animal can be tested for rabies.
- If a stray dog bites you, contact your local animal control center.
- If in the next 2 days you can't find the animal that bit you, and if rabies exists in your area, you may need the rabies vaccine series. Call your health care provider, or go to the emergency room right away.
- All animal bites should be reported to the local animal control center. If you weren't given a form to fill out when you got care for the bite, you can report it yourself.

## Follow-up care

Follow up with your health care provider, or as advised.

## When to get medical advice

Call your provider or get medical care right away if:

- You have signs of infection such as:
  - Spreading redness or warmth from the wound.
  - Increased pain or swelling.
  - Fever of 100.4°F (38°C) or higher, or as directed by your provider.
  - Colored fluid or pus draining from the wound.
- You have signs of rabies infection. But don't wait for any of the symptoms below to start. If you suspect that the dog that bit you is rabid or if the dog is lost and can't be found, you should get the vaccine series. Symptoms of rabies include:
  - Headache.
  - Confusion.
  - Strange behavior.
  - Increased salivating and drooling.
  - Seizure.
  - Hallucination, anxiety, or agitation.

o Fever.

- You have trouble moving any body part near the wound.
- You have bleeding that can't be stopped after 5 minutes of firm pressure.

Last Reviewed Date: 10/1/2024

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Baystate Medical Center

759 Chestnut Street  
Springfield, MA 01199-

**Account Number:** 865899984  
**Attending Physician:** Goodman MD,Ian S  
**Patient Location:** ESP  
**Date of Birth and Sex:** 11/22/2011 Female  
**Admit Date and Time:** 3/24/2025 13:25 EDT  
**Discharge Date:** 3/24/2025 14:18 EDT  
**Patient Type:** Disch ES  
**Print Date and Time:** 3/31/2025 13:40 EDT  
**Request ID:** 266560665

**Emergency Medicine Notes**

**Document Type:** Emergency Medicine Note  
**Event Date:** 3/24/2025 13:46 EDT  
**Result Status:** Auth (Verified)  
**Signed By:** Goodman MD,Ian S (3/24/2025 13:49 EDT)

**rabies #3**

**Patient:** CANDELARIA, Yaelis **MRN:** 1985063 **FIN:** 865899984  
**Age:** 13 years **Sex:** Female **DOB:** 11/22/2011  
**Associated Diagnoses:** Rabies, need for prophylactic vaccination against  
**Author:** Goodman MD, Ian S

**Basic Information**

**History source:** Patient, mother.

**History of Present Illness**

The degree at onset was minimal. The degree at present is none. dog bite exposure. Here for Rabies Vac #3. tolerated vac #1, #2 and immune globulin without complication. no current complaints.

**Review of Systems**

- Constitutional symptoms:** No fever, no chills, no sweats.
- Skin symptoms:** No rash,
- Eye symptoms:** No recent vision problems, no pain, no discharge.
- ENMT symptoms:** No ear pain, no sore throat.
- Respiratory symptoms:** No shortness of breath, no cough.
- Cardiovascular symptoms:** No chest pain, no palpitations.
- Gastrointestinal symptoms:** No abdominal pain, no nausea, no vomiting.
- Musculoskeletal symptoms:** No back pain,
- Neurologic symptoms:** No headache, no dizziness.
- Allergy/immunologic symptoms:** No seasonal allergies,
- Additional review of systems information:** All other systems reviewed and otherwise negative.

**Physical Examination**

**General:** Appropriate for age, no acute distress.

**Vital Signs**

- Skin:** Warm, dry, well healing bite wound to thigh.
- Head:** Normocephalic.
- Neck:** Supple.
- Eye:** Pupils are equal, round and reactive to light, extraocular movements are intact.
- Ears, nose, mouth and throat:** Oral mucosa moist.

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

**Cardiovascular:** Normal peripheral perfusion.

**Respiratory:** Respirations are non-labored.

**Musculoskeletal:** Normal ROM, normal strength.

**Chest wall**

**Gastrointestinal:** Non distended.

**Neurological:** No focal neurological deficit observed, normal motor observed.

**Psychiatric**

**Impression and Plan**

**Diagnosis**

Rabies, need for prophylactic vaccination against

**Plan**

**Patient was given the following educational materials:** Pt. education, Pt. education, Pt. education, Pt. education,

**Prescription Given this visit:**No new prescriptions during this visit.

**Patient Instructions Given:**REturn in 7 days for the final rabies vaccine in the series

**Education Given:**WebMD Ignite Patient Education - Rabies Vaccine

**Patient Follow-up:**

**Follow up with:** Launch Follow-up, Launch Follow-up, Launch Follow-up, Launch Follow-up.

**Notes:**

rabies vac #3 administered.

f/u for #4 on day 14.

---

*Emergency Medicine Notes*

Document Type:  
Event Date:  
Result Status:  
Signed By:

Emergency Dept Discharge Instructions  
3/24/2025 14:03 EDT  
Auth (Verified)  
King RN,Danielle (3/24/2025 14:03 EDT)

**Emergency Department Discharge Summary**  
Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199  
(413) 794-0000

**Name:** Yaelis Candelaria  
**Visit:** 3/24/2025 13:25:00  
**MRN:** 1985063  
**Address:** 42 Sanderson Street  
Springfield MA 01107

**DOB:** 11/22/2011  
**Current Date:** 03/24/2025 14:03  
**Account:** 865899984  
**Phone:**

**Discharge Instructions**

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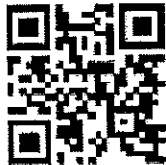
Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

Baystate Wing Hospital - (413) 283-7651

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**Emergency Department Provider**

Goodman MD, Ian S

**What to Do Next**

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**Instructions from Your ED Provider**

REturn in 7 days for the final rabies vaccine in the series

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

# Medications

If you received medications in the Emergency Department, below is the list of those medications. It is important that you review your medications with your primary care provider and that you carry an updated list of your medications with you at all times in case of an emergency.

## Medications Given During Visit

No medications given during this visit.

## Prescriptions Given

No new prescriptions during this visit.

# Education Materials

Below is the list of Educational Leaflet Provided with your Discharge Instructions.  
WebMD Ignite Patient Education - Rabies Vaccine

# Allergies

NKA

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

## Additional Information

**Call 911 if the patient has:**

- A very pale, gray or blue skin color
- Trouble waking up
- Continuous vomiting
- Difficulty breathing

*Emergency Medicine Notes*

**EMERGENCY DEPARTMENT DISCHARGE INSTRUCTIONS SIGNATURE PAGE**

**CANDELARIA, Yaelis**

**MRN: 1985063**

**FIN: 865899984**

**Location: Baystate Medical Center**

**Registration Date and Time: 03/24/2025 13:25 EDT**

**Primary Care Physician:**

**Olivieri MD, Bianca, (413) 794-5673**

**Attending Physician:**

**Not on Staff, Attending MD**

I CANDELARIA, Yaelis, have received the above patient education materials/instructions and have verbalized understanding. If ambulance or transport services are being used I further acknowledge being given a choice of service.

If you need to contact me, please call me at this number: \_\_\_\_\_.

**Patient/Representative Name:** \_\_\_\_\_

**Patient/Representative Signature:** \_\_\_\_\_

**Relationship to Patient:** \_\_\_\_\_

**Witness Name/Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Forms - Text  
Event Date: 3/24/2025 13:26 EDT  
Result Status: Auth (Verified)  
Signed By: King RN, Danielle (3/24/2025 13:26 EDT)

ED Triage Form Entered On: 3/24/2025 13:27 EDT  
Performed On: 3/24/2025 13:26 EDT by King RN, Danielle

**Triage BMC**

Stated Complaint : rabies vaccine, suture removal  
Travel Outside United States of America : No  
Is there a possible source of infection? : No  
Arrived by Ambulance : No  
Communication Barriers : Non-English Speaking  
Language Spoken v001 : Spanish  
Interpreter Needed : Yes

King RN, Danielle - 3/24/2025 13:26 EDT

DCP GENERIC CODE

ED Tracking Acuity : 4  
Tracking Group : BMC ED HOF Tracking Group

King RN, Danielle - 3/24/2025 13:26 EDT

ABC Stable : Yes  
Eye opening response pedi : Opens spontaneously  
Motor response pedi : Obeys commands  
Verbal response pedi : Oriented  
Pediatric Coma Score : 15

King RN, Danielle - 3/24/2025 13:26 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type:  
Event Date:  
Result Status:  
Signed By:

ED Forms - Text  
3/24/2025 13:34 EDT  
Auth (Verified)  
King RN, Danielle (3/24/2025 13:34 EDT)

ED Suture Removal Form Entered On: 3/24/2025 13:35 EDT  
Performed On: 3/24/2025 13:34 EDT by King RN, Danielle

**ED Suture Removal**

Number of Sutures/Staples Removed : 1 suture

Wound Appearance : Appears to be healing normally

Suture/Staple Removal Comments : 1 suture easily removed from L leg/knee area

King RN, Danielle - 3/24/2025 13:34 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

Document Type: ED Forms - Text  
Event Date: 3/24/2025 13:37 EDT  
Result Status: Auth (Verified)  
Signed By: Harris ,Natalisha (3/24/2025 13:37 EDT)

ED Vital Signs Entered On: 3/24/2025 13:39 EDT  
Performed On: 3/24/2025 13:37 EDT by Harris , Natalisha

**ED Vital Signs - BHS**

Temperature : 98.0 DegF(Converted to: 36.7 DegC)  
Temperature Route : Oral  
Pulse Rate : 74 bpm  
Respiratory Rate : 18 br/min  
Oxygen Saturation : 100 %  
Mode of Delivery (Oxygen) : Room air  
Systolic Blood Pressure : 130 mm Hg (H)  
Diastolic Blood Pressure : 68 mm Hg  
Mean Arterial Pressure : 89 mm Hg  
Blood pressure sites : Arm, left  
Pulse Pressure : 62 mm Hg  
Weight : 52.8 kg(Converted to: 116 pounds 6 oz)  
Weight Obtained Via : Standing scale  
Dry Weight : 52.8 kg(Converted to: 116 pounds 6 oz)  
Dry Weight Obtained Via : Standing scale

Harris , Natalisha - 3/24/2025 13:37 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type:	ED Forms - Text
Event Date:	3/24/2025 14:06 EDT
Result Status:	Auth (Verified)
Signed By:	King RN, Danielle (3/24/2025 14:06 EDT)

Nursing Discharge Note Emergency Department Entered On: 3/24/2025 14:07 EDT  
Performed On: 3/24/2025 14:06 EDT by King RN, Danielle

