NORMAN ANIMAL WELFARE

MEDICAL PROTOCOLS



INDEX

Cats	
Aging cats	1
Kitten protocols.	2
Fading Kitten Syndrome.	5
Upper respiratory tract infections.	7
Alopecia	7
Puncture wounds and abscesses.	8
Post-operative incision problems.	8
Hematuria or straining to urinate	8
Panleukopenia	9
Calicivirus	9
Dogs	
Aging dogs	10
Ocular discharge	11
Coughing	1.
Diarrhea	12
Vomiting	13
Alopecia	13
Hot spots	14
Allergic reaction (swollen face or hives)	14
Puncture wounds and abscesses.	14
Post-operative incision problems.	13
Hematuria or straining to urinate	1:
Parvovirus.	1:
Heartworm treatment protocol.	10
Sedation for euthanasia	10
Limping.	1′
Emaciation	1′
Trauma	17
Behavior	17
Vaccination protocols	
Dogs	18
Cats	23

Internal parasite treatments	24
In-house pharmacy drugs	25
Isolation protocols	26

Aging Cats

Neonatal Kittens

Kitten Age	Characteristics
Less than 3 days old	Eyes closed, wet umbilical cord attached
Less than 5 days old	Eyes closed, dry umbilical cord
Less than 7 days old	Eyes completely closed
7 to 10 days old	Eyes begin to open
2 to 3 weeks	Eyes completely open, "rounded" ears, no incisors
$3\frac{1}{2}$ to $4\frac{1}{2}$ weeks	Pointed ear shape, small incisors not fully erupted
5 to 6 weeks	Incisors erupted, weighs about 1 ½ pounds

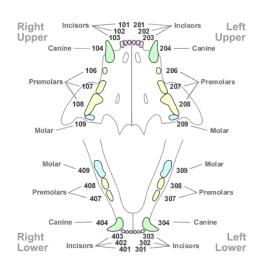
Teeth eruption dates:

Deciduous

2 to 3 weeks	Center (4) incisors
3 to 4 weeks	Outer incisors, canines
4 to 5 weeks	Lower premolars
8 weeks	Upper premolars

Permanent

14 to 16 weeks	Center (4) incisors
16 to 18 weeks	Outer incisors
4 to 5 months	Upper molar
$4 \frac{1}{2}$ to 6 months	Upper premolars
5 months	Canine
5 to 6 months	Lower premolars



Kitten protocols

Aspiration (bottle kittens)

Use to prevent pneumonia when a kitten aspirates.

Amoxicillin 5mg/lb PO BID for 7 to 10 days

Upper respiratory infections

Sneezing, watery eyes, nasal discharge, congestion

Convenia 0.045ml/lb SQ

If no improvement and clinical signs are mild, doxycycline 5mg/lb PO SID 7 days

If signs are severe and kitten is showing evidence of pneumonia

Nebulize (see page 4)

Baytril 0.03 ml/lb (100mg/ml injectable) diluted in LRS (10 ml/lb) given SQ BID 5 to 7 days (instead of Convenia)

Eye infections

Can be used in conjunction with treatment for upper respiratory tract infections

Erythromycin ointment BID 7 to 10 days

*dispense in a 1ml syringe for one or two kittens, if a tube is used for a litter it needs to be discarded after use

Diarrhea

Only treat if runny or watery or if you are seeing wet diarrhea on the tail.

Kittens less than 2 weeks old

-PenG $0.05ml + LRS\ 0.2ml\ SQ\ SID\ 3d$ (if there is a litter you can make a larger amount in a syringe and store it in the refrigerator

-If diarrhea persists, LRS SQ (see directions below)

Kittens over 2 weeks:

Check a fecal

Profender 0.1 ml/lb topically

Marquis 0.1 ml/lb PO SID 3d

If not eating well:

Parvo cite test

Reglan 0.05 ml SQ BID 5d

B12 0.1 SQ

Feed High Energy GI canned

Probiotic

If diarrhea persists >48h, metronidazole 0.1 ml/lb orally PO BID 7d (metronidazole 250mg ground up and added to 3.5 ml PetTinic will be 70mg/ml) Feed High Energy GI canned Probiotic

If diarrhea is severe and kitten is not eating well or vomiting:

