



PREVENTIVE HEALTHCARE PROTOCOLS: SIMPLIFIED

SUMMER 2014

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IDEXX



Hills



Petsecure

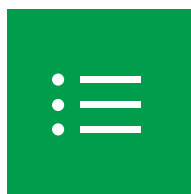


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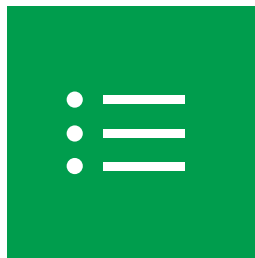
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Summary of Key Points in Feline Preventive Healthcare

Annual and Semi-annual Visits

Recalls should emphasize the importance of regular physical exams and consultations and ensure vaccinations are current for individual patients

Nutritional Assessment

Evaluate diet, weight, body condition score and muscle condition at every visit and determine the cat's ideal weight

Recommend:

- A specific diet
- Amount to be fed
- Feeding frequency

Follow-up at a recheck visit and with a follow-up phone call to assess how cat is performing on recommended diet regime

Behaviour and Environmental Assessments

At each visit ask if the owner has any concerns about litter box use and management, house soiling, scratching and behavior problems. Assess resource availability (number and location):

- Food and water stations
- Toys and perches/resting areas
- Litter box number and location

Pet Insurance

A plan should:

- Require an ongoing veterinarian/client/patient relationship
- Allow pet owners the freedom to choose their own veterinarian
- Be clear about their policy limits, pricing structure, and optional coverage
- Communicate clearly about the fee reimbursement process

Feline Leukemia Virus (FeLV) and Feline Immunodeficiency Virus (FIV) Testing

Testing should be performed for:

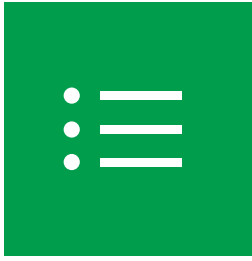
- All kittens
- All cats that are ill, have bite wounds, oral disease, or known exposure to infected cats
- Cats about to be vaccinated for FeLV or FIV
- Cats with ongoing risk (e.g., access to outdoors) should be tested annually

Vaccinations

Should be based on risk assessment, tailored to individual patient

Administer vaccines as follows:

- FvRCP: at or below right elbow
- Rabies: at or below right stifle
- FeLV: at or below left stifle
- Other vaccines not considered necessary for most cats



Summary of Key Points in Feline Preventive Healthcare

Parasite Control

Control and prevention of internal and external parasites is recommended for all cats, regardless of lifestyle

Fleas:

- High-risk cats should receive monthly flea control

Heartworm:

- Preventive protocols should be developed in regions where canine heartworm disease is endemic, and should follow the same schedule used for canine patients
- Testing before administration of prophylaxis is not required

Surgical Sterilization

The Canadian Veterinary Medical Association (CVMA) endorses prepubertal surgical sterilization, typically performed between 6-16 weeks of age

The benefits of early sterilization include:

- Reduced risk of disease
- Shorter surgery times
- Lower complication rates
- Lowered risk for developing mammary neoplasia

Dental Care

- Examine oral cavity, discuss oral health and preventive care at every exam
- Anesthesia is required for a detailed oral evaluation, professional cleaning and dental treatment
- Full-mouth radiographs are recommended for all cats when dental care is being provided

Permanent Identification

(microchip +/- tattoo, collar and tag)

- All cats should be identified; the CVMA recommends using a microchip with ISO technology
- Remind clients to update contact information

Disease Screening

Perform blood tests, urinalyses, blood pressure measurement, fundic examination and radiographs as needed in younger cats, and on a regular basis after 8 years of age

Pain Assessment and Management

Evaluate for the presence of pain and the need for analgesia at every exam and in all hospitalized cats



Kitten Care: The First Year

Healthcare Service	Kitten Care: The First Year
Purpose	While vaccination, deworming and sterilization are important procedures for kittens, the first year is an opportunity to educate and emphasize the importance of preventive healthcare and to establish a lifetime of healthy habits. Discuss weight management, home dental care, nail care, parasite control, the need to observe behaviour at home and the importance of regular veterinary exams, as well as the benefits of pet insurance
Physical exam and consultation	Perform 2 or more times in the first 6 months of life
Pain assessment and management	Evaluate for the presence of pain and the need for analgesia at every exam
FeLV/FIV test	Test all kittens regardless of source or lifestyle
Surgical sterilization	Surgery can be performed following last primary vaccination at about 16 weeks but can be as early as 6 weeks Surgery can also be performed: <ul style="list-style-type: none"> • Before re-homing for rescue organizations • As early as 6-7 weeks in feral kittens; identification such as ear tipping recommended
Disease screening	Conduct blood tests, urinalyses, blood pressure measurement and fundic examination, as needed according to health status
Panleukopenia, herpes virus-1, calicivirus (FVRCP) vaccination	Administer first dose as early as 4-6 weeks Vaccinate every 3-4 weeks until at least 16 weeks of age Administer at or below right elbow Recommended for all cats
Rabies vaccination (as regionally appropriate)	Administer a single dose at not less than 12 weeks of age Administer at or below right stifle Recommended: <ul style="list-style-type: none"> • For cats with outdoor access including balconies • In regions with risk of exposure via wildlife, such as bats, foxes, skunks, etc. • Where required by municipal or provincial by-laws • For cats travelling to other countries