**Nursing Discharge Note Emergency Department**

Discharge Time : 3/24/2025 14:06 EDT  
Discharge Level of Care at Discharge : Home/Group Home/Foster Care  
Interpreter Utilized : No  
AMA Form Signed : No  
Patient Left Unit Via : Ambulatory  
Pt Accompanied Off Unit with : Parent  
DC Instruct Provided & Signed by pt : No  
PT understands DC Instructions : Other: d/c instructions signed by mother  
Teachback : Able to teach back  
Discharged With Belongings : Yes  
Final Vital Signs Within One Hour of Discharge : Yes  
Final Pain Assessment Within 30 Minutes of Discharge : Yes, documented  
Additional Discharge Notes : d/c instructions reviewed with mother, she verbalizes understanding of plan and agrees to f/u in 1 week for final rabbies vaccine or sooner for reasons discussed. pt well-appearing at time of d/c.  
King RN, Danielle - 3/24/2025 14:06 EDT

---

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

Document Type: ED Assessment Form - BHS - Text  
Event Date: 3/24/2025 13:28 EDT  
Result Status: Auth (Verified)  
Signed By: King RN, Danielle (3/24/2025 13:28 EDT)

ED Assessment Form Entered On: 3/24/2025 13:29 EDT  
Performed On: 3/24/2025 13:28 EDT by King RN, Danielle

**EMS / Triage Information**

Patient Identifying Information : Name: CANDELARIA, YAELIS  
DOB: 11/22/11

Current Encounter Data : Stated Complaint: rabies vaccine, suture removal (03/24/25 13:26)  
ABC Stable: Yes (03/24/25 13:26)  
Communication Barriers: Non-English Speaking (03/24/25 13:26)  
Language Spoken Spanish (03/24/25 13:26)

King RN, Danielle - 3/24/2025 13:28 EDT

**ED Vital Signs/Pain/Falls**

Pain Assessment : Assessment  
High Fall Risk (ED) : Qualifies for Pedi Fall Risk  
Eye opening response pedi : Opens spontaneously  
Motor response pedi : Obeys commands  
Verbal response pedi : Oriented  
Pediatric Coma Score : 15  
55 Yrs or Older, Lives Independently : No

King RN, Danielle - 3/24/2025 13:28 EDT

**HPI / PMH**

History of Present Illness : pt reports she is here for her 3rd rabies vaccine after dog bite and also to have a suture removed

Other Objective Findings : pt is awake, alert, well-appearing. denies complaints.  
Is there a possible source of infection? : No

PMH : None

Pregnancy Status : N/A

EGA\_EDD ST : No qualifying data available.

Gravida\_Para ST : Gravida Para Information:

Gravida: 0

Para Term: 0

Para Preterm: 0

Para Abortions: 0

Para Living: 0

Delivery Type and Date ST : Delivery Date and Type - Last Six Weeks

\*There are no qualifying results\*

HCP and Advance Directive Docs in Chart : No data found

Pt had a Kidney Transplant? : No

Arrived w/Alt. Level of Consciousness? : N/A

Current Thoughts of Harming Others : No

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Emergency Medicine Notes

King RN, Danielle - 3/24/2025 13:28 EDT

Social History

(As Of: 3/24/2025 13:29:47 EDT)

**Tobacco:**

Never smoker, Tobacco user in household: No. (Last Updated: 4/4/2016 10:16:41 EDT by Cortes RN, Valery)

**Home/Environment:**

Other: mom 2 brothers and sister (14yr) and sister's baby boy.  
Smoker in household: No. (Last Updated: 11/27/2018 16:07:35 EST by Brown PA, Meredith B)

**> / = 9 y.o. Systems Assessment**

General Physical Appearance : No apparent distress  
Respiratory effort : Unlabored  
Skin Color : Normal for ethnicity  
Skin Description I : Dry  
Skin Temperature : Warm  
Neurological Symptoms : None  
Orientated to person, place, time : Person, Place, Time, Event  
Level of Consciousness : Full Consciousness  
Affect/Behavior : Calm  
Musculoskeletal (ED) : N/A  
Immunizations up to date : Yes  
Bleeding Controlled : N/A

King RN, Danielle - 3/24/2025 13:28 EDT

**Allergies/Home Meds**

Does Pt have a Medication Infusion Pump : No  
Home Medication Review : Done  
Patient Preferred Pharmacy Addressed : Done  
Allergies Reviewed : Yes, no known allergies

King RN, Danielle - 3/24/2025 13:28 EDT

Medication List

(As Of: 3/24/2025 13:29:47 EDT)

**Prescription/Discharge Order**  
**Multivitamin with Fluoride**

: Multivitamin with Fluoride ; Status: Prescribed ; Ordered As  
Mnemonic: multivitamin with fluoride Multiple Vitamins with  
Fluoride 1 mg oral tablet, chewable ; Simple Display Line: 1  
tablet, Chew, Daily, 90 tablet, 3 Refill(s) ; Ordering Provider:  
Cassidy NP, Kathleen A; Catalog Code: Multivitamin with  
Fluoride ; Order Dt/Tm: 3/1/2022 15:35:19 EST

**Acetaminophen**

: Acetaminophen ; Status: Prescribed ; Ordered As  
Mnemonic: acetaminophen 160 mg/5 mL oral suspension ;  
Simple Display Line: 320 mg, 10 mL, By Mouth, Every 4 hours,  
not to exceed 5 doses/day, PRN: for pain, fever, 120 mL, 3  
Refill(s) ; Ordering Provider: Covington MD, Maria A; Catalog

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Code: Acetaminophen ; Order Dt/Tm: 1/7/2020 12:21:16 EST  
; Comment: Target Dose: acetaminophen 160 mg/5 mL oral  
suspension 15 mg/kg 1/7/2020 12:21:28

(As Of: 3/24/2025 13:29:47 EDT)

Allergies (Active)  
NKA

Estimated Onset Date: Unspecified ; Created By: Carbonneau  
, Jaclyn; Reaction Status: Active ; Category: Drug ;  
Substance: NKA ; Type: Allergy ; Updated By: Carbonneau ,  
Jaclyn; Reviewed Date: 3/17/2025 9:38 EDT

Initial Treatments

Initial Treatments (ED) : None at this time

King RN, Danielle - 3/24/2025 13:28 EDT

ESI / Acuity

Stated Complaint : rabies vaccine, suture removal  
ESI Level 1 : No  
ESI Level 2 : No  
ESI Level 3 : One

King RN, Danielle - 3/24/2025 13:28 EDT

DCP GENERIC CODE

ED Tracking Acuity : 4  
Tracking Group : BMC ED HOF Tracking Group

King RN, Danielle - 3/24/2025 13:28 EDT

Recommended ESI : 4

King RN, Danielle - 3/24/2025 13:28 EDT

Detailed Pain Assessment

Pain Assessment 1 - 10 Scale : 1 - 10 scale  
1 - 10 Pain Scale Score : 0

King RN, Danielle - 3/24/2025 13:28 EDT

Columbia Suicide Screening - Initial

Behav Health Condition/Able to Respond? : Primary reason for visit is NOT Behavioral Health condition

King RN, Danielle - 3/24/2025 13:28 EDT

1 - 10 Scale

1 - 10 Scale : 0 (no pain)

King RN, Danielle - 3/24/2025 13:28 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Baystate Medical Center

759 Chestnut Street  
Springfield, MA 01199-

Account Number: 865877188  
Attending Physician: Kitchen MD,Anthony  
Patient Location: ESP  
Date of Birth and Sex: 11/22/2011 Female  
Admit Date and Time: 3/20/2025 14:50 EDT  
Discharge Date: 3/20/2025 17:05 EDT  
Patient Type: Disch ES  
Print Date and Time: 3/31/2025 13:41 EDT  
Request ID: 266560666

**Emergency Medicine Notes**

Document Type: Emergency Medicine Note  
Event Date: 3/20/2025 16:39 EDT  
Result Status: Modified  
Signed By: Kitchen MD,Anthony (3/24/2025 18:16 EDT); Greenstein PA, Cheryl B (3/20/2025 16:52 EDT); Greenstein PA,Cheryl B (3/20/2025 16:52 EDT)

**General medical**

Patient: CANDELARIA, YAELIS MRN: 1985063 FIN: 865877188  
Age: 13 years Sex: Female DOB: 11/22/2011  
Associated Diagnoses: Rabies, need for prophylactic vaccination against  
Author: Greenstein PA, Cheryl B

**Basic Information**

Time seen:

\*\*\* This APP Note is considered Preliminary until an Attending attestation has been added \*\*\*  
I, Cheryl Greenstein PA, discussed the care of this patient with Dr.Kitchen.

History source: Patient.

Arrival mode: Private vehicle.

History limitation: None.

Additional information.

**History of Present Illness**

The patient presents with Here for second rabies vaccination. She was bitten by a dog and seen here 3 days ago where she was treated with rabies immunoglobulin and the first vaccination. The vaccination status of the dog is unknown though she does know where the dog lives. She had 1 suture placed in one of the bites on her leg..

**Health Status**

Allergies: No known allergies.

**Physical Examination**

**Vital Signs**

**VITAL SIGNS SECTION**

3/20/2025 15:05 EDT

Temperature 98.6 DegF  
Pulse Rate 78 bpm  
Respiratory Rate 21 br/min  
Systolic Blood Pressure 82 mm Hg  
Diastolic Blood Pressure 68 mm Hg

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

Oxygen Saturation 98 %  
Mode of Delivery (Oxygen) Room air .

**General:** Alert, no acute distress.

**Skin:** There is a healing bite. One of the wounds has 1 suture in situ there is no localized erythema swelling or tenderness. .

**Medical Decision Making**

**Rationale:** Here for rabies vaccination #2 in the setting of a dog bite to the leg. The wound looks good there is no redness swelling or drainage. There is 1 suture in situ that will be removed at the next visit.

vaccination #2 given she will return in 4 days for her third vaccination.

**Impression and Plan**

**Diagnosis**

Rabies, need for prophylactic vaccination against

**Plan**

**Condition:** Stable.

**Disposition:** Discharged: to home.

**Patient was given the following educational materials:** Prescription Given this visit: No new prescriptions during this visit.

**Patient Instructions Given:**

**DIAGNOSIS:** [Rabies vaccination #2

**TEST RESULTS:** []

**Your specific PATIENT CARE INSTRUCTIONS (what to do / when to return):**

[]  
you had your 2nd vaccination  
return in 4 days for the 3rd one and suture removal

**MEDICATIONS (what medications you should start (or stop) taking):**

[]

**Education Given:**

Patient Follow-up:	Added Follow Up	Time Frame	Comments
	Return to Emergency Department	4 Days	
<b>Follow up with:</b>	Primary Care Physician.		
<b>Counseled:</b>	Patient, Regarding diagnosis, Regarding treatment plan.		

**Addendum**

**Teaching-Supervisory Addendum-Brief**

I participated in the following activities of this patients care:

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

The PA/NP has evaluated and treated the patient. I, Dr. Kitchen, have reviewed the record and agree with the documentation as written, except as noted.

I have discussed the care of the patient with the PA/NP

I also saw and evaluated the patient.