Parvo cite test

Reglan 0.05 ml SQ BID 5d

B12 0.1 SQ

Baytril 0.03 ml/lb (100mg/ml injectable) diluted in LRS (10 ml/lb) given SQ BID 5 to 7 days

Feed High Energy GI canned

Probiotic

*Needs examination by a veterinarian

Weight loss or very thin with no other clinical signs

FeLV/FIV test

Profender 0.1 ml/lb topically

B12 0.1 ml SQ

Probiotic

High Energy GI canned

Metronidazole 0.1 ml/lb PO BID 10 days

(metronidazole 250mg ground up and added to 3.5 ml PetTinic will be 70mg/ml)

If reluctant to eat, Reglan 0.05 ml SQ BID 5d

*Needs examination by veterinarian and possible blood work if persists greater than 7 days

Neurological Kitten

Wobbly when walking, circling, falling over, head bobbing, tremoring

- Wear gloves when handling the kitten and make sure the kitten hasn't bitten anyone
- Do not combine with other kittens and wear gloves to change litterbox
- Wash hands after handling.

Clindamycin 15 mg/kg PO BID 28 days

weigh weekly and adjust dose accordingly

Needs an examination by a veterinarian during routine scheduled visit; if kitten is becoming worse needs exam ASAP

Constipation

If the kitten has been constipated for <48 hours, dilute formula 1:1 with water for 2 feedings or add water or ½ tsp per pound canned pumpkin to canned food. If the kitten has been constipated 72 hours or more, schedule an exam for a possible enema.

Fleas

If kitten is <1 lb, try to use a flea comb to remove the fleas. If you are unable to remove all the fleas, put one drop of Revolution between the shoulders.

If the kitten is > 1lb, use Effipro 0.1 ml/lb topically

Ringworm

See alopecia in cats

In kittens less than 6 weeks old, only treat affected areas with lime sulfur dip and wait to dip the kitten and use terbinafine until the kitten is at least 6 weeks of age.

Lime sulfur 3.5ml (\sim 1 tsp) + water 60 ml (\sim 1/4 cup) (mixture is only good for 48 hours)

For a 2 lb kitten:

To compound terbinafine, grind 1 ½ 250 mg tablets and add to 3 ml Pet Tinic and give 0.2 ml/lb PO SID for a minimum of 14 days (alopecia should be significantly better).

Nebulization

Place kitten in the box for nebulization with a heat source and use the nebulizer for 10 to 15 minutes 2 or 3 times a day.

Solution:

Sodium Chloride 0.9% 10 ml Gentamicin sulfate 0.05 ml Albuterol 0.05 ml:

Fading Kitten Syndrome

The following protocol was developed by AustinPetsAlive! which has a very large and successful kitten foster program.

Fading Kitten Syndrome is a life threatening emergency in which a kitten, sometimes ones that were previously sick, "crashes" and begins to fade away. If you are fostering kittens 12 weeks or younger, you should familiarize yourself with this handout so you know what to do if it happens.

Symptoms:

- Extreme lethargy -- unable to stand or hold head up, not responding when pet
- Feels cool to the touch
- Gasping for breath
- Meowing/crying out in distress

Step 1 -- Get them warm:

Create the "burrito" towel. Immediately wrap the kitten up in a towel like a burrito leaving only their face exposed. The whole body (tail, ears, paws) should be in the towel with only the mouth exposed. Do not take the kitten out of the towel to adjust them, check on them, etc. -- this is very important! Every time you take them out you will make them cold again, even if for only a second.

You MUST apply an extra source of heat (listed below). The kitten's body can't warm itself up with just a towel alone, you have to apply extra heat. Also, your body temperature is much lower than what the kitten should be, so trying to warm them up with your body heat won't work either.

If you have a heating pad (ideal), then wrap a heating pad *turned on low* around the towel. Tape it or use a large rubber band to secure it around the towel so it stays wrapped around them. Don't let the heating pad touch them directly (it can cause burns!). Make sure the "burrito" towel is between their skin and heating pad. A snuggle disc is not the same as a heating pad -- they need to be surrounded by warmth.

If you don't have a heating pad, you can either:

- 1) Keep your dryer running with towels in it and grab a new towel every 5 minutes and wrap the new towel around the "burrito" towel. Don't remove the "burrito" towel.
- 2) Fill 2 socks full of rice and tie the ends so the rice doesn't spill out. Throw them in the microwave for 3 minutes. Keep them next to the kitten on the outside of the burrito towel and switch rice socks every 30 minutes.