Healthcare Service	Kitten Care: The First Year
Nutritional Assessment	<p>Evaluate diet and feeding practices for cat's life stage, life style and health condition(s)</p> <p>Measure weight, body condition score and muscle condition at every visit; determine cat's ideal weight</p> <p>Make a specific recommendation verbally and in writing for food, dose and frequency</p>
Fecal examinations	<p>Recommended 2-4 times during the first year of life</p> <p>Fecal centrifugation floatation techniques with zinc sulfate or modified Sheather's sugar solution are considered most reliable.</p>
Parasite control	<p>Treat with broad-spectrum parasiticide at 2, 4, 6 and 8 weeks of age or when kittens are first brought home, provide 3 treatments, 2 weeks apart</p> <p>Follow with broad-spectrum monthly parasiticide until 6 months of age</p> <p>At 6 months of age, start a year-round or seasonal protocol with a broad-spectrum monthly parasiticide effective against heartworm, intestinal parasites and fleas based on risk of infection</p>
Feline Leukemia (FeLV) vaccination	<p>Administer first dose as early as 8 weeks of age</p> <p>Revaccinate 3-4 weeks later</p> <p>Administer at or below left stifle</p> <p>All kittens should be vaccinated, even if intended to be indoors, and boosted at one year</p>
Grooming and nail care	<p>Demonstrate nail trimming procedure and trim nails at every visit</p> <p>Discuss the importance of scratching behavior and locations and types of scratching posts</p> <p>Discuss importance of regular brushing or combing, especially for long-haired cats</p> <p>Onychectomy should be considered a last resort</p> <p>Tendonectomy is never recommended</p>
Permanent identification (microchip +/- tattoo, collar and tag)	<p>Recommend at least one form of permanent identification combined with collar and tag</p> <p>Record the ID number in the medical record</p> <p>The CVMA recommends using a microchip with ISO technology</p>



Adult Cats: 1-8 Years

Healthcare Service	Adult Cats: 1-8 Years
Purpose	During the young adult years, emphasize the importance of weight management, dental care and other preventive healthcare measures. Behaviour counselling, including proper litter box management and meeting all environmental needs, should continue to be a part of every veterinary visit
Physical exam and consultation	Perform at least once a year
Pain assessment and management	Evaluate for the presence of pain and the need for analgesia at every exam
FeLV/FIV test	Test all sick, at-risk and cats of unknown status
Disease screening	Conduct blood tests, urinalyses, blood pressure measurement and fundic examination if cat is ill or injured
Panleukopenia, herpes virus-1, calicivirus (FVRCP) vaccination	Administer a booster one year after initial series in kittens If no previous vaccination: Administer first dose, booster 3-4 weeks later Subsequent inoculations: Revaccinate every 3 years unless a high risk of exposure warrants more frequent vaccinations (e.g., frequent boarding) Administer at or below right elbow Recommended for all cats
Rabies vaccination (as regionally appropriate)	Administer a booster one year after initial kitten vaccination If no previous vaccination: Administer a single dose Subsequent inoculations: According to manufacturer's guidelines Administer at or below right stifle Recommended: <ul style="list-style-type: none"> • For cats with outdoor access including balconies • In regions with risk of exposure via wildlife, such as bats, foxes, skunks, etc. • Where required by municipal or provincial by-laws • For cats travelling to other countries
Nutritional Assessment	Evaluate diet and feeding practices for cat's life stage, life style and health condition(s) Measure weight, body condition score and muscle condition at every visit; determine cat's ideal weight Make a specific recommendation verbally and in writing for food, dose and frequency

Healthcare Service	Adult Cats: 1-8 Years
<p>Fecal examinations</p>	<p>Evaluate at least annually</p> <p>Fecal centrifugation floatation techniques with zinc sulfate or modified Sheather's sugar solution are considered most reliable.</p> <p>Purpose after 1 year of age is to assess compliance with regular administration of broad-spectrum parasiticide</p>
<p>Parasite control</p>	<p>Year-round or seasonal monthly administration of a broad-spectrum parasiticide effective against heartworm, intestinal parasites and fleas should be instituted for cats based on their risk of infection</p> <p>If cat is not receiving monthly broad-spectrum parasiticide, prophylactic deworming 2-4 times per year is recommended</p>
<p>Feline Leukemia (FeLV) vaccination</p>	<p>Administer a booster one year after initial kitten series</p> <p>If no previous vaccination: Administer a first dose, followed by booster 3-4 weeks later</p> <p>Subsequent inoculations: High-risk cats: Revaccinate every year Low-risk cats: Revaccinate every 2 years Cats at no risk: Revaccination not needed</p> <p>Administer at or below left stifle</p> <p>All kittens should be vaccinated, even if intended to be indoors, and boosted at one year</p> <p>High-risk cats: Free-roaming cats, those with cat bite injuries, or cats living with FeLV positive cats</p> <p>Low-risk cats: Those that go to boarding facilities, cats with limited outdoor access, cats with minimal risk of contact with other cats, indoor cats with housemates that go outside</p> <p>Cats at no risk: Indoor-only single cat or indoor cats living with other cats of known negative FeLV status</p>
<p>Grooming and nail care</p>	<p>Demonstrate nail trimming procedure and trim nails at every visit</p> <p>Discuss the importance of scratching behavior and locations and types of scratching posts</p> <p>Discuss importance of regular brushing or combing, especially for long-haired cats</p> <p>Onychectomy should be considered a last resort</p> <p>Tendonectomy is never recommended</p>
<p>Permanent identification (microchip +/- tattoo, collar and tag)</p>	<p>Scan the cat each visit to verify the location and function of microchip, update the owner's contact information in the microchip database</p>



