



Mature & Senior Cats: 8+ Years

Healthcare Service	Mature & Senior Cats: 8+ Years
Purpose	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 Because immunosenescence occurs with age and can blunt established immunity, vaccines should not be allowed to lapse in older cats
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	Recommended at least annually: <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	If no previous vaccination: Administer first dose, booster 3-4 weeks later Subsequent inoculations: Revaccinate every 3 years unless a high disease risk warrants more frequent vaccinations Administer at or below right elbow Recommended for all cats
Rabies vaccination (as regionally appropriate)	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

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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>