Step 2 -- Get their blood sugar up:

Once you get the heat on them, get a bowl, mug, or Tupperware and mix a few tablespoons of sugar or Karo syrup in hot water. Stir it up so you get a sugar water solution -- you want it to be as concentrated as possible but still runny. Using a syringe or your finger, give 3 drops **every 3 minutes** into the mouth. If they aren't swallowing, just smear it on the gums or tongue and try not to get it towards the back of the throat. Set a timer to make sure you are doing this at least every 3 minutes and no longer.

Step 3 -- contact the shelter for further recommendations.

PROGNOSIS

There is generally fairly good success with these kittens if you follow the above steps. It is NOT recommended you rush the kitten to the vet for many reasons:

You have the motivation to sit right there with them and make them your top priority. A vet clinic has many patients and can't give your kitten the 100% undivided attention you can give.

Your kitten will continue to be cold and hypoglycemic on the way to the vet, in the waiting area, and in the hospital. Most kittens won't live long enough for them to make it to the clinic to start treatment. It is better to try and stabilize them before transporting them.

The protocol was developed by a veterinarian at APA! and based on how the veterinarian would treat the kittens when they came in to the clinic. The most important treatments are keeping the kitten warm and getting their blood sugar up. The facility performed an experiment and found that kittens treated by the foster were far more likely to survive than ones brought directly to the clinic.

It may take a few hours for the kitten to respond, so stay with them and continue trying! Make sure you contact the shelter even if the kitten does improve to discuss what may have caused the kitten to fade in the first place and make sure the kitten is receiving whatever medical treatment s/he may need for any possible underlying condition.

Also keep in mind that even with all the love and attention and perfect treatment, some kittens still won't make it. Cats get pregnant very easily and have A LOT of kittens specifically because they are so fragile. Try not to blame yourself and try to remember all the kittens you have successfully raised or will raise. By opening your home to these animals, you are giving them the best possible start to life.

Upper Respiratory Tract Infections in Cats

If a cat is only sneezing infrequently and the nasal discharge is watery or there is mild, watery ocular discharge, treatment is not needed. Check the mouth closely for any ulcers and if any are seen, treat for calicivirus.

Convenia 0.045 ml/lb SQ

If congestion is severe,

Afrin in one nostril twice daily for 3 days

Nebulize (see page 4)

If there is ocular discharge, Terramycin or erythromycin OU BID

If the cat appears to be having difficulty breathing, schedule an exam with a vet.

Alopecia in Cats

Use Wood's Lamp to check for fluorescence Apply flea and tick preventative If patchy hairloss

Skin scraping

Lime sulfur dip weekly (if <6 weeks old just treat affected areas with dip)

Send off sample for PCR testing for ringworm

If strongly suspicious for ringworm, begin terbinafine 30 mg/kg PO SID for 14 days (extend for longer period of time if there is not noted improvement in 14 days)

Do not combine affected kittens with any other kittens, even after treatment as a precaution. (Can not go in a group room for adoption with other kittens.)

Follow ringworm protocol when caring for the cat/kitten.

If hair is not growing back within 10-14 days, will need an exam by a veterinarian.

Puncture Wounds and Abscess in Cats

Record the animal's temperature
Clip the hair around the affected area and clean with chlorhexidine solution
If the cat will allow you, flush the affected area
Convenia 0.045 ml/lb SQ
If febrile, give Onsior 0.045 ml/lb SQ or oral Onsior

Recheck the temperature daily and if the cat is febrile for 48 hours or longer, schedule an exam with the veterinarian.

Post-Operative Incision Problems in Cats

If there is mild discharge from the incision the day of the surgery, just clean the incision and monitor it.

If there is swelling or discharge after 48 hours or if the cat is febrile, give Convenia 0.045 ml/lb SQ

For post-operative bleeding with neuters

Spray the incision with $0.05\ ml/lb$ lidocaine with epinephrine with a syringe Apply drop of tissue adhesive to incision

If the cat is active, give hub of acepromazine diluted with 0.1 ml LRS SQ

Schedule an exam with a vet:

If the gums appear pale
If the cat is depressed or lethargic
If there is not response to Convenia within 24 to 48 hours

Hematuria or Straining to Urinate in Cats

Collect a urine sample for urinalysis for the veterinarian Baytril 5 mg/kg PO SID If the cat is straining

Onsior 1 to 2 days

If the cat does not produce any urine for 12 hours, call the veterinarian.