**Brief Hx:**

**Brief PE:**

**Assessment:**

---

*Emergency Medicine Notes*

Document Type:	Emergency Dept Discharge Instructions
Event Date:	3/20/2025 16:48 EDT
Result Status:	Auth (Verified)
Signed By:	Patterson RN, Kerese (3/20/2025 16:48 EDT)

### Emergency Department Discharge Summary

Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199  
(413) 794-0000

<b>Name:</b> Yaelis Candelaria	<b>DOB:</b> 11/22/2011
<b>Visit:</b> 3/20/2025 14:50:00	<b>Current Date:</b> 03/20/2025 16:48
<b>MRN:</b> 1985063	<b>Account:</b> 865877188
<b>Address:</b> 42 SANDERSON STREET SPRINGFIELD MA 01107	<b>Phone:</b>

## Discharge Instructions

We would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your injury/illness. Our entire staff strives to provide an excellent experience for our patients and their families. PLEASE REMEMBER you have been evaluated and treated today on an Emergency Care basis, PLEASE ENSURE YOU FOLLOW-UP PER THE INSTRUCTIONS BELOW!

YOUR OPINION IS IMPORTANT TO US! Please complete the survey you may receive by mail or email. Your feedback will be used to make improvements to the healthcare experiences of our patients and their families. Surveys are administered by Press Ganey Associates, Inc.

If further treatment with your primary care physician or another doctor is recommended, it is important for you to keep the appointment. Call your primary care physician or return to the Emergency Department immediately if your condition worsens, fails to improve, or new symptoms develop. If you need to find a doctor, you can call Baystate Health Link for a referral at 413-794-2255.

You have a right to receive a written discharge plan and meet with Emergency Department physicians and nurse/discharge planner if you disagree with the written discharge plan. If you have any questions regarding these instructions after you leave, please call us and we will be happy to assist you (413) 794-3066.

X-ray readings are preliminary. A radiology specialist will review your films. If you need copies of your x-rays, please call the Film Library.

Baystate Franklin Medical Center - (413) 773-2234  
Baystate Medical Center - (413) 794-4625  
Baystate Noble Hospital - (413) 794-2460

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

Baystate Wing Hospital - (413) 283-7651

Baystate Health, in keeping with MA DPH guidance, no longer requires face masks for staff, patients or visitors in most situations. Similar to time spent indoors at other locations, there is the chance that you were exposed to respiratory viruses during your time with us (such as flu or COVID-19). If you develop symptoms concerning for a viral respiratory infection, please seek testing (and treatment if indicated) from your medical provider or home test kit.

You can view and manage your care through the patient portal or by using a health care app of your choosing. MyBaystateHealth is a website that allows you to securely view your medical information including your hospital discharge summary, office visit summaries, medications and follow-up visits. You can also request appointments, renew medications, and request access to your medical information using a health care app of your choosing, or just ask a question. You can enroll at <https://my.baystatehealth.org> or register during your next office visit.



Smoking can increase your chances of developing chronic health problems and can cause harmful effects to other family members in your house. If you smoke, you are strongly encouraged to quit. Please call Baystate Health Link at 413-794-2255 or 1-800-377-HEALTH (4325) or log in to [www.baystatehealth.org](http://www.baystatehealth.org) for referrals to smoking cessation programs.

The National Suicide Prevention Hotline is available 24/7 if you or someone you know needs to find a reason to keep living. By calling 1-800-273-talk (8255) you'll be connected to a skilled, trained counselor at a crisis center in your area.

**Emergency Department Provider**  
Greenstein PA, Cheryl B

## What to Do Next

You were treated today on an emergency basis; it may be wise to contact your primary care provider to notify them of your visit today. You may have been referred to your regular doctor or a specialist, please follow up as instructed. If your condition worsens or you can't get in to see the doctor, contact the Emergency Department.

### Instructions from Your ED Provider

**DIAGNOSIS:** [Rabies vaccination #2

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

## Emergency Medicine Notes

### TEST RESULTS: []

### Your specific PATIENT CARE INSTRUCTIONS (what to do / when to return):

[]

you had your 2nd vaccination  
return in 4 days for the 3rd one and suture removal

### MEDICATIONS (what medications you should start (or stop) taking):

[]

## You Need to Schedule the Following Appointments

**Follow Up with** Return to  
Emergency Department

**When:** In 4 days

## Medications

If you received medications in the Emergency Department, below is the list of those medications. It is important that you review your medications with your primary care provider and that you carry an updated list of your medications with you at all times in case of an emergency.

### Medications Given During Visit

No medications given during this visit.

### Prescriptions Given

No new prescriptions during this visit.

## Education Materials

Below is the list of Educational Leaflet Provided with your Discharge Instructions.

*Emergency Medicine Notes*

# Allergies

NKA

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

# Valuables and Belongings

I fully understand and agree that Baystate Heath accepts no responsibility for all my personal property including clothing, toilet articles, radios, jewelry, dentures, hearing aids, rings, money, or any other property that is in my possession or is brought to me after admission.

I understand certain valuables may be placed in a hospital safe for a short period of time.

I understand that the hospital is not liable for loss or damage due to accident, fire, or other natural occurrence while said property is in the safe.

I accept full responsibility for any personal property that I keep with me, and will not hold the hospital responsible in case of loss or disappearance. I acknowledge that i have been encouraged to send valuables and belongings home.

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

## Additional Information

**Call 911 if the patient has:**

- A very pale, gray or blue skin color
- Trouble waking up
- Continuous vomiting
- Difficulty breathing

*Emergency Medicine Notes*

**EMERGENCY DEPARTMENT DISCHARGE INSTRUCTIONS SIGNATURE PAGE**

**CANDELARIA, Yaelis**

MRN: 1985063

FIN: 865877188

Location: Baystate Medical Center

Registration Date and Time: 03/20/2025 14:50 EDT

Primary Care Physician:

Olivieri MD, Bianca, (413) 794-5673

Attending Physician:

Not on Staff, Attending MD

I CANDELARIA, Yaelis, have received the above patient education materials/instructions and have verbalized understanding. If ambulance or transport services are being used I further acknowledge being given a choice of service.

If you need to contact me, please call me at this number: \_\_\_\_\_.

Patient/Representative Name: \_\_\_\_\_

Patient/Representative Signature: \_\_\_\_\_

Relationship to Patient: \_\_\_\_\_

Witness Name/Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Forms - Text  
Event Date: 3/20/2025 14:53 EDT  
Result Status: Auth (Verified)  
Signed By: Pelczar RN, Olivia (3/20/2025 14:53 EDT)

ED Triage Form Entered On: 3/20/2025 14:54 EDT  
Performed On: 3/20/2025 14:53 EDT by Pelczar RN, Olivia

**Triage BMC**

Stated Complaint : rabies vaccine  
Travel Outside United States of America : No  
Is there a possible source of infection? : No  
Arrived by Ambulance : No  
Communication Barriers : None  
Language Spoken v001 : English

Pelczar RN, Olivia - 3/20/2025 14:53 EDT

DCP GENERIC CODE

ED Tracking Acuity : 5  
Tracking Group : BMC ED HOF Tracking Group

Pelczar RN, Olivia - 3/20/2025 14:53 EDT

ABC Stable : Yes  
Eye opening response pedi : Opens spontaneously  
Motor response pedi : Obeys commands  
Verbal response pedi : Oriented  
Pediatric Coma Score : 15

Pelczar RN, Olivia - 3/20/2025 14:53 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

Document Type: ED Forms - Text  
Event Date: 3/20/2025 15:05 EDT  
Result Status: Auth (Verified)  
Signed By: Scruse ,Kevin (3/20/2025 15:05 EDT)

ED Vital Signs Entered On: 3/20/2025 15:07 EDT  
Performed On: 3/20/2025 15:05 EDT by Scruse , Kevin

**ED Vital Signs - BHS**

Temperature : 98.6 DegF(Converted to: 37.0 DegC)  
Temperature Route : Oral  
Pulse Rate : 78 bpm  
Respiratory Rate : 21 br/min  
Oxygen Saturation : 98 %  
Mode of Delivery (Oxygen) : Room air  
Systolic Blood Pressure : 82 mm Hg  
Diastolic Blood Pressure : 68 mm Hg  
Mean Arterial Pressure : 73 mm Hg  
Blood pressure sites : Arm, right  
Pulse Pressure : 14 mm Hg  
Weight : 52.7 kg(Converted to: 116 pounds 3 oz)  
Weight Obtained Via : Standing scale  
Dry Weight : 52.7 kg(Converted to: 116 pounds 3 oz)  
Dry Weight Obtained Via : Standing scale

Scruse , Kevin - 3/20/2025 15:05 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type:	ED Forms - Text
Event Date:	3/20/2025 17:03 EDT
Result Status:	Auth (Verified)
Signed By:	Patterson RN, Kerese (3/20/2025 17:03 EDT)

ED Vital Signs Entered On: 3/20/2025 17:04 EDT  
Performed On: 3/20/2025 17:03 EDT by Patterson RN, Kerese

**ED Vital Signs - BHS**

Temperature : 98.1 DegF(Converted to: 36.7 DegC)  
Temperature Route : Oral  
Pulse Rate : 73 bpm  
Respiratory Rate : 19 br/min  
Oxygen Saturation : 99 %  
Mode of Delivery (Oxygen) : Room air  
Systolic Blood Pressure : 119 mm Hg (H)  
Diastolic Blood Pressure : 69 mm Hg  
Mean Arterial Pressure : 86 mm Hg  
Blood pressure sites : Arm, right  
Pulse Pressure : 50 mm Hg  
Weight : 52.7 kg(Converted to: 116 pounds 3 oz)  
Dry Weight : 52.7 kg(Converted to: 116 pounds 3 oz)

Patterson RN, Kerese - 3/20/2025 17:03 EDT

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Forms - Text  
Event Date: 3/20/2025 17:04 EDT  
Result Status: Auth (Verified)  
Signed By: Patterson RN, Kerese (3/20/2025 17:04 EDT)

Nursing Discharge Note Emergency Department Entered On: 3/20/2025 17:05 EDT  
Performed On: 3/20/2025 17:04 EDT by Patterson RN, Kerese

**Nursing Discharge Note Emergency Department**

Discharge Time : 3/20/2025 17:04 EDT  
Discharge Level of Care at Discharge : Home/Group Home/Foster Care  
Patient Left Unit Via : Ambulatory  
Pt Accompanied Off Unit with : Parent  
DC Instruct Provided & Signed by pt : Yes  
PT understands DC Instructions : Yes  
Teachback : Able to teach back  
Discharged With Belongings : Yes  
Final Vital Signs Within One Hour of Discharge : Yes  
Final Pain Assessment Within 30 Minutes of Discharge : Document pain assessment  
Additional Discharge Notes : pt alert and age appropriate. in no distress. parent verbalizes understanding of discharge instructions, when to f/u with pcp and signs and symptoms for when to return to ed. no complications upon discharge.  
Patterson RN, Kerese - 3/20/2025 17:04 EDT

