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# **PAST PROGRAM FOSTER MANUAL**



**People and Animals Safe Together**

**Animal Refuge League of Greater Portland  
Westbrook, Maine**

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## Welcome!

We are thrilled to welcome you to the PAST Foster Program. Your efforts allow us to provide a peaceful temporary home for animals fleeing from domestic violence situations. By opening your home to these pets, you are giving them and their families a chance at a fresh start. The owners of these animals can concentrate on settling into a new life knowing that their pets are safe.

We feel it is important for potential foster families to understand where the animals and families who are entering this program are coming from. This manual will give you some information on domestic violence as well as the link that exists between animal cruelty and human violence. The manual will also take you through the steps of taking a foster animal into your home and some general medical and behavioral information about cats and dogs.

The foster program is emotionally demanding and time consuming, and we recognize that it is not for everyone. By attending an orientation session, you will be able to determine if this form of volunteerism fits your lifestyle and time commitment.

We hope you find fostering animals to be a rewarding process. One of our hopes is that you and your family take away a feeling of pride, accomplishment, ownership and knowledge that you have helped raise the level of animal care and understanding on an individual and community level.

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## Introduction to the Participating Organizations

### **Family Crisis Services**

Family Crisis Services is a domestic violence project which serves victims and survivors in Cumberland and Sagadahoc Counties in Maine. FCS strives to provide programs which focus on individual advocacy and safety for battered women and their children, such as:

- 24-Hour Hotline
- Confidential Shelter with on-site Advocates
- On-site Children's Advocate
- YAAPP- Young Adult Abuse Prevention Program
- Elder Abuse Advocate
- Incarcerated Women's Advocate
- 3 Outreach Offices- Portland, Bridgton and Brunswick- to help with filing Protection from Abuse Orders and court support
- Volunteer Coordinator
- Support Groups
- Workplace Educator
- In-service Training and Education
- Anti-stalking kits and 911 cell phones
- Safety Planning

### **The Linkage Project**

#### **The Animal Refuge League**

The Animal Refuge League of Greater Portland (ARL) is a private nonprofit animal shelter established in 1911. The vast majority of our funding is made through the generosity of the general public.

Our mission is to provide temporary care and shelter for stray, abandoned and relinquished animals, and to place as many as possible into responsible and caring homes. The Animal Refuge League also works to create awareness and support for the humane treatment of all animals and to end animal overpopulation through education and the promotion of spaying and neutering.

## Domestic Violence

*One out of every four American women report that they have been physically abused by a husband or boyfriend at some point in their lives.*

### WHAT IS DOMESTIC VIOLENCE? DEFINING THE ASPECTS OF ABUSE

#### Definition of Domestic Abuse

- A pattern of coercive control one person exercises over another in an intimate relationship through the use of intimidating, threatening, harmful or harassing behavior.
- These tactics or actions *which are chosen and planned*, can be physical, sexual, emotional and psychological.
- It is important to note that the abuse is both purposeful and chosen. An abuser is not “out of control” – the abuser is trying to control the victim.
- Domestic Violence is a *choice* someone makes to control someone else.

#### What domestic violence is *NOT*

- **Anger/loss of personal control-** Anger is a common emotion, abuse is an action with a specific purpose – to gain control.
- **Alcohol/drugs-** Alcohol is the ‘gasoline’ that creates the explosion in the ‘campfire’ - Take away the gasoline, the campfire is still there. Remember, many people who abuse substances do not choose to be violent.
- **Personal, financial, or work stress-** May co-occur with DV, but doesn’t alter belief system.
- **Bad childhood-** There are many people who grow up in abusive homes who become non-abusive adults.
- **Poor communication skills-** Abusers often communicate well in other areas of their life and may even appear to be outstanding citizens in their communities.