Panleukopenia

Note: Kittens may have a faint positive result on a test after vaccination.

Move to isolation and follow parvo protocol
Profender 0.1 ml/lb topically
B12 0.1 ml SQ
Baytril 0.03 ml/lb (100mg/ml injectable) diluted in LRS (10 ml/lb) given SQ BID 3 days
Pen G 0.05 ml/lb SQ SID 3d
Cerenia 0.05 ml/lb SQ SID 3d

Bathe kitten as needed, make sure the kitten doesn't get chilled. Force feed as frequently as possible if not eating well.

Calicivirus

Move to isolation and follow parvovirus protocol
Azithromycin 10 mg/kg PO SID 5d, then every 3 days for 3 to 6 doses
Sucralfate ½ tablet ground up and added to water PO BID PRN (for ulcers)
Antiviral eye medications BID 7d if ocular discharge
If not eating, needs exam and possible oral pain medications
LRS 10 ml/lb SQ SID to BID PRN
Nebulize if congested
Force feed if not eating
Hold cat for 2 weeks beyond resolution of ulcers if possible and do not place cat in group Room.

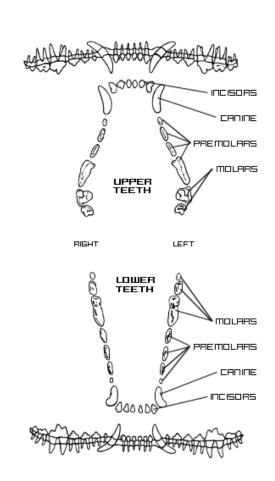
Aging Dogs

Deciduous teeth

3 to 5 weeks	Canines erupt
4 to 6 weeks	Incisors erupt
5 to 6 weeks	Premolars erupt

Permanent teeth

12 to 16 weeks	Incisors erupt
12 to 16 weeks	Canines erupt
16 to 20 weeks	Premolars erupt
16 to 24 weeks	Molars erupt



Ocular Discharge in Dogs

If the dog is less than 6 months old:

Isolate the puppy

Treat with Convenia 0.045 ml/lb SQ if any evidence of nasal discharge, sneezing, or coughing

Ciprofloxacin ophth BID 7d

If only one eye is affected and it appears severe, follow the protocol for unilateral ocular discharge in dogs over 6 months.

Schedule an appointment with a vet if no improvement within 3 days.

If dog is more than 6 months old:

Ciprofloxacin ophth BID

If one eye is affected, place one drop of tetracaine in the eye and then fluoroscein stain If there is any uptake of stain, photograph it and schedule an exam with a vet

Schedule an exam with a vet and isolate the dog if there is severe discharge or there is any evidence of lethargy.

Coughing in Dogs

Less than 6 months old:

Move to isolation

Convenia 0.045 ml/lb SQ

Drontal Plus

If the puppy has a soft, unproductive cough or is also lethargic, febrile, or not eating, or does not show improvement within 72 hours, schedule an exam

Over 6 months old:

Move to isolation

If less then 30 lb, Convenia 0.045 ml/lb SQ; if >30 lb, 10 mg/kg doxycycline PO SID 7d

Heartworm test

Drontal Plus

If soft, unproductive cough or dog is also lethargic, febrile, or not eating, schedule an exam.

Diarrhea in Dogs

If dog is less than 6 months old:

Fecal

Parvo cite test

Drontal Plus if >4 weeks old; pyrantel 0.2 ml/lb PO SID 3d if <4 weeks old

If puppy is 4 months old or less, Marquis 0.1 ml/lb PO SID 3d

If the puppy has a decreased appetite, Cerenia 0.045 ml/lb SQ

If dehydrated, give 15 ml/lb LRS SQ SID or BID as needed

Move to isolation if the puppy is not eating, lethargic or there is blood in the stool.

Schedule an exam if these clinical signs are severe or persist more than one day.

If diarrhea persists 48 hours,

Metronidazole 15 mg/kg PO BID 7 days

GI diet

If dog is more than 6 months old:

Fecal

Drontal Plus

If there is blood in the stool or the diarrhea is severe, Parvo Cite test

If diarrhea persists >48 hours,

Metronidazole 15 mg/kg PO BID

GI diet 5 days

Probiotic 7 days

If diarrhea persists >5 days or is severe, needs exam by a veterinarian.