**Detailed Pain Assessment**

Pain Assessment 1 - 10 Scale : 1 - 10 scale  
1 - 10 Pain Scale Score : 0  
Pain Assessment FACES Scale : FACES scale  
Patterson RN, Kerese - 3/20/2025 17:04 EDT

**1 - 10 Scale**

1 - 10 Scale : 0 (no pain)  
Patterson RN, Kerese - 3/20/2025 17:04 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type:  
Event Date:  
Result Status:  
Signed By:

ED Assessment Form - BHS - Text  
3/20/2025 14:57 EDT  
Auth (Verified)  
Pelczar RN,Olivia (3/20/2025 14:57 EDT)

ED Assessment Form Entered On: 3/20/2025 14:59 EDT  
Performed On: 3/20/2025 14:57 EDT by Pelczar RN, Olivia

**EMS / Triage Information**

Patient Identifying Information : Name: CANDELARIA, Yaelis  
DOB: 11/22/11  
Current Encounter Data : Stated Complaint: rabies vaccine (03/20/25 14:53)  
ABC Stable: Yes (03/20/25 14:53)  
Communication Barriers: None (03/20/25 14:53)  
Language Spoken English (03/20/25 14:53)

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**ED Vital Signs/Pain/Falls**

Pain Assessment : Assessment  
High Fall Risk (ED) : Qualifies for Pedi Fall Risk  
Eye opening response pedi : Opens spontaneously  
Motor response pedi : Obeys commands  
Verbal response pedi : Oriented  
Pediatric Coma Score : 15  
55 Yrs or Older, Lives Independently : No

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**HPI / PMH**

History of Present Illness : Pt here for 2nd rabies vaccine after dog bite. No illness s/s. Has been well since the bite.  
Other Objective Findings : Pt awake & alert. Resp even and nonlabored. Skin normal for ethnicity, p/w/d. MMM. MAE.  
Ambulating with steady gait.  
Is there a possible source of infection? : No  
PMH : None  
Pregnancy Status : Unknown  
EGA\_EDD ST : No qualifying data available.  
Gravida\_Para ST : Gravida Para Information:  
Gravida: 0  
Para Term: 0  
Para Preterm: 0  
Para Abortions: 0  
Para Living: 0  
Delivery Type and Date ST : Delivery Date and Type - Last Six Weeks  
\*There are no qualifying results\*  
Smoking cessation (v001) : Caregiver has not smoked in the last 12 months  
HCP and Advance Directive Docs in Chart : No data found  
Add Health Care Proxy Adv Directive Doc? : No  
No Advance Directive in CIS because : Patient is <18 years old

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Emergency Medicine Notes

Domestic Violence Screen : Patient denies  
Pt had a Kidney Transplant? : No  
Arrived w/Alt. Level of Consciousness? : N/A  
Current Thoughts of Harming Others : No

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

Social History

(As Of: 3/20/2025 14:59:43 EDT)

Tobacco:

Never smoker, Tobacco user in household: No. (Last Updated:  
4/4/2016 10:16:41 EDT by Cortes RN, Valery)

Home/Environment:

Other: mom 2 brothers and sister (14yr) and sister's baby boy.  
Smoker in household: No. (Last Updated: 11/27/2018 16:07:35  
EST by Brown PA, Meredith B)

**> / = 9 y.o. Systems Assessment**

General Physical Appearance : No apparent distress  
Respiratory effort : Unlabored  
Skin Color : Normal for ethnicity  
Skin Description I : Dry  
Skin Temperature : Warm  
Neurological Symptoms : None  
Orientated to person, place, time : Person, Place, Time, Event  
Level of Consciousness : Full Consciousness  
Affect/Behavior : Appropriate, Calm, Cooperative  
Musculoskeletal (ED) : No Problems  
Immunizations up to date : Yes

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**Allergies/Home Meds**

Does Pt have a Medication Infusion Pump : No  
Home Medication Review : Done  
Patient Preferred Pharmacy Addressed : Done  
Allergies Reviewed : Yes, no known allergies

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

Medication List

(As Of: 3/20/2025 14:59:43 EDT)

Prescription/Discharge Order

Acetaminophen : Acetaminophen ; Status: Prescribed ; Ordered As  
Mnemonic: acetaminophen 160 mg/5 mL oral suspension ;  
Simple Display Line: 320 mg, 10 mL, By Mouth, Every 4 hours,  
not to exceed 5 doses/day, PRN: for pain, fever, 120 mL, 3  
Refill(s) ; Ordering Provider: Covington MD, Maria A; Catalog  
Code: Acetaminophen ; Order Dt/Tm: 1/7/2020 12:21:16 EST  
; Comment: Target Dose: acetaminophen 160 mg/5 mL oral  
suspension 15 mg/kg 1/7/2020 12:21:28

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

**Amoxicillin-Clavulanate** : Amoxicillin-Clavulanate ; Status: Prescribed ; Ordered As  
Mnemonic: Augmentin 875 mg-125 mg oral tablet ; Simple  
Display Line: 1 tablet, By Mouth, Every 12 hours, for 5 days,  
Take first dose 3/17 before bedtime, 9 tablet, 0 Refill(s) ;  
Ordering Provider: Weitzen MD, Samuel; Catalog Code:  
Amoxicillin-Clavulanate ; Order Dt/Tm: 3/17/2025 11:05:14  
EDT

**Multivitamin with Fluoride** : Multivitamin with Fluoride ; Status: Prescribed ; Ordered As  
Mnemonic: multivitamin with fluoride Multiple Vitamins with  
Fluoride 1 mg oral tablet, chewable ; Simple Display Line: 1  
tablet, Chew, Daily, 90 tablet, 3 Refill(s) ; Ordering Provider:  
Cassidy NP, Kathleen A; Catalog Code: Multivitamin with  
Fluoride ; Order Dt/Tm: 3/1/2022 15:35:19 EST

(As Of: 3/20/2025 14:59:43 EDT)

**Allergies (Active)**  
NKA

Estimated Onset Date: Unspecified ; Created By: Carbonneau  
, Jaclyn; Reaction Status: Active ; Category: Drug ;  
Substance: NKA ; Type: Allergy ; Updated By: Carbonneau ,  
Jaclyn; Reviewed Date: 3/17/2025 9:38 EDT

**Initial Treatments**

Initial Treatments (ED) : None at this time

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**ESI / Acuity**

Stated Complaint : rabies vaccine

ESI Level 1 : No

ESI Level 2 : No

ESI Level 3 : One

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**DCP GENERIC CODE**

ED Tracking Acuity : 5

Tracking Group : BMC ED HOF Tracking Group

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

Recommended ESI : 4

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**Detailed Pain Assessment**

Pain Assessment 1 - 10 Scale : 1 - 10 scale

1 - 10 Pain Scale Score : 0

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

**Columbia Suicide Screening - Initial**

Behav Health Condition/Able to Respond? : Primary reason for visit is NOT Behavioral Health condition

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

1 - 10 Scale

1 - 10 Scale : 0 (no pain)

Pelczar RN, Olivia - 3/20/2025 14:57 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

Baystate Medical Center

759 Chestnut Street  
Springfield, MA 01199-

**Account Number:** 865848/59  
**Attending Physician:** Perry MD, Holly Elaine  
**Patient Location:** ESP  
**Date of Birth and Sex:** 11/22/2011 Female  
**Admit Date and Time:** 3/17/2025 08:00 EDT  
**Discharge Date:** 3/17/2025 11:51 EDT  
**Patient Type:** Disch ES  
**Print Date and Time:** 3/31/2025 13:41 EDT  
**Request ID:** 266560667

**Emergency Medicine Notes**

**Document Type:** Emergency Medicine Note  
**Event Date:** 3/17/2025 09:36 EDT  
**Result Status:** Modified  
**Signed By:** Weitzen MD, Samuel (3/29/2025 11:12 EDT); Perry MD, Holly Elaine (3/17/2025 20:28 EDT); Weitzen MD, Samuel (3/17/2025 15:40 EDT)

**Leg puncture wound**

**Patient:** CANDELARIA, Yaelis      **MRN:** 1985063      **FIN:** 865848759  
**Age:** 13 years    **Sex:** Female    **DOB:** 11/22/2011  
**Associated Diagnoses:** None  
**Author:** Weitzen MD, Samuel

**Basic Information**

**Time seen:** Date 3/17/2025.  
**History source:** Patient, mother, father.  
**Arrival mode:** Private vehicle.  
**Additional information:** Patient's physician(s): \*\*\* This Resident Note is considered Preliminary until an Attending attestation has been added \*\*\*  
I, Samuel Weitzen MD, have discussed the care of this patient with the attending physician: Dr. Perry.

**History of Present Illness**

Yaelis is a 13-year-old previously healthy girl who is presenting to the emergency room due to a dog bite. While she was walking to school this morning a pitbull ran out the door from a friend's house and bit her on the knee. She immediately came into the emergency room for evaluation. Her last DTaP dose was when she was 4 and she has never received Tdap. The rabies vaccination status of the dog is unknown. No other concerns or complaints..

**Review of Systems**

**Additional review of systems information:** All systems reviewed as documented in chart.

**Health Status**

**Allergies:**  
Allergic Reactions (Selected)  
NKA.

**Past Medical/ Family/ Social History**

**Medical history:** Negative.  
**Surgical history:** Negative.  
**Family history:** Not significant.

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

**Physical Examination**

**Vital Signs**

**VITAL SIGNS SECTION**

3/17/2025 8:02 EDT

Temperature	98.3 DegF
Temperature Route	Oral
Pulse Rate	86 bpm
Respiratory Rate	21 br/min
<b>Systolic Blood Pressure</b>	<b>129 mm Hg H</b>
<b>Diastolic Blood Pressure</b>	<b>77 mm Hg H</b>
Blood pressure sites	Arm, right
Mean Arterial Pressure	94 mm Hg
Pulse Pressure	52 mm Hg
Oxygen Saturation	100 %
Mode of Delivery (Oxygen)	Room air .

**General:** Alert, no acute distress.

**Skin:** Warm, dry, pink, 1, deep puncture wound is present on the lateral aspect of the left knee. 2 shallow or puncture wounds are present above this wound..

**Head:** Normocephalic, atraumatic.

**Eye:** Normal conjunctiva.

**Cardiovascular:** Regular rate and rhythm, No murmur, Normal peripheral perfusion.

**Respiratory:** Lungs are clear to auscultation, respirations are non-labored, breath sounds are equal.

**Neurological:** Alert and oriented to person, place, time, and situation, No focal neurological deficit observed.

**Medical Decision Making**

**Notes:** Yaelis is a 13-year-old girl with no past medical history who is coming in due to an on incited dog bite. Due to the the unknown rabies vaccination status of the animal and the inability to monitor it for rabies, we will administer rabies prophylaxis today. Will also administer Tdap vaccination because the patient's last tetanus vaccination was when they were 4. We will also irrigate the wound and administer 5 days of amoxicillin prophylaxis due to the risk of infections from animal bites..

