

Adventures in Health Care

by Christy Noel

We were nearly finished with our routine visit to the vet, or so I thought. Pollo and Tana had been due for their annual checkups. Physical examinations plus rabies and distemper shots were done for another year, all for the low price of \$178.

The receptionist was still trying to coax the computer into regurgitating our bill. The whole place was as slow as cat aerobics on a sunny afternoon. I tried to recall why I had originally picked Countryside. Ah yes, convenience. They had several veterinarians and were open late. I thought it would be much easier to go after work. Apparently, every pet owner for twenty miles agreed with me, because the place was packed. This meant that scheduled appointments were about as timely as the Saturday morning deli line at the supermarket.

Dogs barked in the back. Cats yowled in the lounge. Though unusually attractive for a vet's office, the tasteful décor could not overcome the smell of fear and shedding fur.

I knelt to console my cowering kitties, promising them we'd be home soon. We were approaching the hour mark on our visit to the vet. My husband was probably staring forlornly into the refrigerator. No doubt our third cat, Cally, was crying into her empty bowl, no longer gloating about being left behind; she had had her checkup a few months earlier.

We were all ready for dinner. Anticipating this, I produced a bag of treats and gave each cat one. I seriously considered eating one myself.

After devouring the morsel, Pollo and Tana frowned at me. *Where's the rest?*

"Hang in there a little longer." I checked on the ornery computer. Maybe I could bribe it with a treat, too.

"Hack-hack."

I cringed. Every cat owner knows that sound.

Piles of half-digested kibbles erupted from Pollo's mouth onto his blanket. He gave me a look that said, "You wanted my opinion of this place, didn't you?"

An aide took him and his cage into the back. The vet gave Pollo a shot of Benadryl to cope with a possible allergic reaction and brought him out again.

Pollo was clean, de-kibbled, and pissed off. His black and white fur bristled, and his rumbling growl was definitely not contented purring.

As soon as they set his cage down, Tana threw up.

"It could be a bad vaccine batch," suggested Dr. Finn.

Or it could be the fact that we'd been at the place for over an hour — but no one else seemed to be having these problems.

Tana went with Dr. Finn to get a shot of Benadryl, miracle cure for vaccine reactions. Pollo started howling and I almost joined him. Instead, I drummed my fingers on the counter.

"She's still dry heaving," said Dr. Finn. "We'd like to keep her under observation for a little while longer."

Pollo and I gave exasperated sighs to make sure he knew we were annoyed.

Finally, only two hours after we arrived, the three of us went home.

"Call us if she keeps vomiting and stays lethargic."

At home, Tana moped around, looking slightly more indignant than usual. It's not uncommon for cats to be under the weather after a vaccine, so we figured she would be better in the morning.

The next day, Pollo was fine, but Tana turned her nose up at three different flavors of cat food and went back to bed. I called the vet.

“Go to the store and buy Orudis KT. It’ll help with any aches, and it’s safe for cats,” explained Dr. Finn. “Give her a half tablet and see how she does.”

Another day went by without improvement. Tana would only watch cartoons and refused to get out of bed. She hadn’t eaten anything for over twenty four hours and had only drunk a few sips of water.

Increasingly worried, we returned to the vet’s office. Tana was dehydrated, so they gave her some medication and re-hydrated her with a needle. Now we had a cat-shaped water balloon. They recommended we buy a thermometer to monitor her fever — I tried not to worry about how to accomplish that — and they gave me some syrupy medication, bland food, a few syringes for force feeding, and another bill.

“Smells like cherry,” I said, filling the syringe with her new medication. All I had to do was force a small amount of liquid down her throat. Child’s play.

Tana foamed at the mouth and shook, splattering pink gunk across the kitchen. Pollo and Cally hissed at her.

“She’s your cat.” Wayne stepped further back.

Force feeding her meals did not go any better. The next day, we took her back to the vet because she was dehydrated again. He put her on an IV and promised to call me in the morning. The receptionist handed me an estimate that nearly set off the fire alarm.

No problem. We’d put Pollo and Cally to work mowing neighborhood lawns.

Wayne and I wondered if the bombardment of treatments had contributed to Tana’s problems. After two days of hospital care, including IV fluids, antibiotics, steroids to stimulate appetite, and Pepcid AC to settle her upset stomach, she was no better.

The vet called just before 7 p.m.