Vomiting in Dogs

If dog is less than 6 months old:

Fecal

Parvo cite test

Drontal Plus if >4 weeks old; pyrantel 0.2 ml/lb PO SID 3d if <4 weeks old

If puppy is 4 months old or less, Marquis 0.1 ml/lb PO SID 3d

Cerenia 0.045 ml/lb SQ

If dehydrated, give 15 ml/lb LRS SQ SID or BID as needed

Move to isolation if the puppy is not eating or lethargic.

Schedule an exam if these clinical signs are severe or persist more than one day.

If dog is more than 6 months old:

Fecal

Drontal Plus

Cerenia 0.045 ml/lb SQ; if dog is >35 lb give Reglan 0.3 mg/kg SQ

If the vomiting is severe, the dog is lethargic, or vomiting persists more than 24 hours, schedule an exam.

Alopecia in Dogs

Simparica

Skin scraping

If Demodex, print off a CE hand-out from the veterinarian folder in the AW folder Flea and tick topical treatment

If hairloss appears circular, in small patches, or is persistent,

Send PCR sample to the lab and isolate the dog

Lime sulfur dips weekly

If confirmed ringworm or highly suspicious and PCR pending, terbinafine 30 mg/kg PO SID 14d, extend if needed until resolved.

Hot Spots in Dogs

If there is an area of moist, exudative dermatitis, use the following protocol and schedule a follow up exam.

If the dog will allow you, trim the hair away from the affected area and clean with chlorhexidine solution

If the dog is < 35 lb, Convenia 0.045 ml/lb SQ; if the dog is > 35 lb, 10 mg/lb cephalexin PO BID 7d

Use gentamicin and betamethasone spray BID PRN

Allergic Reaction in Dogs

If there is facial swelling or hives consistent with an allergic reaction, please use this protocol.

Diphenhydramine 1 mg/lb IM

If no improvement within 20 minutes or if clinical signs continue to worsen, dex SP 0.5 mg/kg SQ

If swelling continues to get worse or there is no improvement by the following day, schedule an exam.

Puncture Wounds and Abscess in Dogs

Record the animal's temperature
Clip the hair around the affected area and clean with chlorhexidine solution
If the dog will allow you, flush the affected area
If the dog is < 35 lb, Convenia 0.045 ml/lb SQ; if the dog is > 35 lb, Clindamycin 10 mg/kg PO BID 7d
If febrile, give Rimadyl 2 mg/lb PO

Recheck the temperature daily and if the dog is febrile for 48 hours or longer, schedule an exam with the veterinarian.

Post-Operative Incision Problems in Dogs

If there is mild discharge from the incision the day of the surgery, just clean the incision and monitor it.

If there is swelling or discharge after 24 hours and the dog is less than 35 lb, give Convenia 0.045 ml/lb SQ; if the dog is > 35 lb, give cephalexin 10 mg/lb PO BID Rimadyl 2 mg/lb PO SID 3d

Schedule an exam with a vet:

If the gums appear pale
If the dog is depressed or lethargic
If there is not response to antibiotics within 24 to 48 hours

Hematuria or Straining to Urinate in Dogs

Collect a urine sample for urinalysis for the veterinarian TMS 30 mg/kg PO SID 7d

If the dog is straining

Rimadyl 2 mg/lb PO SID 3d

Schedule an exam

Parvovirus

*For dogs with a positive Parvo cite test. If a dog tests positive for Parvo with an Abaxis test, confirm the test with an IDEXX test.

ISOLATE the dog if at all possible and close the ward (no dogs in or out of the ward) for 10 days and follow parvo protocol. The ward must be completely sanitized before new dogs can enter the ward.

Have the dog posted on ORN and try and get a rescue to take the dog if at all possible.

Perform a fecal and treat any co-infections accordingly.

Cerenia 0.045 ml/lb SQ SID PRN

Convenia 0.045 ml/lb SQ once

Give LRS 20-30 ml/lb LRS SQ SID-BID PRN

Bathe the dog when it leaves the ward.

If the dog is depressed or severely lethargic or can not be isolated, euthanize the dog.