**Reexamination/ Reevaluation**

Time: 3/17/2025 11:00:00 .

**Notes:** Remainder of rabies immunoglobulin has been administered as an IM, and patient has received Tdap and their first dose of Augmentin. Will place 1 suture to loosely approximate the deepest puncture wound on the left knee to assist with wound healing..

**Procedure**

**Procedure notes:**

Dog bite wound was cleaned with a 3% PCMX sponge and then irrigated with copious amounts of sterile normal saline. 1 mL of RIG was injected subcutaneously into the puncture wounds. Patient tolerated the procedure well. Remainder of RIG will be administered as an IM.

After first dose of Augmentin was administered, we placed a single 4-0 Prolene suture in the deepest puncture wound on the left knee. An air knot was used to tie the suture so that the wound was loosely approximated and left open to air to reduce the risk of infection. Length of laceration was approximately 1/3 of an inch.

**Impression and Plan**

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

**Emergency Medicine Notes**

**Diagnosis**

Dog bite, puncture wound

**Plan**

**Condition:** Improved.

**Disposition:** Discharged: time 3/17/2025 11:33:00.

**Notes:** Prescription Given this visit: Prescriptions

Amoxicillin-Clavulanate (Augmentin 875 mg-125 mg oral tablet)

1 tablet, By Mouth, Every 12 hours, # 9 tablet, 0 Refills, Take first dose 3/17 before bedtime, CVS/pharmacy #4471, 600 State St  
Springfield, MA 01109 4137360351

Next Dose:

**Patient Instructions Given:** DIAGNOSIS: Dog Bite

**Your specific PATIENT CARE INSTRUCTIONS (what to do / when to return):**

Yaelis was seen in the ED today due to a dog bite. The wound appears clean noninfected at this time. Because we are unable to monitor the dog, Yaelis needs to get rabies preventative medications. We gave her her first dose of the rabies vaccine and we also gave her a dose of the tetanus vaccine. She will need to come back to the emergency room on March 20, 24th, and 31st for rabies vaccines. As we discussed, the wound will be sore because of the abrasions on the skin as well as the soft tissue bruising beneath the skin. Bruising is normal. Please return to the emergency room if you notice any discharge from the wound, increased redness or swelling, or any new or concerning symptoms.

We placed one stitch in the bite wound. We will remove the stitch in 7 days

Please follow-up with the pediatrician in the next few days.

**MEDICATIONS (what medications you should start (or stop) taking):**

Augmentin 875mg twice daily for 5 days  
May take Tylenol or Motrin for pain

**Education Given:** WebMD Ignite Patient Education - Dog Bite

Patient Follow-up:	Added Follow Up	Time Frame	Comments
Olivieri MD, Bianca	3-5 day:	call to discuss follow up visit	

**Addendum**

**Teaching-Supervisory Addendum-Brief**

I participated in the following activities of this patients care:

I, <Perry > ,

was present for the entire procedure: \_\_\_\_\_

was present for the critical or key portion of the procedure:  Laceration repair \_\_\_\_\_

performed the initial fracture care for the patient in the ED, comparable to that of a specialist.

Surgery is not anticipated.

personally verified application and proper positioning of the cast or splint.

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Notes: I, Dr Holly Perry, have seen and evaluated this patient, and I have discussed the care and plan with the resident / fellow team. I agree with the findings and plan as documented with the exceptions noted below.

13-year-old female presents for evaluation of an unprovoked dog bite. Although they do know where the dog lives, the owner is not interested in cooperating with the family whatsoever.

Patient's tetanus was updated.

Rabies prophylaxis started with a dose of rabies vaccine given as well as rabies immunoglobulin with half of it being infiltrated proximal to the wound and the other half being given IM in the gluteus.

Wound was copiously irrigated and closed loosely.

Patient was given first dose of Augmentin as well as 5-day course.

Discussed with family need to return on day 3, day 7 and day 14. Family voices understanding..

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type:  
Event Date:  
Result Status:  
Signed By:

Emergency Dept Discharge Instructions  
3/17/2025 11:40 EDT  
Auth (Verified)  
Smith ,Anney (3/17/2025 11:40 EDT)

### Emergency Department Discharge Summary

Baystate Medical Center  
759 Chestnut Street  
Springfield, MA 01199  
(413) 794-0000

**Name:** YAELIS CANDELARIA

**DOB:** 11/22/2011

**Visit:** 3/17/2025 08:00:00

**Current Date:** 03/17/2025 11:40

**MRN:** 1985063

**Account:** 865848759

**Address:** 42 SANDERSON STREET  
SPRINGFIELD MA 01107

**Phone:**

## Discharge Instructions

We would like to thank you for allowing us to assist you with your healthcare needs. The following includes patient education materials and information regarding your injury/illness. Our entire staff strives to provide an excellent experience for our patients and their families. PLEASE REMEMBER you have been evaluated and treated today on an Emergency Care basis, PLEASE ENSURE YOU FOLLOW-UP PER THE INSTRUCTIONS BELOW!

YOUR OPINION IS IMPORTANT TO US! Please complete the survey you may receive by mail or email. Your feedback will be used to make improvements to the healthcare experiences of our patients and their families. Surveys are administered by Press Ganey Associates, Inc.

If further treatment with your primary care physician or another doctor is recommended, it is important for you to keep the appointment. Call your primary care physician or return to the Emergency Department immediately if your condition worsens, fails to improve, or new symptoms develop. If you need to find a doctor, you can call Baystate Health Link for a referral at 413-794-2255.

You have a right to receive a written discharge plan and meet with Emergency Department physicians and nurse/discharge planner if you disagree with the written discharge plan. If you have any questions regarding these instructions after you leave, please call us and we will be happy to assist you (413) 794-3066.

X-ray readings are preliminary. A radiology specialist will review your films. If you need copies of your x-rays, please call the Film Library.

Baystate Franklin Medical Center - (413) 773-2234  
Baystate Medical Center - (413) 794-4625  
Baystate Noble Hospital - (413) 794-2460

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Baystate Wing Hospital - (413) 283-7651

Baystate Health, in keeping with MA DPH guidance, no longer requires face masks for staff, patients or visitors in most situations. Similar to time spent indoors at other locations, there is the chance that you were exposed to respiratory viruses during your time with us (such as flu or COVID-19). If you develop symptoms concerning for a viral respiratory infection, please seek testing (and treatment if indicated) from your medical provider or home test kit.

You can view and manage your care through the patient portal or by using a health care app of your choosing. MyBaystateHealth is a website that allows you to securely view your medical information including your hospital discharge summary, office visit summaries, medications and follow-up visits. You can also request appointments, renew medications, and request access to your medical information using a health care app of your choosing, or just ask a question. You can enroll at <https://my.baystatehealth.org> or register during your next office visit.



Smoking can increase your chances of developing chronic health problems and can cause harmful effects to other family members in your house. If you smoke, you are strongly encouraged to quit. Please call Baystate Health Link at 413-794-2255 or 1-800-377-HEALTH (4325) or log in to [www.baystatehealth.org](http://www.baystatehealth.org) for referrals to smoking cessation programs.

The National Suicide Prevention Hotline is available 24/7 if you or someone you know needs to find a reason to keep living. By calling 1-800-273-talk (8255) you'll be connected to a skilled, trained counselor at a crisis center in your area.

### Emergency Department Provider

Weitzen MD, Samuel

## What to Do Next

You were treated today on an emergency basis; it may be wise to contact your primary care provider to notify them of your visit today. You may have been referred to your regular doctor or a specialist, please follow up as instructed. If your condition worsens or you can't get in to see the doctor, contact the Emergency Department.

### Instructions from Your ED Provider

**DIAGNOSIS:** Dog Bite

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

**Your specific PATIENT CARE INSTRUCTIONS (what to do / when to return):**

Yaelis was seen in the ED today due to a dog bite. The wound appears clean noninfected at this time. Because we are unable to monitor the dog, Yaelis needs to get rabies preventative medications. We gave her her first dose of the rabies vaccine and we also gave her a dose of the tetanus vaccine. She will need to come back to the emergency room on March 20, 24th, and 31st for rabies vaccines. As we discussed, the wound will be sore because of the abrasions on the skin as well as the soft tissue bruising beneath the skin. Bruising is normal. Please return to the emergency room if you notice any discharge from the wound, increased redness or swelling, or any new or concerning symptoms. We placed one stitch in the bite wound. We will remove the stitch in 7 days

Please follow-up with the pediatrician in the next few days.

**MEDICATIONS (what medications you should start (or stop) taking):**

Augmentin 875mg twice daily for 5 days  
May take Tylenol or Motrin for pain

**You Need to Schedule the Following Appointments**

**Follow Up with** Olivieri MD,  
Bianca

**When:** Within 3-5 day: call to  
discuss follow up visit

**Where:** 140 High St Baystate General Pediatrics  
Springfield, MA 01107-  
(413) 794-5673

## Medications

If you received medications in the Emergency Department, below is the list of those medications. It is important that you review your medications with your primary care provider and that you carry an updated list of your medications with you at all times in case of an emergency.

**Medications Given During Visit**

Medication	Dose	Route	Last Dose Times
Acetaminophen	650.00 mg	By Mouth	17-MAR-2025 08:06:00.00
Amoxicillin-Clavulanate	1.00 tablet	By Mouth	17-MAR-2025 10:31:00.00
Ibuprofen	400.00 mg	By Mouth	17-MAR-2025 08:06:00.00
Rabies Immune Globulin, Human	1050.00 units	Intramuscular	17-MAR-2025 10:30:00.00
tetanus/diphtheria/pertussis, acel(Tdap)	0.50 mL	Intramuscular	17-MAR-2025 10:30:00.00
rabies vaccine, human diploid cell	2.50 International_Units	Intramuscular	17-MAR-2025 10:30:00.00
Lido/Epi/Tetra Top Sol	1.00 application	Topically	17-MAR-2025 10:31:00.00

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

**Prescriptions Given**

**Prescription**

Amoxicillin-Clavulanate (Augmentin 875 mg-125 mg oral tablet)

**Display**

1 tablet, By Mouth, Every 12 hours, # 9 tablet, 0 Refills, Take first dose 3/17 before bedtime, CVS/pharmacy #4471, 600 State St Springfield, MA 01109 4137360351

Next Dose: \_\_\_\_\_

## Education Materials

Below is the list of Educational Leaflet Provided with your Discharge Instructions.  
WebMD Ignite Patient Education - Dog Bite

## Allergies

NKA

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

## Valuables and Belongings

I fully understand and agree that Baystate Heath accepts no responsibility for all my personal property including clothing, toilet articles, radios, jewelry, dentures, hearing aids, rings, money, or any other property that is in my possession or is brought to me after admission.

