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# Best Practices for Shelters Provided by the VVMA Animal Welfare Committee Updated December 2023

The VVMA recognizes that Vermont has many diverse communities, and thereby diverse animal shelters with varying budgets and mission/core values. These are general guidelines for the timing of medical and surgical procedures for shelter animals and should be adjusted to suit individual shelters, their communities, and individual animal needs.

**Guidelines for Standard of Care in Animal Shelters** (including relevant information for rescues) provides a more comprehensive set of guidelines for shelter animal care: <u>https://jsmcah.org/index.php/jasv/issue/view/2</u>

## Upon Arrival

Stray or relinquished animals should be examined by trained shelter personnel. It is ideal to have a quarantine/isolation area for any sick animals.

- A. Scan for microchip. Initiate owner tracking for stray pets who have microchips. Record microchip number for relinquished pets for future use.
- B. Assess general physical conditions.
  - 1) Appears healthy
  - 2) Needs medical care
    - a) Critical: any life-threatening, painful, or serious conditions needing immediate treatment. These include weakness, dehydration, emaciation, low or high body temperature, seizures or other neurological signs (handle with caution as animals could potentially have rabies), severe wounds (see also note below concerning wounds), bleeding, difficulty breathing, eye injury, bloated abdomen. Contact a veterinarian for further assessment and plan for treatment/care of the animal ASAP.
    - b) Non-critical: any other non-life-threatening condition needing treatment including fleas, ear mites, ear infections, skin abnormalities,

coughing, sneezing, eye or nasal discharge, skin abnormalities, minor wounds, dental disease. Treat any of these more minor illnesses to maintain the comfort of the animal and minimize the spread of contagious diseases to healthy shelter animals. Standardized, written treatment protocols designed by a veterinarian allow staff to treat these common, minor conditions while the animals are in the shelter's custody.

- C. Consult and follow Vermont State Rabies Guidelines for any animal with bite wounds of unknown origin.
  - With unknown origin wounds and no vaccine history, the animal should be held in quarantine for the required stray period and then euthanized, or held for 4-6 months with permission from the VT State Public Health Veterinarian (See <u>https://www.healthvermont.gov/diseasecontrol/zoonotic-diseases/rabies</u>
  - 2) If a human bite has occurred, the shelter should contact the VT Rabies Hotline (1-800-4-RABIES) for further instructions.
  - 3) Shelter personnel who have not been vaccinated for rabies should not handle these animals.
- D. Perform routine medical procedures under the guidance of a veterinarian
  - Deworm dogs and cats with a de-wormer effective against roundworm such as pyrantel pamoate (1ml per 10# body weight or at a dose prescribed by a veterinarian), upon arrival and at least once 2 weeks later. For dogs and cats in share areas, dose should be repeated every 2 weeks for the duration of their stay.
  - Treat ectoparasites such as fleas, ear mites, and mange mites per veterinarian protocol. Or treat endo- and ectoparasites together with products such as Advantage Multi or Revolution.
  - 3) Administer vaccinations ASAP to healthy animals:
    - a) Cats: feline distemper/respiratory viruses combination (modified live virus injectable +/- intranasal). If using intranasal vaccine, also include injectable feline distemper vaccination
    - b) Dogs: distemper/parvo/adenovirus combination (modified live virus injectable); Bordetella/parainfluenza (intranasal and/or injectable)

#### II During Shelter Stay:

A. The behavior of each animal should be monitored frequently during the shelter stay, and appropriate environmental enrichment and behavioral intervention provided. Individual animal welfare and potential for adoption

should be re-assessed on a routine basis.

- B. Re-assess the physical health status and age of the animal for chronic or debilitating conditions. Will these conditions be manageable by a new owner? Consider here also the animal's long-term quality of life.
- C. Perform blood test for life-threatening/limiting disease and apply shelter policy as to whether an animal that tests positive for the disease will be treated, euthanized, or adopted as a 'special needs' pet, with the new owner accepting responsibility for treating or managing the condition.
  - 1) Cats: leukemia +/- FIV
  - 2) Dogs: heartworm. Dogs heartworm negative should be given a monthly heartworm prevention for the duration of their stay at the shelter.
- D. Repeat deworming and consider further assessment by a veterinarian if any signs such as diarrhea, vomiting, or weigh loss occur.
- E. Perform any indicated medical treatments or behavioral interventions on animals, under veterinary guidance, deemed otherwise suitable for adoption.
- F. Provide appropriate environmental enrichment to reduce stress and allow opportunity to express normal behaviors.

#### III Prior to Adoption

- A. Surgical spay or neuter should be performed.
- B. Rabies vaccination should be administered to all cats and dogs 12 weeks of age or older, unless a valid rabies vaccination certificate was provided for a relinquished animal. This must be done by, or under the supervision of, a Vermont-licensed veterinarian.
- C. A microchip and/or a permanent spay/neuter mark should be placed in/on each animal.
- D. Each animal should have an examination by a veterinarian so that any condition identifiable by physical examination can be fully disclosed to a new owner. Such conditions might include abnormal weight, dental disease, abnormal heart or lung sounds, and arthritis as well as behavioral abnormalities such as anxiety or aggression.
- E. The behavior of each animal should be monitored frequently during the shelter stay, and regularly re-assessed for adoptability or need for behavioral intervention.

## IV Additional Management Suggestions

- A. Follow-up each adoption with a phone call or written survey
- B. Have policies that reflect the temporary nature of shelter housing. Long-term

cage life is not humane for animals.

C. Additional "Best Practices" materials are available on the VVMA website and on the Vermont Humane Federation website.

#### Medical Flow Chart for Dogs and Cats Entering the Shelter

**UPON ARRIVAL** 

<u>\_\_\_\_Scan for Microchip</u>

\_\_\_\_General HealthAssessment

\_\_\_\_\_ Healthy

\_\_\_\_\_ Critical Illness

\_\_\_\_\_ Non-Critical Illness

\_\_\_\_\_ Wounds

\_\_\_\_\_ Routine Treatments

\_\_\_\_\_ Deworming

\_\_\_\_\_ Ectoparasites

\_\_\_\_\_ Initial Vaccinations

## **DURING SHELTER STAY**

- \_\_\_\_\_ Behavioral Assessment
- \_\_\_\_\_ Chronic Conditions Assessment
- \_\_\_\_\_ Heartworm/Leukemia Testing
- \_\_\_\_\_ Ongoing Parasite Treatment
- \_\_\_\_\_ Medical/BehavioralTreatment/Intervention (If Needed)

## **PRIOR TO ADOPTION**

- \_\_\_\_\_ Spay/Neuter
- \_\_\_\_\_Rabies Vaccination (if over 12 weeks)
- \_\_\_\_\_Place Microchip
- \_\_\_\_\_ Pre-Adoption Veterinary Exam (If None Prior)

## **POST ADOPTION**

\_\_\_\_ Follow-Up