Heartworm Treatment Protocol

If the dog has a positive Abaxis heartworm antigen test, confirm the test with an IDEXX test and perform a microfilaria direct test.

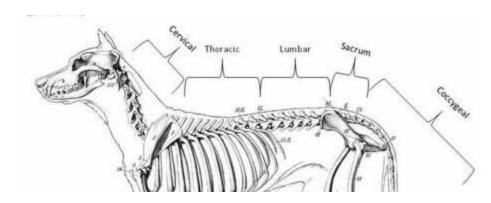
If the dog is coughing, schedule an exam prior to heartworm treatment.

Give two injections of Diroban 24 hours apart

0.045 ml/lb deep IM lumbar epaxial muscles L3-L5

< 22 lb use 23g 1" needle

> 22 lb use 22g 1 ½ " needle



Rimadyl 2 mg/lb PO SID on the days injection given, continue as needed for swelling. If there were any microfilaria on the heartworm direct, give doxycycline 10 mg/kg PO SID 28d If dog has any coughing after treatment, prednisone 0.5 mg/kg BID 1st week, 0.5 mg/kg SID 2nd week, 0.5 mg/kg EOD 3rd and 4th weeks and place dog in a small cage or crate for 2 weeks (if dog is still on Rimadyl, discontinue it).

Place sign on cage door dog can only go on leash walks.

Print off heartworm treatment hand-out from veterinarian folder in AW folder and attach it to the dog's record.

Put general note in dog's record and mark as a pop-up when the record is opened that the dog has been treated and how long the dog is on meds and has activity restriction

Place sign on cage door dog can only go on leash walks.

Sedation for Euthanasia

Give acepromazine 25 mg/10 lb and gabapentin 300 mg/10 lb added to canned food the morning euthanasia is scheduled and wait at least 2 hours before performing euthanasia.

Limping

Give carprofen 2 mg/ lb PO SID

Check dog's rectal temperature and for any joint swelling. If temperature is > 102.7° or there is any joint swelling, also give clindamycin 50 mg/10 lb PO BID.

Emaciation

If the dog is weak or depressed, send off a CBC and chemistry profile and feed the following amounts per 10 lb body weight spread out into 4 feedings/day:

- Day 1: Give 1/8 can Urgent Care and small handful of dry puppy food
- Day 2: Give ½ can + 1T Urgent Care and small handful of dry puppy food
- Day 3: Give 1/4 can Urgent Care and handful of dry puppy food
- Day 4: Give 1/3 can Urgent Care and handful of dry puppy food
- Day 5: Give 1/3 can + 1T Urgent Care and handful of dry puppy food

After Day 5, you can decrease the amount of times you feed the dog to 2-3 and increase the volume of food offered as needed.

If the dog is emaciated but is bright and energetic, feed canned and dry food 3 times a day.

Trauma

If possible, give 15 ml/ lb of LRS subcutaneously and 2 mg/ lb of carprofen orally SID and have the dog evaluated ASAP.

Behavior

Anxious Dogs

If a dog will not approach the front of the run after 48 hours in the shelter or if the dog was trapped or brought in on a snare pole, begin gabapentin 10mg/lb PO BID

- No improvement within 24h, add trazadone 4mg/lb PO SID
- No improvement in the next 24h, increase gabapentin to 15-20mg/lb PO BID
- If the dog continues to be fearful, consider euthanasia

Aggressive dogs

If a dog is aggressively barking or growling at the front of the kennel any time after admission, begin gabapentin 15mg/lb PO BID

- No improvement in 24h, add trazadone 6mg/lb PO SID
- No improvement in the next 24h, consider euthanasia at end of stray hold

Vaccination Protocols for Dogs

All dogs are vaccinated on intake unless they appear terminally ill, they are aggressive, or they are current on vaccines. If they are current on vaccines, please enter the information in their record.

Bordetella

If the dog will allow an intranasal injection

3 to 6 weeks of age and booster in 2 weeks

>6 weeks of age single vaccination

Booster in one year

If the dog will not allow an intranasal injection

8 weeks of age and older and booster in 2 weeks

DAPP

- Distemper (CDV)
- Adenovirus-2 (CAV-2/hepatitis)
- Parvovirus (CPV)
- Parainfluenza (CPiV)

4 to 18 weeks of age and booster every 2 weeks until 20 weeks of age (canines have erupted)

20 weeks of age and older single vaccination

Booster in one year -- consider booster in 2 weeks if ill at time of intake

Rabies

12 weeks of age and older (adult incisors have erupted) single vaccination Booster in one year

• Following reconstitution (addition of liquid to the freeze-dried "cake"), vaccine deterioration may happen rapidly, despite refrigeration. It is recommended that reconstituted vaccines refrigerated longer than 1 hr or kept at room temperature for 20 minutes or longer should be properly discarded.