### DYNAMICS OF ABUSE: THE POWER AND CONTROL WHEEL

This wheel demonstrates a compartmentalized view of the tactics of abuse laid out in the definition section of this manual. Abusive relationships do not have to contain all of these sections in order to be considered abusive, however many people who have experienced an abusive relationship can identify with them all.



**WHY DO THEY GO BACK? EXAMINING THE RISK FACTORS FOR WOMEN IN ABUSIVE RELATIONSHIPS**

*On average, a woman is battered seven times before she reaches out the first time and will try to leave seven times before she leaves for good.*

**Some common risks that can occur if a woman remains in an abusive relationship:**

- Injury- both physical and emotional
- Death
- Child Abuse
- Loss of children
- Modeling behavior to children
- Health- both physical and mental
- Depression
- Suicide
- Homicide
- Poverty
- Loss of :
  - Housing
  - Family
  - Friends
  - Job
  - Credibility
  - Self

**Common risks that can occur when a woman leaves an abusive relationship:**

- Increased risk of injury- both physical and emotional
- Increased risk of injury or neglect to pets
- Increased risk of death
- Child Abuse- unsupervised visits
- Loss of children/ Risk of kidnapping children
- Modeling behavior to children- bringing children into a shelter
- Health- both physical and mental
- Depression
- Suicide
- Increased risk of homicide- (Domestic abuse homicides continue to account for 50% or more of all homicides in Maine)
- Poverty
- Increased chance of being stalked
- Loss of:
  - Stable housing
  - Family
  - Friends
  - Job
  - Community support
  - Financial stability
  - Childcare
  - Transportation
  - Credibility
  - Self

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**WHAT YOU CAN DO TO HELP: VOLUNTEERING WITH THE PAST PROGRAM**

Women who are in an abusive relationship often have trouble leaving their homes and coming into our confidential shelter due to the lack of safe places to house their pets while they are with us. Having the piece of mind that their family pets will be safe and well-cared for helps ease their transition through this already difficult time. Having a program such as this one allows Family Crisis Services' advocates to better serve the women and children they work with by having an option in their safety plan which includes placing their pets in a safe, confidential location.

**SOME IMPORTANT THINGS TO CONSIDER: SAFETY PLANNING FOR VOLUNTEERS**

*While we do our best to ensure the safety of all our volunteers, here are a few key safety practices to be aware of:*

- Make your volunteer position with the PAST program known only to those people you feel are safe.
- Keep all information regarding any resident you may have confidential to everyone, including those people you feel may be safe.
- If you are fostering pets and any unknown people contact you do not hesitate to call the police (this includes any unknown people on your premise).
- Call the Family Crisis Services 24-hour hotline if any emergencies arise during your foster care time or if you have any reasons for concern.

**874-1973 or 1-800-537-6066**

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## **Understanding the Link between Animal Cruelty and Domestic Violence**

If you are becoming a volunteer foster home for this program, then you probably already have some awareness of the link between animal cruelty and human violence. There are, however, some compelling studies that illustrate this important link.

In the United States, 65% of households include pets and 75% of households with children have pets. In a 2002 survey by the American Veterinary Medicine Association, 51% of respondents considered their pet as a companion and 47% thought of their pet as a family member. There is no denying that pets are part of the family and, since they are part of the family, they are part of the family dynamics.

When violence occurs in a household that violence is likely to be towards pets as well as family members. In a study of Utah shelters, 70% of the women reported that the family pet had been threatened or harmed with 54% reporting that a pet was actually injured or killed. A batterer uses the family's love of their pets to exert power and control within the family, often to prevent the woman from seeking safety. Women who are abused have also reported a reluctance to leave a pet in an abusive household – thus preventing her from seeking safety.