“I’m afraid we can’t do anything more for her,” said Dr. Kauffer, the on-call vet. She sounded like she had faced one too many crazed animals. “I’m afraid to leave her unsupervised overnight. You should take her to the university hospital — tonight.” She described the big veterinary school, which was about fifty miles from our house. “They can give her twenty four hour care.”

Now we were up to \$1000, excluding the price of the original checkup and shots that had triggered this nightmare.

Two unassuming university interns greeted us at midnight, examined Tana, and found nothing new. If her problem was a reaction to a bad vaccine, it was the worst case anyone had ever seen. It probably belonged in the Feline Medical Journal.

Tana submitted with perfect patience. She was probably plotting her revenge.

After the exam, they checked Tana into their hospital ward and issued us her very own health card. It was like one you might get for medical insurance, except you don’t get any help with the bills.

The next day, I talked to Tana’s new vet, Dr. Gomez, a specialist in internal medicine.

“She’s alert but now she has diarrhea,” he said. “I’ve added another antibiotic to help with the inflammation, and I’ve ordered blood-work.”

A few days later: “We performed an ultrasound. She has one enlarged lymph node. The radiologist is going to review her case.”

And another: “We’re culturing her feces to check for parasites. The vomiting has stopped but she still has diarrhea.”

I became more vocal about the mounting costs.

After work, I made daily journeys to the hospital to visit. It was just like going to a human hospital, except the patients didn’t have TV or eat jello.

During my visits with Tana, I was pleased to see her starting to act like her old self. They gave us a private office to spend some time together without being disturbed.

She sat on my lap and purred. Then she explored the room. I looked the other way when she clawed the office chair.

“When can she come home?” I asked, staring at my notes. They had yet to discover the cause of Tana’s illness.

“Tuesday or Wednesday at the earliest. As soon as she can eat,” said Dr. Gomez. Tana was still on the IV.

“We should consider doing a colonoscopy.” He explained this painful diagnostic procedure. “She could have temporary colitis, or inflammatory bowel disease, or lymphoma — cancer.”

All this from a routine vaccine reaction. What a bargain!

“We’ve spent \$3500 and really need to bring the costs under control. What would a colonoscopy prove?” I was getting pretty good with medical terminology.

He explained that if they found cancer, it was possible to give cats chemotherapy. *Chemotherapy?* Heck, why didn’t we also try leeches?

“Sometimes they respond well to chemo and can survive up to two years,” he added. On the other hand, if she just had IBD or colitis, we could probably treat that with diet.

“Let’s be logical here,” I said. “If she has something really serious wrong with her, there probably isn’t much we can do other than make her comfortable.” Which was no different than if she only had a minor condition.

“That’s true.” He finally agreed that we could always do the colonoscopy at a later date. He was well intentioned, but I was beginning to get the impression that the university vets wanted to test their vast array of techniques — all at our expense. But these doctors couldn’t even figure out what was wrong with her after a battery of tests. There would be no colonoscopy.

A mere three weeks after the ordeal began, Tana came home. The other cats showed how much they had missed her by hissing and picking a fight.

She looked more like a poodle-rat than a cat. They had shaved all of her legs for the IV, her neck to draw blood, and her belly for the ultrasound — it would take six months for all of her gray and white fur to grow back. She smelled like the hospital, and her ribs showed because she had lost so much weight. She would never be quite the same, but she would survive.

On the other hand, my checkbook needed CPR. The vaccine company gave us a whopping \$300 and never admitted fault.

Tana — mostly recovered — was happy to be home, but we still had to keep her on the antibiotics and medicines for a few more weeks.

I prepared the syringe. “This one smells like cherry, too.”

Pharmaceutical companies ought to consider making shrimp-flavored medicines.

“At least she’s eating again,” I added while I corralled my patient in her laundry basket.

Pollo and Cally backed away, tails twitching.

Wayne’s eyebrow raised. “Only after you offered her three different flavors.”

“Whatever works.” I smiled down at Tana and rubbed her head. “She’s a good kitty.”

Tana squirmed a little, but I restrained her and forced the tube into her mouth. It didn’t seem like it was going to be much of a struggle; she was so lightweight now.

The cat shuddered, and all at once, shaved cat legs flailed in every direction like the Tasmanian Devil. Pollo and Cally scrambled out of the kitchen, skittering on claws in their haste, while Wayne smothered a laugh.

Pink goo dripped down my face and hair.