Mature & Senior Cats: 8+ Years

Healthcare Service	Mature & Senior Cats: 8+ Years
Purpose	<p>Screening for common diseases such as hyperthyroidism, chronic kidney disease, arthritis, and diabetes is very important in this age group. All older cats should be carefully assessed for signs of pain on a routine basis</p> <p>Because immunosenescence occurs with age and can blunt established immunity, vaccines should not be allowed to lapse in older cats</p>
Physical exam and consultation	Perform at least twice yearly
Pain assessment and management	Evaluate for the presence of pain and the need for analgesia at every exam
FeLV/FIV test	Test all sick, at-risk and cats of unknown status
Disease screening	<p>Recommended at least annually:</p> <ul style="list-style-type: none"> • Blood pressure measurement • Fundic examination • Serum chemistry panel, complete blood count, T4 • Urinalysis (+/- culture, urine protein:creatinine ratio as needed) • Survey chest and abdominal radiographs
Panleukopenia, herpes virus-1, calicivirus (FVRCP) vaccination	<p>If no previous vaccination: Administer first dose, booster 3-4 weeks later</p> <p>Subsequent inoculations: Revaccinate every 3 years unless a high disease risk warrants more frequent vaccinations</p> <p>Administer at or below right elbow</p> <p>Recommended for all cats</p>
Rabies vaccination (as regionally appropriate)	<p>If no previous vaccination: Administer a single dose</p> <p>Subsequent inoculations: According to manufacturer's guidelines</p> <p>Administer at or below right stifle</p> <p>Recommended:</p> <ul style="list-style-type: none"> • For cats with outdoor access including balconies • In regions with risk of exposure via wildlife, such as bats, foxes, skunks, etc. • Where required by municipal or provincial by-laws • For cats travelling to other countries

Healthcare Service	Mature & Senior Cats: 8+ Years
Nutritional Assessment	<p>Evaluate diet and feeding practices for cat's life stage, life style and health condition(s)</p> <p>Measure weight, body condition score and muscle condition at every visit; determine cat's ideal weight</p> <p>Make a specific recommendation verbally and in writing for food, dose and frequency</p>
Fecal examinations	<p>Evaluate at every exam</p> <p>Fecal centrifugation floatation techniques with zinc sulfate or modified Sheather's sugar solution are considered the most reliable</p> <p>Purpose after 1 year of age is to assess compliance with regular administration of broad-spectrum parasiticide</p>
Parasite control	<p>Year-round or seasonal monthly administration of a broad-spectrum parasiticide effective against heartworm, intestinal parasites and fleas should be instituted for cats based on their risk of infection</p> <p>If cat is not receiving monthly broad-spectrum parasiticide, prophylactic deworming 2-4 times per year is recommended</p>
Feline Leukemia (FeLV) vaccination	<p>If no previous vaccination: Administer a first dose, followed by booster 3-4 weeks later</p> <p>Subsequent inoculations: High-risk cats: Revaccinate every year Low-risk cats: Revaccinate every 2 years Cats at no risk: Revaccination not needed</p> <p>Administer at or below left stifle</p> <p>High-risk cats: Free-roaming cats, those with cat bite injuries or cats living with FeLV positive cats</p> <p>Low-risk cats: Those that go to boarding facilities, cats with limited outdoor access, cats with minimal risk of contact with other cats, indoor cats with housemates that go outside</p> <p>Cats at no risk: Indoor-only single cat or indoor cats living with other cats of known negative FeLV status</p>
Grooming and nail care	<p>Demonstrate nail trimming procedure and trim nails at every visit</p> <p>Discuss the importance of scratching behavior and locations and types of scratching posts</p> <p>Discuss importance of regular brushing or combing, especially for long-haired cats</p> <p>Onychectomy should be considered a last resort</p> <p>Tendonectomy is never recommended</p>
Permanent identification (microchip +/- tattoo, collar and tag)	<p>Scan the cat each visit to verify the location and function of microchip, update the owner's contact information in the microchip database</p>

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