This violence impacts children and their treatment of pets too. In a study of households with confirmed physical abuse of a child, 88% reported animal abuse. When children see or experience this kind of violence, they can react in various ways. One way can be to mirror the abuse of the home by becoming abusive to animals. Children may get the sense that they, like the pet, are expendable. Children also get desensitized to abuse and feel that it is simply a normal expected part of family life. Exposure to animal cruelty can have ramifications on a child's development and behavior. The damage to children who witness or experience abuse can lead to lifelong difficulties. For women who are in abusive relationships who have children and pets, the need to seek safety for everyone's benefit is especially urgent. When there is violence in a household, everyone gets hurt.

For animal lovers, it may be hard to conceive of a household that is abusive to pets. There are many reasons why someone could be cruel to animals. In domestic violence situations it is about the abuser exerting power and control within the household.

The PAST program when paired with the Families Crisis Services provides women with an opportunity to seek safety and, when needed, shelter for themselves, children and pets. This program recognizes the link between domestic violence, child abuse and animal cruelty. We welcome you to the circle of friends who are making a difference!

## Preparation for Becoming a Foster Home

**\*\*Please refer to the Appendix for a copy of the PAST Program Foster Family Job Description and Responsibilities. This document will outline your responsibilities and expectations as a Foster Family.\*\***

### HOW WE PLACE ANIMALS INTO FOSTER CARE

After the animal has been processed into the ARL system, the ARL staff will test, vaccinate, and/or treat the following:

For cats:

- Feline Leukemia and feline AIDS by means of a blood test. Only those who test negative are made available for foster care
- Rabies
- Panleukopenia/URI
- Worming
- Flea treatment or preventative (usually seasonal)
- Ear cleaning or ear mite treatment

For dogs:

- Heartworm and Lyme Disease by means of a blood test
- Rabies
- Distemper
- Kennel cough
- Worming
- Flea treatment or preventative (usually seasonal)

Once an animal is deemed healthy and in need of foster care, we will call as many “vacant” foster homes as possible. We ask that these calls be returned as quickly as possible, even if you are unable to foster at the time of the call.

Once you agree to care for the animal(s):

1. Paperwork is prepared - as are the animals -for foster care.
2. When you arrive at the shelter, you will sign a Foster Care Agreement and pick up the animals. (Normally, we ask that animals be picked up that same day, but we can be flexible within a 24-hour period.)
3. Any special food and medication will be prepared for you, and directions will be sent home.
4. You will be provided with details on any veterinary checkup or spay/neuter appointments already scheduled. An approximate date is set for the return of the animal(s) to the shelter, although this will remain flexible due to the health and availability of surgery date.
5. If you cannot fulfill the entire foster assignment due to an unforeseen emergency, contact us immediately so that other arrangements can be made for the animal. Under no circumstances can you decide mid-assignment that you no longer want to foster and drop animals off at the shelter. If you have any misgivings about fostering, we ask that you hold off on taking any animals.
6. On the scheduled surgery date, you are responsible for delivering the animal to the designated veterinary hospital. All drop-off times are in the morning with pickup times in mid- to late-afternoon.
7. In order to have available cage space and coordinate pick up time with the animals’ family, we schedule the return of animals to the shelter.
8. Length of foster assignment is 4 weeks. There may be instances where the animals’ family may request more time. If you are able to provide care for a longer period and everyone else is in agreement, an extension may be granted.

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9. In the event that the family is unable to recover ownership of the pet(s), the ARL will take ownership of the animal(s). We try to be very respectful of the attachment foster families make to the animals in their care, and understand that a strong bond forms quickly. However, for those that become the property at the end of the foster assignment, the Animal Refuge League foster staff must, in some cases, make decisions about humanely ending the life of an animal when they fail to thrive or have health or behavior issues beyond the scope of our resources.
10. **Where the ARL will make every effort to ensure the safety of every animal, it is also important to note that there may be instances where the foster animal will be returning to the original situation.**

## **ARL OWNERSHIP STATEMENT:**

The ARL maintains ownership of all animals in foster care at all times. The ARL reserves the right to reclaim an animal from foster volunteers at any time during the fostering period. Foster volunteers will be informed of the reason(s) why the animal(s) need to be returned and asked to bring them to the shelter as quickly as possible. In extenuating circumstances, the ARL staff will retrieve animal(s) directly from a foster home for return to the shelter.