I understand certain valuables may be placed in a hospital safe for a short period of time.

I understand that the hospital is not liable for loss or damage due to accident, fire, or other natural occurrence while said property is in the safe.

I accept full responsibility for any personal property that I keep with me, and will not hold the hospital responsible in case of loss or disappearance. I acknowledge that i have been encouraged to send valuables and belongings home.

*Emergency Medicine Notes*

## Additional Information

**Call 911 if the patient has:**

- A very pale, gray or blue skin color
- Trouble waking up
- Continuous vomiting
- Difficulty breathing

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

**EMERGENCY DEPARTMENT DISCHARGE INSTRUCTIONS SIGNATURE PAGE**

**CANDELARIA, Yaelis**

MRN: 1985063

FIN: 865848759

Location: Baystate Medical Center

Registration Date and Time: 03/17/2025 08:00 EDT

Primary Care Physician:

Olivieri MD, Bianca, (413) 794-5673

Attending Physician:

Not on Staff, Attending MD

I CANDELARIA, Yaelis, have received the above patient education materials/instructions and have verbalized understanding. If ambulance or transport services are being used I further acknowledge being given a choice of service.

If you need to contact me, please call me at this number: \_\_\_\_\_.

Patient/Representative Name: \_\_\_\_\_

Patient/Representative Signature: \_\_\_\_\_

Relationship to Patient: \_\_\_\_\_

Witness Name/Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type:	ED Forms - Text
Event Date:	3/17/2025 08:02 EDT
Result Status:	Auth (Verified)
Signed By:	Scrusse ,Kevin (3/17/2025 08:02 EDT)

ED Vital Signs Entered On: 3/17/2025 8:04 EDT  
Performed On: 3/17/2025 8:02 EDT by Scrusse , Kevin

**ED Vital Signs - BHS**

Temperature : 98.3 DegF(Converted to: 36.8 DegC)  
Temperature Route : Oral  
Pulse Rate : 86 bpm  
Respiratory Rate : 21 br/min  
Oxygen Saturation : 100 %  
Mode of Delivery (Oxygen) : Room air  
Systolic Blood Pressure : 129 mm Hg (H)  
Diastolic Blood Pressure : 77 mm Hg (H)  
Mean Arterial Pressure : 94 mm Hg  
Blood pressure sites : Arm, right  
Pulse Pressure : 52 mm Hg  
Weight : 53.2 kg(Converted to: 117 pounds 5 oz)  
Weight Obtained Via : Standing scale  
Dry Weight : 53.2 kg(Converted to: 117 pounds 5 oz)  
Dry Weight Obtained Via : Standing scale

Scrusse , Kevin - 3/17/2025 8:02 EDT

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Forms - Text  
Event Date: 3/17/2025 08:02 EDT  
Result Status: Auth (Verified)  
Signed By: Smith ,Anncy (3/17/2025 08:02 EDT)

ED Triage Form Entered On: 3/17/2025 8:02 EDT  
Performed On: 3/17/2025 8:02 EDT by Smith , Anncy

**Triage BMC**

Stated Complaint : dog bite  
Travel Outside United States of America : No  
Is there a possible source of infection? : No  
Arrived by Ambulance : No  
Communication Barriers : None  
Language Spoken v001 : English

Smith , Anncy - 3/17/2025 8:02 EDT

DCP GENERIC CODE

ED Tracking Acuity : 4  
Tracking Group : BMC ED HOF Tracking Group

Smith , Anncy - 3/17/2025 8:02 EDT

ABC Stable : Yes  
Eye opening response pedi : Opens spontaneously  
Motor response pedi : Obeys commands  
Verbal response pedi : Oriented  
Pediatric Coma Score : 15

Smith , Anncy - 3/17/2025 8:02 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Forms - Text  
Event Date: 3/17/2025 10:58 EDT  
Result Status: Auth (Verified)  
Signed By: Scrusse ,Kevin (3/17/2025 10:58 EDT)

ED Vital Signs Entered On: 3/17/2025 10:58 EDT  
Performed On: 3/17/2025 10:58 EDT by Scrusse , Kevin

**ED Vital Signs - BHS**

Temperature : 98.5 DegF(Converted to: 36.9 DegC)  
Temperature Route : Oral  
Pulse Rate : 66 bpm  
Respiratory Rate : 18 br/min  
Oxygen Saturation : 99 %  
Mode of Delivery (Oxygen) : Room air  
Weight : 53.2 kg(Converted to: 117 pounds 5 oz)  
Dry Weight : 53.2 kg(Converted to: 117 pounds 5 oz)

Scrusse , Kevin - 3/17/2025 10:58 EDT

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Forms - Text  
Event Date: 3/17/2025 11:50 EDT  
Result Status: Auth (Verified)  
Signed By: Smith ,Anney (3/17/2025 11:50 EDT)

Nursing Discharge Note Emergency Department Entered On: 3/17/2025 11:50 EDT  
Performed On: 3/17/2025 11:50 EDT by Smith , Anney

**Nursing Discharge Note Emergency Department**

Discharge Time : 3/17/2025 11:50 EDT  
Discharge Level of Care at Discharge : Home/Group Home/Foster Care  
Patient Left Unit Via : Ambulatory  
Pt Accompanied Off Unit with : Parent  
DC Instruct Provided & Signed by pt : Yes  
PT understands DC Instructions : Yes  
Teachback : Able to teach back  
Discharged With Belongings : Yes  
Final Vital Signs Within One Hour of Discharge : Yes  
Final Pain Assessment Within 30 Minutes of Discharge : Document pain assessment  
Additional Discharge Notes : Pt alert and interactive, skin AWD, breathing is unlabored. Pt and family verbalized understanding of d/c instructions, new medications, and how to follow up. Ambulated steadily out of department.  
Smith , Anney - 3/17/2025 11:50 EDT

**Detailed Pain Assessment**

Pain Assessment 1 - 10 Scale : 1 - 10 scale  
1 - 10 Pain Scale Score : 2  
Smith , Anney - 3/17/2025 11:50 EDT

**1 - 10 Scale**

1 - 10 Scale : 2  
Smith , Anney - 3/17/2025 11:50 EDT

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Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Document Type: ED Assessment Form - BHS - Text  
Event Date: 3/17/2025 08:02 EDT  
Result Status: Auth (Verified)  
Signed By: Smith ,Anney (3/17/2025 08:02 EDT)

ED Assessment Form Entered On: 3/17/2025 8:04 EDT  
Performed On: 3/17/2025 8:02 EDT by Smith , Anney

**EMS / Triage Information**

Patient Identifying Information : Name: CANDELARIA, Yaelis  
DOB: 11/22/11  
Current Encounter Data : Stated Complaint: dog bite (03/17/25 08:02)  
ABC Stable: Yes (03/17/25 08:02)  
Communication Barriers: None (03/17/25 08:02)  
Language Spoken English (03/17/25 08:02)

Smith , Anney - 3/17/2025 8:02 EDT

**ED Vital Signs/Pain/Falls**

Weight Obtained Via : Standing scale  
Pain Assessment : Assessment  
High Fall Risk (ED) : No  
Eye opening response pedi : Opens spontaneously  
Motor response pedi : Obeys commands  
Verbal response pedi : Oriented  
Pediatric Coma Score : 15

Smith , Anney - 3/17/2025 8:02 EDT

**HPI / PMH**

History of Present Illness : Pt was walking to school and was bit on L leg by friend's dog. Unsure if dog is up to date on vaccines. 1 puncture wound to L lower leg. No other injuries. No meds pta. Here with sister, calling mom to see if up to date on vaccines.  
Other Objective Findings : Pt alert and oriented, small puncture wound noted to L lower leg, +LET applied. Bleeding controlled. No other injuries seen.  
Is there a possible source of infection? : No  
PMH: None  
Pregnancy Status : Unknown  
EGA\_EDD ST : No qualifying data available.  
Gravida\_Para ST : Gravida Para Information:  
Gravida: 0  
Para Term: 0  
Para Preterm: 0  
Para Abortions: 0  
Para Living: 0  
Delivery Type and Date ST : Delivery Date and Type - Last Six Weeks  
\*There are no qualifying results\*  
Smoking cessation (v001) : Caregiver has not smoked in the last 12 months  
HCP and Advance Directive Docs in Chart : No data found

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

Add Health Care Proxy Adv Directive Doc? : No  
No Advance Directive in CIS because : Patient is <18 years old  
Domestic Violence Screen : Patient denies  
Pt had a Kidney Transplant? : No  
Arrived w/Alt. Level of Consciousness? : N/A  
Current Thoughts of Harming Others : No

Smith , Anney - 3/17/2025 8:02 EDT

Social History

(As Of: 3/17/2025 08:04:50 EDT)

Tobacco:

Never smoker, Tobacco user in household: No. (Last Updated:  
4/4/2016 10:16:41 EDT by Cortes RN, Valery)

Home/Environment:

Other: mom 2 brothers and sister (14yr) and sister's baby boy.  
Smoker in household: No. (Last Updated: 11/27/2018 16:07:35  
EST by Brown PA, Meredith B)

> / = 9 y.o. Systems Assessment

General Physical Appearance : Uncomfortable  
Respiratory effort : Unlabored  
Skin Color : Normal for ethnicity  
Skin Description I : Dry  
Skin Temperature : Warm  
Neurological Symptoms : None  
Orientated to person, place, time : Person, Place, Time, Event  
Level of Consciousness : Full Consciousness  
Affect/Behavior : Appropriate  
Musculoskeletal (ED) : No Problems  
Immunizations up to date : Yes  
Date of Last Tetanus (ED) : Less than 5 years

Smith , Anney - 3/17/2025 8:02 EDT

Allergies/Home Meds

Does Pt have a Medication Infusion Pump : No  
Home Medication Review : Done  
Patient Preferred Pharmacy Addressed : Done  
Allergies Reviewed : Yes, no known allergies

Smith , Anney - 3/17/2025 8:02 EDT

Medication List

(As Of: 3/17/2025 08:04:50 EDT)

Prescription/Discharge Order

Acetaminophen : Acetaminophen ; Status: Prescribed ; Ordered As  
Mnemonic: acetaminophen 160 mg/5 mL oral suspension ;  
Simple Display Line: 320 mg, 10 mL, By Mouth, Every 4 hours,  
not to exceed 5 doses/day, PRN: for pain, fever, 120 mL, 3  
Refill(s) ; Ordering Provider: Covington MD, Maria A; Catalog  
Code: Acetaminophen ; Order Dt/Tm: 1/7/2020 12:21:16 EST

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)

*Emergency Medicine Notes*

; Comment: Target Dose: acetaminophen 160 mg/5 mL oral suspension 15 mg/kg 1/7/2020 12:21:28