AAHA 2017 Guidelines for Vaccinations in Shelter Housed Dogs

Bordetella

Vaccines	 B. bronchiseptica + canine parainfluenza virus (intranasal) B. bronchiseptica (avirulent, live bacteria); CPiV (MLV) Administer by the intranasal (IN) route. OPTION: some IN products may also contain CAV-2 vaccine.
Initial Vaccination (Dogs ≤18-20 Weeks of Age)	At the time of intake, administer a single intranasal (IN) dose. Vaccines licensed for intranasal use may be administered as early as 3 to 4 wk of age. (Maternally derived antibody does not interfere with mucosal immunity.)
Initial Vaccination (Dogs >18 Weeks of Age)	At the time of intake, administer a single IN dose.
Revaccination (Applies to dogs admitted to Long-Term Housing Facilities)	Where risk of exposure is sustained, administer a single dose every 1 yr.
Remarks	Onset of protective immunity (<i>B. bronchiseptica</i>) has been shown to be as early as 48 to 72 hr following administration of a single intranasal dose. The duration of immunity to <i>B. bronchiseptica</i> based on challenge studies is 12 to 14 mo following administration of a single intranasal dose. The duration of immunity to parainfluenza virus is expected to exceed 1 yr following administration of a single intranasal dose. DO NOT ADMINISTER PARENTERALLY or ORALLY.

DAPP

Vaccines	MLV or Recombinant Canine Distemper Virus+ MLV Parvovirus+ MLV Adenovirus-2
	Administer by the subcutaneous (SQ) route. OPTION: Combination CORE vaccines commonly include parenteral MLV Canine Parainfluenza Virus (CPiV). Recommendations apply whether or not CPiV vaccine is
	included.
Initial Vaccination	Beginning at 4 wk of age, shelter-housed dogs should receive an initial dose at the time of (or before) intake, then one additional dose every 2 to 3 wk until 18–20 wk of age.
(Dogs ≤18-20 Weeks of Age)	Vaccination of dogs prior to 4 wk of age is not recommended.
Initial Vaccination	Administer 2 doses 2 to 3 wk apart with the first dose administered at the time of intake.
(Dogs >18 Weeks of Age)	
Revaccination	Administer a single dose every 3 yr.
Remarks	Parvovirus (CPV): All MLV-CPV vaccines available today are expected to provide immunity from disease caused by any field variant recognized today (including CPV-2b and -2c).
	Canine Adenovirus-2 (CAV2): is primarily intended to protect against the canine infectious hepatitis virus caused by CAV1 (infectious canine hepatitis virus) but also offers protection against the respiratory CAV2 (one of the pathogens associated with canine infectious respiratory disease syndrome). Intranasal vaccination may provide superior protection against respiratory CAV2 exposure compared to parenteral vaccination.
	Intranasal vaccination may provide superior protection against respiratory CPiV exposure compared to parenteral vaccination.
	Following reconstitution (addition of liquid to the freeze-dried "cake"), vaccine deterioration may happen rapidly, despite refrigeration. It is therefore recommended to administer CORE vaccines within 1 hr following reconstitution. It is recommended that reconstituted vaccines held longer than 1 hr should be properly discarded.

Rabies

Vaccines	Rabies virus 1-Yr & 3-Yr labeled rabies vaccines are available. Administer by the subcutaneous (SQ) or intramuscular (IM) route (see Manufacturer's Package Insert for the product selected).
Dogs ≤20 Weeks of Age at the Time of Release	A single dose of rabies vaccine should be administered. Most, but not all, states (in the United States) allow discretion in the use of a 1-Yr or a 3-Yr labeled rabies vaccine when administering the initial dose.
Revaccination (Booster)	The next dose of rabies vaccine should be administered no later than 1 yr from the date the INITIAL DOSE was administered. NOTE: Some states specify a defined time during which the second dose of rabies vaccine must be administered.