## **ANIMAL-PROOFING YOUR HOUSE**

Animals, especially young ones, are inquisitive creatures. To protect your foster animal in his/her new environment and to safeguard your belongings, please take the time to animal-proof your house. Think of this as bringing home a two-year-old child – you have to be planning one step ahead of them!

### **Kitchens/Bathrooms:**

- Use childproof latches to keep little paws from prying cabinets open.
- Keep medications, cleaners, chemicals and laundry supplies on high shelves.
- Remove razors and sharp items from counter tops and sinks.
- Be aware that everyday human medications can be lethal to animals, even in tiny amounts.
- Keep trashcans covered or inside a locked cabinet.
- Check for and block any small spaces, nooks, or holes inside cabinets or behind washer, dryer or refrigerator units.
- Make sure windows are closed and screens securely fastened.
- Make sure a cat/kitten hasn't jumped into the washer or dryer before you turn it on.
- Keep food out of reach (even if the food isn't harmful, the wrapper could be).
- Keep toilet lids closed.

### **Living/Family Room:**

- Place dangling wires from lamps, VCR, TV, stereo and phones out of reach.
- Keep kids toys put away when not in use.
- Put away fragile knickknacks until cats or kittens have the coordination and/or understanding not to knock them over.
- Block all those places where the vacuum cleaner doesn't fit, but a small kitten could.
- Remove all dangerous items like string, yarn, pins and thumbtacks.
- Move houseplants, which can be poisonous, out of reach, including hanging plants that can be jumped onto from other nearby surfaces. (See section on poisonous plants for specifics)
- Be careful not to close animals into closets or drawers.
- **Take great care with reclining chairs! Kittens have been severely injured or killed when a chair was reclined or moved into the upright position after a kitten had hidden inside!**
- Make sure all heating/air vents have a cover.
- Put all sewing and craft notions away, especially thread and needles.
- Secure aquariums or cages that house small animals such as hamsters or fish to prevent harm to another animal.
- Keep all cigarettes or cigars safely away from animals, as they can be lethal.

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**Garage: (Although foster animals will not be in the garage, the following tips will help keep your animals and those of your neighbors safe!)**

- Move all chemicals to high shelves or a secure cabinet.
- **Clean up all antifreeze from floor and driveway, as one taste can be fatal to an animal.**
- Bang on your car hood to ensure that your animal (usually a cat or kitten) or a neighbor's cat has not sought the warmth of the engine for a nap.

## **Bedrooms:**

- Keep laundry and shoes behind closed doors as drawstrings and buttons can mean a trip to the emergency clinic.
- Keep any medications, lotions or cosmetics off accessible surfaces, such as the bedside table.
- Move electrical and phone wires out of reach of chewing.
- Take care to put contact lenses away from curious paws.

*Animal-Proofing Your House: Inspired by the American Humane Association, 63 Inverness Drive East, Englewood, CO 80112 [www.aha.org](http://www.aha.org)*

## **SUGGESTIONS ON CLEANING PROCEDURES:**

The most common organisms we deal with in the shelter environment are viruses, bacteria, parasites and fungi. When housing an animal it is important to consider all objects he or she may have contact with and disinfect them accordingly. This will help protect your animals and future foster animals. While all surfaces may not be able to be cleaned, the simple act of decreasing the number of environmental pathogens through washing and/or vacuuming helps.

In order to decide on the effectiveness of a particular cleaner, it is important to determine the active ingredients, strength and **contact time**. Chemical disinfectants are grouped based on their properties.