Multivitamin with Fluoride : Multivitamin with Fluoride ; Status: Prescribed ; Ordered As Mnemonic: multivitamin with fluoride Multiple Vitamins with Fluoride 1 mg oral tablet, chewable ; Simple Display Line: 1 tablet, Chew, Daily, 90 tablet, 3 Refill(s) ; Ordering Provider: Cassidy NP, Kathleen A; Catalog Code: Multivitamin with Fluoride ; Order Dt/Tm: 3/1/2022 15:35:19 EST

(As Of: 3/17/2025 08:04:50 EDT)

Allergies (Active)

NKA Estimated Onset Date: Unspecified ; Created By: Carbonneau , Jaclyn; Reaction Status: Active ; Category: Drug ; Substance: NKA ; Type: Allergy ; Updated By: Carbonneau , Jaclyn; Reviewed Date: 3/17/2025 8:03 EDT

Initial Treatments

Initial Treatments (ED) : Medicated w/Lido/Epi/Tetracaine

Smith , Annecy - 3/17/2025 8:02 EDT

ESI / Acuity

Stated Complaint : dog bite

ESI Level 1 : No

ESI Level 2 : No

ESI Level 3 : One

Smith , Annecy - 3/17/2025 8:02 EDT

DCP GENERIC CODE

ED Tracking Acuity : 4

Tracking Group : BMC ED HOF Tracking Group

Smith , Annecy - 3/17/2025 8:02 EDT

Recommended ESI : 4

Smith , Annecy - 3/17/2025 8:02 EDT

Detailed Pain Assessment

Pain Assessment 1 - 10 Scale : 1 - 10 scale

1 - 10 Pain Scale Score : 5

Smith , Annecy - 3/17/2025 8:02 EDT

Columbia Suicide Screening - Initial

Behav Health Condition/Able to Respond? : Primary reason for visit is NOT Behavioral Health condition

Smith , Annecy - 3/17/2025 8:02 EDT

1 - 10 Scale

1 - 10 Scale : 5

Smith , Annecy - 3/17/2025 8:02 EDT

Communication: Dangerous Dog Hearing - for a Pitbull at 10 Sanderson Street Owned by Ana Nina. (Dangerous Hearing)



Brief Description of Incident: ATTACHMENT: YES / NO

At 4:15 PM yesterday my Boston Terrier got Bitten by a pitbull and it had a puncture in the neck and the leg.

RESPONDENT INFORMATION

Do you know the name or address of the owner? (YES) / NO

Name: Elizabeth Torres

Street Address: 87 Massreco St Springfield MA

Phone: 413 364 0059 Phone: \_\_\_\_\_

Email: \_\_\_\_\_

DOG INFORMATION (if known)

413 364 0059

Name: Caroline Sex: F

Breed: Boston Terrier

Primary Color: Black White Secondary Color: \_\_\_\_\_

This is complainant's dog

Name: Lilly Sex: S/F

Breed: pitbull

Primary Color: Black Secondary Color: White



**Activity Card**  
**A25-085153-1**

**A25-085153-1**    **INV/BITE**    **Priority Level: 2**    **Total Animals: 1**    **Animal Type: DOG**

**Activity Address:** 93 MASSRECO ST

**Activity Comment:** Big dog little dog bite investigation

**Owner Information:**

P058422    JONATHAN WILLIAMS  
              SPRINGFIELD, MA  
              93 MASSARECO ST  
              (413) 219-5889

**Animal Information:**

A067746    Caroline - 4Y Spayed Black/White Boston Terrier

**Officer:** P030355    SANBORN    **Clerk:** 111659

**Results:**

Call Date:            06/04/25 04:20 PM  
New Date:            06/04/25 04:20 PM  
Dispatch Date:  
Working Date:        06/04/25 04:52 PM  
Complete Date:      06/04/25 05:14 PM

1 RPRT  
1 COMP

**Communication: Dangerous Dog Hearing for a Dog Named Lilly at 87 Massreco St Owned by Elizabeth Torres (Dangerous Hearing)**

Date of Report: 06/04/2025

# ANIMAL BITE REPORT

## Rabies Control Investigation

### Thomas J. O'Connor Animal Control

1. Bite Number:  
**B25-004120**

I. ANIMAL/PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) Caroline - B/W Boston Terrier	3. ID # A067746	4. Sex S/F	5. Age 4	DOB	6. Telephone 413-219-5889		
	7. Address (No. & Street) (City) (State) (Zip)								
	8. Name of Parent or Guardian (if victim is a minor) WILLIAMS, JONATHAN (P058422) (NEIGHBOR)				9. Address (if different) 93 MASSARECO ST, SPRINGFIELD, MA				
	10. Source of Information				Victim Telephone - Other				
	EXPOSURE	11. Place of attack 93 MASSARECO ST				12. Time and Date of attack June 4, 2025 3:30 pm			
	13. Circumstances of attack: UNPROVOKED								
	14. Location and description of wound(s): TORSO, DUNBAR 4								
	TREATMENT	15. Was wound treated? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Date:			16. Wound treated by: <input type="checkbox"/> Self <input type="checkbox"/> Parent <input checked="" type="checkbox"/> Dr. Telephone VESH W. Springfield				
	17. Details of wound treatment <input type="checkbox"/> Washed <input checked="" type="checkbox"/> Sutured				18. Anti-Rabies Treatment Recommended? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By Whom?				
	19. Anti-Rabies Treatment Given? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By Whom? Telephone:								
MISC.	Ms Torres was leaving her home with Lily on leash. Lily spotted a bunny in neighbors yard and ran after it. Caroline was outside with owner and Lily allegedly grabbed Caroline's harness causing one puncture in axilla region. Both dogs were leashed.								

II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) TORRES, ELIZABETH		21. ID # P058423	Telephone: (413) 364-0059		
	22. Address (No. & Street) (City) (State) (Zip) 87 MASSRECO ST SPRINGFIELD, MA 01109						
	23. Type of animal SPAYED FEMALE, DOG			ID # A067747	<input checked="" type="checkbox"/> Owned <input type="checkbox"/> Stray <input type="checkbox"/> Wild	Est. Age: 4 YEARS	
	24. Description: (Breed, color, etc.) LILY BLACK / WHITE PIT BULL				25. License Tag: Year: Expires:		
	26. Behavior <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal			27. Prior Bites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	28. Vaccinated against rabies? YES Vet:		Vaccination Date		Rabies Tag Number		<input type="checkbox"/> 1 Year Vaccine <input type="checkbox"/> 3 Year Vaccine
	QUARANTINE	29. <input type="checkbox"/> Unable to locate animal <input type="checkbox"/> Confined at TJO <input checked="" type="checkbox"/> Animal Confined - HOME From Date: 06/04/2025 To Date: 06/14/2025					
	30. If at owner's home, have quarantine guidelines been explained? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				31. Date sent to Animal Inspector/Board of Health		

III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death <input type="checkbox"/> Illness <input type="checkbox"/> Injury <input type="checkbox"/> Euthanasia Date:	
	32. Veterinarian <input type="checkbox"/> Did see animal <input type="checkbox"/> Did not see animal		33. Head examination is <input type="checkbox"/> Requested <input type="checkbox"/> Not Warranted
	34. Remarks:		
	LABORATORY	35. Head sent to Lab: DATE BY TELEPHONE	
	36. Results <input type="checkbox"/> POSITIVE <input type="checkbox"/> NEGATIVE <input type="checkbox"/> UNSATISFACTORY		
37. Victim notified by: <input type="checkbox"/> Person <input type="checkbox"/> Phone <input type="checkbox"/> Mail		Date: By:	
38. <input type="checkbox"/> Case Closed: Date:		By:	
39. Officer Completing Form: ACO Sanborn		Telephone:	

Communication: Dangerous Dog Hearing for a Dog Named Lily at 87 Massreco St Owned by Elizabeth Torres (Dangerous Hearing)



**Veterinary Emergency & Specialty Hospital WS**  
 134 Capital Drive Suite A  
 West Springfield, MA, 01089  
 Ph: 413-665-4911  
 Fax: 413-665-4934  
 Email: veshinfows@veshmass.com

**BILL TO**

Williams, Theresa  
 93 Massreco Street  
 Pine Point  
 Springfield, Massachusetts, 01109  
 413-219-5889

**Estimate**  
**232591(06-04-2025)**  
**Williams, Theresa**  
**Caroline (258757)**

**Client Details**

**Name** Williams, Theresa      **Phone** 413-219-5889  
**Address** 93 Massreco Street  
 Pine Point  
 Springfield,  
 Massachusetts, 01109

**Patient Details**

**Name** Caroline      **Age** Not Set  
**Species** Canine      **Sex** Female Spayed  
**Breed** Boston Terrier      **Microchip**  
**Color** Black & White

DESCRIPTION	QTY	TOTAL
Consult - Emergency	1 → 1	\$226.00 → \$226.00
IDEXX In House Catalyst NSAID 6	1 → 1	\$200.16 → \$200.16
Catheter - Outpatient	1 → 1	\$72.05 → \$72.05
Propofol Intravenous Anesthetic 2l-50lbs	1 → 1	\$205.03 → \$205.03
Methadone HCL 10mg/mL	1 → 1	\$104.45 → \$104.45
Surgery - Laceration Repair Minor	1 → 1	\$263.02 → \$263.02
Estimated Injection (IV,IM,SQ) Administration Fee	1 → 2	\$91.76 → \$183.52
Miscellaneous Medication	2 → 5	\$224.19 → \$560.47
Velfast Self-Grip E-Collar - Size 20	1 → 1	\$56.10 → \$56.10
<b>Subtotal</b>		<b>\$1408.07 → \$1816.33</b>
<b>Tax</b>		<b>\$34.69 → \$54.47</b>
<b>Total</b>		<b>→\$1870.80</b>
<b>Required Deposit</b>		<b>\$1442.76</b>

1) I, as the owner or authorized agent of the owner, authorize the treatment of this animal. In the event that additional procedures are necessary, reasonable attempts will be made to contact you. In the event you cannot be contacted, we will only provide treatment to stabilize your pet and control pain. Every precaution for the safety of this animal will be provided, however, no guarantee has been or can be made as to the outcome of treatment. I will not hold Veterinary Emergency & Specialty Hospital liable for accidental injury, escape, or the event of death.  (initial here)

2) Please provide contact phone numbers we may use to reach you during your pets hospitalization:



**Veterinary Emergency & Specialty Hospital WS**  
134 Capital Drive Suite A  
West Springfield, MA, 01089  
Ph: 413-665-4911  
Fax: 413-665-4934  
Email: veshinfows@veshmass.com

**BILL TO**

Williams, Theresa  
93 Massreco Street  
Pine Point  
Springfield, Massachusetts, 01109  
413-219-5889

Primary Contact Name:  Phone #

Home  Cell  Work (check one)

Secondary Contact Name:  Phone #

Home  Cell  Work (check one)

I authorize contact via text message (check one):  YES  NO

3) I consent to the administration of sedatives, analgesics and anesthetic agents as deemed appropriate by the veterinarian.