Bordetella (injectable)

Optional Vaccines	B. bronchiseptica only (monovalent) Three (3) options available: Parenteral (CAe)
	Administer by the subcutaneous (SQ) route
Dogs ≥18-20 Weeks of Age	Parenteral (SQ): Two initial doses are required 2 to 4 wk apart beginning as early as 8 wk of age.
>20 Weeks of Age	Parenteral (SQ): Two initial doses are required 2 to 4 wk apart.
Revaccination (Applies to dogs admitted to Long-Term Housing Facilities)	Where risk of exposure is sustained, administer a single dose 1 yr following the last dose administered regardless of the type of vaccine used; thereafter, administer a single dose annually where risk of exposure is sustained.
Remarks	The duration of immunity following a single dose of <i>B. bronchiseptica</i> vaccine administered by the IN route is 12 to 14 mo.
	At this time the duration of immunity conferred by the parenteral and the oral <i>B. bronchiseptica</i> vaccine are not known.
	Vaccines listed in this section do NOT contain CPiV vaccine.
	The products listed in this section should only be administered by the route stipulated by the manufacturer.

Vaccination Protocols for Cats

All cats are vaccinated on intake unless they appear terminally ill, they are aggressive, or they are current on vaccines. If they are current on vaccines, please enter the information in their record.

FVRCP

- Feline herpesvirus-1 (feline viral rhinotracheitis/FHV-1)
- Feline calicivirus (FCV)
- Feline panleukopenia (FPV)

4 weeks (1 lb) to less than 12 weeks (3 lb) booster every 2 weeks 12 weeks (3 lb) and older vaccinate once Booster in 1 year -- consider booster in 2 weeks if cat ill at time of intake

Rabies

12 weeks of age and older (3 lb and over) single vaccination Booster in one year

• Following reconstitution (addition of liquid to the freeze-dried "cake"), vaccine deterioration may happen rapidly, despite refrigeration. It is recommended that reconstituted vaccines refrigerated longer than 1 hr or kept at room temperature for 20 minutes or longer should be properly discarded.

Internal parasite treatments

Dogs

Hookworms

Dogs < 4 weeks old pyrantel 0.2 ml/lb PO SID 3d

Dogs > 4 weeks old, Drontal Plus

Roundworms

Dogs < 4 weeks old pyrantel 0.2 ml/lb PO SID 3d

Dogs > 4 weeks old, Drontal Plus

Whipworms

Drontal Plus

Tapeworms

Drontal Plus

Giardia

Metronidazole 15 mg/kg PO BID 7d OR

Panacur 50 mg/kg PO SID 5d

Coccidia

Marquis 0.1 ml/lb PO SID 3d

(Marquis paste is compounded 1:1 with water before dosing)

For dogs >40 lb, TMS 30 mg/kg PO SID 10d

Cats

Profender 0.1 ml/lb topically for all internal worms

Coccidia

Marquis 0.1 ml/lb PO SID 3d

(Marquis paste is compounded 1:1 with water before dosing)

In-house Pharmacy Drugs

<u>Oral</u>		<u>Injectable</u>	
Acepromazine	25mg	Acepromazine	10mg/ml
Amoxicillin	50mg/ml	Baytril	100 mg/ml
Capstar	25-50lb	Cerenia	
Cerenia	24mg	Convenia	
Clindamycin	25mg/ml	DexSP	4mg/ml
	75mg	Diphenhydramine	50mg/ml
	150mg	Diroban	
	300mg	PenG	
Doxycycline	50mg	Reglan	10mg/ml
	100mg	Vit B12	
Drontal	all sizes		
Fortiflora		Ophthalmic/otic	
Gabapentin	300mg	Animax	
Ketoconazole	200mg	Atropine	
Metronidazole	250mg	Ciprofloxacin	
	500mg	Erythromycin	
Mirtazipine		Gentocin	
Onsior	6mg	Idoxiuridine	
Panacur		Neopolybacitracin	
Prednisone	5mg	Neopolybacitracin HC	
Prednisone	10mg	Terramycin	
Prednisone	20mg	*Long acting ear med	ls when donated
Profender	large		
Rimadyl	25mg		
	75mg		
	100mg		
Simparica	all sizes		
TMS	480mg		
Terbinafine	250mg		
Tylan			