- **Soluble alcohols:** the alcohol is effective against viruses and bacteria but not fungi. Pine Sol is an alcohol and detergent cleaner.
- **Halogens:** these are effective against viruses, bacteria, parasites and fungi. Bleach is an example of a halogen.
- **Phenolics:** phenolics are weakly effective against viruses and poor against fungi. Many animals have an adverse reaction to phenolics, especially those with upper respiratory illnesses and sensitive systems, such as rabbits. Lysol is an example of a phenolic.
- **Detergents:** the mechanical action of scrubbing with a detergent is effective for many bacteria.

When using bleach:

- Recommended dilution is 1 part bleach to 32 parts water
- Recommended contact time is 10 minutes
- More is **not** better, and contact time is crucial!
- Other recommendations on strength and contact time can be obtained from the manufacturer

Some useful websites are:

[www.pinesol.com](http://www.pinesol.com),  
[www.cloroxhome.com](http://www.cloroxhome.com),  
[www.simplegreen.com](http://www.simplegreen.com),  
[www.ddfl.org/behavior/cleaning.htm](http://www.ddfl.org/behavior/cleaning.htm)

With the non-toxic, environmentally friendly products like Simple Green, it is important to read the labels. It is not a disinfectant but the company does make Simple Green D, which is. This also applies to newer products including Clorox wipes. Many people assume that bleach is an ingredient in this product, but it is not!

Products like Febreze are generally safe to use in a home with animals, although some animals can have allergic reactions. Use these products with discretion.

Parasites and their eggs are difficult to deal with because many are very resistant to cold and heat and can survive for years in the soil. The most effective way to deal with parasites in the yard or litter box is to clean up after an animal as often as possible.

When using cleaning products, especially around birds, young animals and ill animals, be aware of ventilation, and not allowing them to walk on freshly cleaned surfaces. Most of these products will irritate paws, eyes, nose and mouth.

## **FOOD**

Please feed a **high quality food with minimal food coloring and additives**. The following are good choices: Iams, Wellness, Science Diet, Walthams, Eukanuba, Nutro

The rule of thumb is “the browner the better”. Additives and food coloring can cause stomach upset and diarrhea.

There may be diarrhea when changing to a new food or from the stress of moving to a new environment.

## **PREPARING FOR CAT**

Before picking up your foster cat:

1. Select a room where the cat(s) can have peace and quiet.
2. Place fresh water and food in the room.
3. Set up at least one litter box (more if you’re bringing home multiple cats).
4. Add blankets and toys to create a welcoming, fun environment.

## **PREPARING FOR DOG**

Before you pick up your foster dog:

1. If your foster dog is crate trained, you will need to determine where the crate will be placed. If he is not crate trained, a room should be designated for the dog to be sequestered when you are not home or unable to supervise.
2. If you are using a room, make sure that it is completely doggie-proof. (Refer to “Animal Proofing your Home” section.)
3. Your foster dog may come with his own bed and toys. If he does not, you will need to designate a sleeping place for him (maybe even his crate); an old blanket will do. Make sure not to move any of your own pets’ things to make room for your foster pets. If your dog does not come with his own toys, he should have his own (not your dog’s). Make sure to have a variety, including some to chew! (See *Open Paw’s* “The First Two Weeks with Your New Dog” and “Dog Toys and How to Use Them” in the Appendices section for more about toys.)

## Bringing Home Your Foster Animal(s)

### **BRINGING HOME YOUR FOSTER CAT**

Your foster animal(s) has finally arrived, now what?! Here are some steps to follow to reduce the stress on your new friend:

1. While still in the carrier, take your new friend to the prepared room and close the door
2. Open the carrier door – **do not reach in and pull the cat/kitten out!**
3. Sit quietly and let the cat/kitten come out of the carrier and explore on their own timetable
4. Do not introduce any other people or companion animals at this time
5. When the animals look a bit settled, leave the room and give them privacy
6. Check in periodically to get acquainted – move slowly and be gentle

Soon enough the cats or kittens will begin to feel comfortable and will find their favorite spots to sleep and begin to play. Take pictures, play with them, nap with them, enjoy their company, get to know their personality – each one is different!