(Initial here)

4) In order to react in accordance with your wishes for your pet, we ask you to please designate an emergency resuscitation code for your pet. Please choose one of the following actions you wish us to take:

Do Not Resuscitate (no CPR)  (Initials)    Resuscitate (perform CPR, estimate \$200-\$350)  (Initials)

5) I understand that this is only an estimate, and that additional diagnostics, hospitalization, and/or medications may be required for diagnosis and treatment. I agree to pay the low end of the estimate prior to treatments as a deposit, and to pay all charges in full at the time of discharge. I understand that the final amount may be more than either the low or high estimate due to the actual services performed. I understand that I will be provided with daily financial updates and will be asked to make additional payments, when necessary, to ensure my account is current.  (please Initial here)

Owner (or agent of the owner) signature: #WEBFORM-SIGNATURE# \_\_\_\_\_

Date: 06-04-2025

Communication: Dangerous Dog Hearing for a Dog Named Lilly at 87 Massreco St Owned by Elizabeth Torres (Dangerous Hearing)



Veterinary Emergency & Specialty Hospital  
413-665-4911  
141 Greenfield Road  
South Deerfield, MA, 01373  
veshinfo@veshdeerfield.com

**Payment Receipt**

**Client No.** 2570473  
**Client** Williams, Theresa  
**Address** 93 Massreco Street  
Pine Point  
Springfield, Massachusetts, 01109  
**Phone** 413-219-5889  
**Amount** \$1,442.76  
**Method** Credit Card- Terminal  
**Comments**

**Receipt No.** 793479  
**Date** 06-04-2025  
**Account Remaining Balance** -\$1442.76

Communication: Dangerous Dog Hearing for a Dog Named Lilly at 87 Massreco St Owned by Elizabeth Torres (Dangerous Hearing)



Veterinary Emergency & Specialty Hospital  
413-665-4911  
141 Greenfield Road  
South Deerfield, MA, 01373  
veshinfo@veshdeerfield.com

**Payment Receipt**

**Client No.** 2570473  
**Client** Williams, Theresa  
**Address** 93 Massreco Street  
Pine Point  
Springfield, Massachusetts, 01109  
**Phone** 413-219-5889  
**Amount** -\$22.25  
**Method** Credit Card- Terminal  
**Comments**

**Receipt No.** 793533  
**Date** 06-05-2025  
**Account Remaining Balance** \$0.00

Communication: Dangerous Dog Hearing for a Dog Named Lilly at 87 Massreco St Owned by Elizabeth Torres (Dangerous Hearing)

**INVOICE**

#764153

Invoice date:  
5th June 2025Customer name:  
Williams, TheresaCustomer number:  
2570473Customer address:  
93 Massreco Street  
Pine Point  
Springfield, Massachusetts, 01109From:  
Veterinary Emergency & Specialty Hospital  
134 Capital Drive Suite A West Springfield, MA 01089Phone:  
413-665-4911Fax:  
14136654934Email:  
veshinfows@veshmass.comAnimal name:  
CarolineAnimal DOB:  
31st December 1969

Description	Staff Member	Qty	Discount	Discount (%)	Total
Consult - Emergency	Dr. Gregory Mansfield	1			\$226.00
IDEXX In House Catalyst NSAID 6	Dr. Gregory Mansfield	1			\$200.16
Midazolam 5mg/mL	Dr. Gregory Mansfield	0.48			\$65.13
Surgery - Laceration Repair Minor	Dr. Gregory Mansfield	1			\$263.02
Catheter - Outpatient	Dr. Gregory Mansfield	1			\$72.05
Propofol Intravenous Anesthetic 21-50lbs	Dr. Gregory Mansfield	1			\$205.03
Velfast Self-Grip E-Collar - Size 20	Dr. Gregory Mansfield	1			\$56.10
Carprofen (Rimadyl) Tablets 25mg	Dr. Gregory Mansfield	10			\$66.81
Amoxi-Clav Tablets 125mg	Dr. Gregory Mansfield	21			\$108.58
Gabapentin Capsules 100mg	Dr. Gregory Mansfield	30			\$69.31
Ampicillin/Sulbactam 30mg/mL Injection	Dr. Gregory Mansfield	12.1			\$88.32

Total:	<b>\$1420.51</b>
Subtotal:	<b>\$1386.91</b>
Including tax:	<b>\$1420.51</b>
Discount:	<b>\$0.00</b>
Payment method:	<b>Credit Card - Terminal : -1420.51</b>
Amount paid:	<b>\$1420.51</b>
Balance:	<b>\$0.00</b>

Communication: Dangerous Dog Hearing for a Dog Named Lilly at 87 Massreco St Owned by Elizabeth Torres (Dangerous Hearing)

Thank you for choosing Veterinary Emergency &amp; Specialty Hospital

 134 Capital Drive Suite A West Springfield, MA 01089 • 413-665-4911 • [veshinfows@veshmass.com](mailto:veshinfows@veshmass.com)

**Gladys Oyola-Lopez**  
**City Clerk**  
 City Clerk's Office  
 36 Court Street, Room 123  
 Springfield, MA 01103



**THE CITY OF SPRINGFIELD, MASSACHUSETTS**

January 15, 2025

Peter Gallucci  
 64 California Ave  
 Springfield, MA 01118

Dear Mr. Gallucci:

A nuisance dog hearing was held on December 19, 2024 by the Animal Control Advisory and Hearing Committee in accordance with Chapter 110, Section 10 of the Code of the City of Springfield Ordinance, 2012, as amended for dangerous dog hearing for your dog named Mia. The committee voted to deem your dog as a **Nuisance** and has imposed the following conditions:

The Advisory and Hearing Committee has imposed the following conditions on the animal:

1. That the dog be humanely restrained. As defined in Chapter 110, Section 10-1 of the Code of the City of Springfield Ordinance.
2. That the dog be tethered when in the yard. As defined in Chapter 110, Section 10-9 of the Code of the City of Springfield Ordinance.

Failure to comply with this order may result in a fine of up to five hundred dollars (\$500.00) or imprisonment for up to 60 days under Mass General Law Chapter 140 Section 157a. Please note transferring ownership or possession of your dog is prohibited under subsection (3) of Chapter 140 Section 157A.

An appeal of this decision may be filed in District Court within 21 days of receiving this notice per Section 110-13(E) of the Springfield, MA ordinance. Further information regarding the requirement may be obtained from the Thomas J. O'Connor Animal Control Center, 627 Cottage Street, Springfield, Massachusetts, 413-781-1484.

Sincerely,

Gladys Oyola-Lopez  
 City Clerk

GO/C Nelson Campbell

Gladys Oyola-Lopez  
 City Clerk  
 City Clerk's Office  
 36 Court Street, Room 123  
 Springfield, MA 01103



THE CITY OF SPRINGFIELD, MASSACHUSETTS

January 15, 2025

Mark Tourangeau  
 192 Harkness Ave  
 Springfield, MA 01118

Dear Mr. Tourangeau:

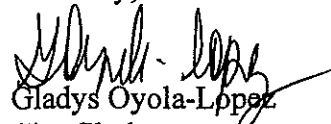
A Non-Compliance Hearing was held on December 19, 2024 by the Animal Control Advisory and Hearing Committee in accordance with Chapter 110, Section 10 of the Code of the City of Springfield Ordinance, 2012, as amended for dangerous dog hearing for your dog named Abby.

The committee had voted to deem your dogs as **Dangerous** at a previous dangerous dog hearing that was held on July 18, 2024 in which Abbey was ordered to be impounded, due to your absence from the hearing. An additional Dangerous Dog Hearing was scheduled on October 17, 2024 in which, you again, did not attend. At that meeting, again without your attendance, Abby was ordered to be euthanized. The euthanasia order was due to the fact that Abby had escaped three times, and had attacked two separate dogs on two separate occasions.

The Hearing Committee was hoping to hear your side of the story and potentially order conditions that would prevent Abby's escape and attack on other animals but without your attendance, and evidence of the above-mentioned escapes and roaming of the City, coupled with two separate attacks, a Euthanasia Order was voted by the Committee.

At the December 19<sup>th</sup> Non-Compliance Hearing the Committee found the orders on July 18, 2024 and October 17, 2024 were valid orders and you failed to comply with said orders. For that reason, the Animal Control Advisory and Hearing Committee voted to fine you Five Hundred Dollars pursuant to Chapter 140 Section 157A. Please note transferring ownership or possession of your dog is prohibited under subsection (3) of Chapter 140 Section 157A. In addition, the order to have your dog euthanized is still a valid order. An appeal of this decision may be filed in District Court within 21 days of receiving this notice per Section 110-13(E) of the Springfield, MA ordinance.

Sincerely,

  
 Gladys Oyola-Lopez  
 City Clerk

GO/C Nelson Campbell

Packet Pg. 97

Communication: Dangerous Dog Hearing for a Dog Named Abby at 192 Harkness Ave Owned by Mark Tourangeau. (Non-Compliance Hearing)

**Gladys Oyola-Lopez**  
**City Clerk**  
 City Clerk's Office  
 36 Court Street, Room 123  
 Springfield, MA 01103



**THE CITY OF SPRINGFIELD, MASSACHUSETTS**

February 18, 2025

Abdul Kabba  
 66 Leyfred Ter  
 Springfield, MA 01108

Dear Abdul Kabba:

A Non-Compliance Hearing was held on February 13, 2025 by the Animal Control Advisory and Hearing Committee in accordance with Chapter 110, Section 10 of the Code of the City of Springfield Ordinance, 2012, as amended for dangerous dog hearing for your dogs named Charlie, Deja and Brenda. The committee voted to deem your dogs as **Dangerous** and has imposed the following condition:

The Advisory and Hearing Committee has imposed the following condition on the animal:

1. That the secured enclosure to be completed February 17, 2025, and Thomas J. O'Connor (TJO) will do a follow visit in the same week to make sure compliance are met. As defined in Chapter 110, Section 10-B-9 of the Code of the City of Springfield Ordinance.

Failure to comply with this order may result in a fine of up to five hundred dollars (\$500.00) or imprisonment for up to 60 days under Mass General Law Chapter 140 Section 157a. Please note transferring ownership or possession of your dog in prohibited under subsection (3) of Chapter 140 Section 157A

An appeal of this decision may be filed in District Court within 21 days of receiving this notice per Section 110-13(E) of the Springfield, MA ordinance. Further information regarding the requirement may be obtained from the Thomas J. O'Connor Animal Control Center, 627 Cottage Street, Springfield, Massachusetts, 413-781-1484.

Sincerely,

Gladys Oyola-Lopez  
 City Clerk

GO/C Nelson Campbell