Once, you're all settled in, consult their medical history and call the shelter to schedule the next appointment for vaccines, boosters or worming. Please do not just "show up". We don't like to keep fosters waiting, so please make an appointment.

### **BRINGING HOME YOUR FOSTER DOG**

If you have other pets in the home, read the sections on introducing foster dogs below.

The following is edited from *Open Paw's* "Your First Two Weeks with Your New Dog". (The entire article can be found at in the Appendices Section):

1. Teach your foster dog the rules of the house from the beginning. Resist the urge to give him a few days to unwind.
2. Stick to a consistent routine of feeding, toilet time (see #5), play/exercise time, etc.
3. Try not to overwhelm your foster dog with too much activity during the initial adjustment period. Limit introductions to new people.
4. Keep the foster dog confined (to crate or room) or supervised at all times. This is the best way to keep your new friend (and house!) out of trouble.
5. Immediately show your dog his designated toilet area. Take him there once an hour, every hour on leash (except overnight). Praise and give food rewards when he relieves himself. Allow supervised free time only after he has relieved himself.
6. If you have other animals, feed them in separate rooms from your foster dog

### **INTRODUCING FOSTER CAT TO RESIDENT CAT**

It may be best to keep your foster cat(s) separated from your own pet(s). However, if you do introduce them into your household, use the following guidelines:

1. Confine your new cat for at least a few days. Make sure to spend time socializing with the foster cat while in isolation. Your resident pet will be able to smell the new cat on you and this will help them to get used to the newcomer.
2. Spend special quality time with your resident pet to relieve anxiety.
3. You can feed the guest and your resident pets on each side of the door where your foster cat is confined. This will help each associate the new smells with something good.
4. After a few days, confine your resident pet and allow the newcomer to explore the rest of the house for a brief period of time. Stay nearby to provide comfort for the foster cat. Do this a few times, allowing for longer periods outside the confined area. You can also put your resident animal in the room where your foster cat has been staying for her to become more familiar with your foster cat's smell.
5. When all animals are appearing comfortable, you can try a brief meeting face to face with free roam of the house. An introduction at feeding time may help to relieve tension and provide a positive association, but place food dishes a comfortable distance apart.

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6. Continue to make a few short introductions. Never leave the new animals alone together until you are *absolutely* sure they are *completely* comfortable with each other.
7. There is bound to be some amount of hissing. Be aware of body postures to watch for signs of anxiety and/or aggression. (See section on Understanding Body Language) If there is fighting, confine each animal, and go back to the prior step.
8. If either animal continues to be stressed, aggressive or scared, after continuous meetings, it is best to keep your foster cat confined for the remainder of her stay.

## **INTRODUCING FOSTER CAT TO RESIDENT DOG**

It may be best to keep your foster cat(s) separated from your own pet(s). However, if you do introduce them into your household, use the following guidelines:

1. Follow steps 1-4 above.
2. When introducing your dog and cat, keep your dog on a leash. Allow the cat to approach the dog with access to escape routes, in case she is feeling stressed or overwhelmed.
3. Continue to make short introductions in this manner. Never leave the new animals alone together until you are *absolutely* sure they are *completely* comfortable with each other. Make sure your foster cat always has places to escape from your dog; hiding/high places where the dog can't reach.
4. Follow steps 7-8 above.

## **INTRODUCING FOSTER DOG TO RESIDENT CAT**

1. You may want to trim your cats' claws before introductions to avoid injury. Keep your foster dog leashed. Start out with cat and dog on separate sides of a door.
2. Next introduce the animals through a baby gate or a (very) slightly opened door.
3. If your foster dog knows the "sit" command, have him sit. Still keeping the dog on a leash, allow the cat to approach the dog with access to escape routes, in case she is feeling stressed or overwhelmed.
4. Give both animals lots of praise and food rewards for appropriate behavior.
5. If the foster dog lunges at your cat, give a firm "no" and have dog sit again, if he knows the command. Praise and give treats when he does so. If he does not know the sit command, praise and give rewards when his attention is away from the cat.
6. Only when you are sure they are both feeling comfortable and are sure the dog will not harm your cat, should you drop the leash. Continue giving praise and food rewards for appropriate behavior.
7. It is probably best to keep the animals separated when you are unable to supervise.

## **INTRODUCING FOSTER DOG TO RESIDENT DOG**

1. Introduce dogs in a neutral territory, away from your dog's yard or anywhere you frequently spend time. All dogs must be leashed and handled by separate people. Your resident dog should be held by you (or the person with whom he is most strongly bonded).
2. Allow dogs to sniff each other briefly. Use lots of praise and food rewards to help the dogs make positive associations. Walk with them together and allow them to sniff each other briefly and intervals.
3. When they appear comfortable, you can take them home. You may want to take them home in separate vehicles.
4. If you have more than one resident dog, you may want to introduce each dog individually.
5. Be aware of body postures to watch for signs of anxiety and/or aggression. (See section on Understanding Body Language) If there are problems, separate each animal, and go back to the prior step.
6. Make sure to give extra attention to your resident dog to relieve anxiety.
7. Your dogs will figure out their status in the pack. It is important that you support them in their roles this to avoid confusion.

**Understanding Body Language**

CATS – adapted from “Mission Possible Comfy Cats” provided by:

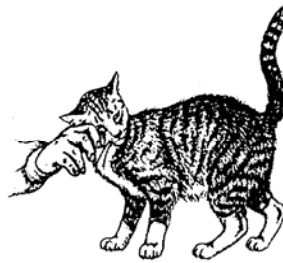


<b>Tails</b>	
<i>If the tail is...</i>	<i>It means...</i>
Relaxed	Relaxed, content
Up w/ tip curved	Friendly, happy
Up and quivering	Excited to see you
Up and bristled	Watch out
Tucked or bristled	Worried
Moving	Annoyed

<b>Eyes and Ears</b>	
<i>If the cat looks like...</i>	<i>She is...</i>
Sleepy eyes	Content
Slow blinks	Thinks you're nice
One slow blink	Saying "Hi"
Ears up, pupils are slits	Chipper or curious or playful (pupils will also constrict in bright light)
Ears forward, eyes wide	Tying to be intimidating
Ears to the side, staring, pupils large	Threatened, not happy
Ears flat and back	Saying "BACK OFF!"
Staring (no blinking, lids taut)	Aggressive, intimidating



**Walking – friendly**



**Marking**



**Grooming**



**Defensive – aggressive**



**Anxious**



**Threatened**



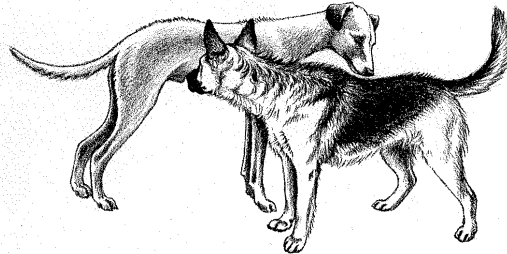
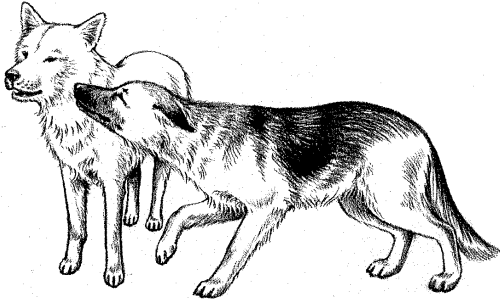
**Relaxed**



**Stalking**

# - DRAFT -

DOGS – adapted from the “Humane Education Guidebook” from the Federated Humane Societies of Pennsylvania Education Committee’s, sponsored by the ASPCA, illustrations by Nancy Lane © 1999

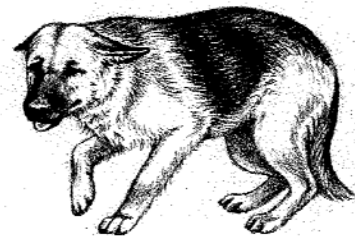
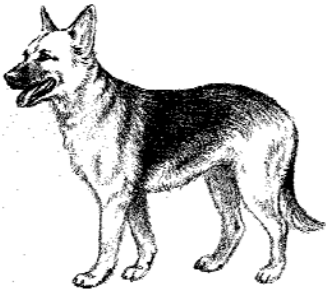


Submissive posture from a pack member to an alpha

- Left: Dominant or aggressive dog  
 Stiff legs  
 Ears up  
 Head high
- Right: Submissive, fearful or cautious  
 Moves slowly  
 Crouches  
 Tail down  
 Nudges mouth area of alpha dog  
 May lick or tongue flick

Greeting ritual - “Who are you”

- Stiff legged  
 Nervous  
 Hackles up  
 Alert  
 Tails up  
 Ears up – dominant dog  
 Ears down – submissive dog  
 Sniff genital region for information on sexual status



Relaxed, calm

- Ears up, but not forward  
 Head high  
 Mouth open slightly  
 Tongue exposed  
 Loose stance  
 Weight flat on feet  
 Tail down, flat, may wag

Dominant, threatening - “Back of f”

- Tail raised  
 Hackles up  
 Ears forward  
 Nose wrinkled  
 Lips curled to expose teeth  
 Teeth exposed  
 Corner of mouth forward  
 Stiff legged stance  
 Body leaning slightly forward

Anxious; active submission - “I’m unsure”

- Tail down, may wag slightly  
 Body lowered  
 No direct eye contact  
 Tongue out to lick face of dom. dog  
 Corner of mouth back  
 Paw raised  
 Ears back

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## Aggressive – “I’ll attack if needed”

Barking and snarling  
Lips curled forward  
Eyes staring  
Ears forward  
Teeth bared  
Active forward motion  
Tail “flagged” (spread out)  
Tail up and stiff  
Hackles raised  
Tense body posture



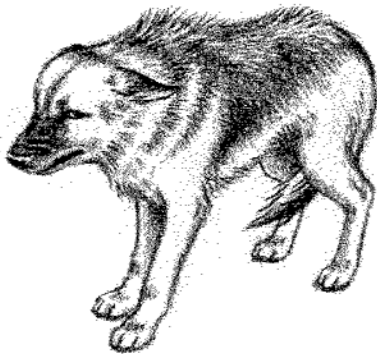
## Play bow – “Let’s play now”

Tongue out  
Lips back  
Nose smooth and relaxed  
Relaxed broadly wagging tail  
Eye contact  
Ears up and forward  
Front half lowered



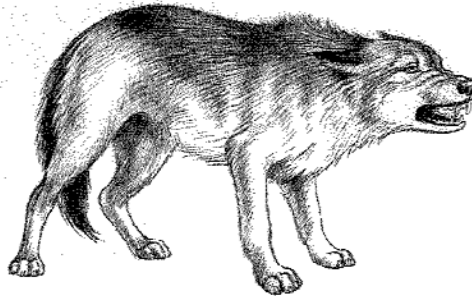
## Passive submissive - “I give up”

Ears flat back  
Avoids direct eye contact  
Nose and forehead smooth  
Corner of mouth back  
Tail tucked  
Rolls on back exposing stomach and throat



## Fearful - “I’m afraid”

Weight back  
Head lowered  
Ears back  
Nose wrinkled  
Lips slightly curled  
Tail tucked  
Body lowered



## Defensive aggression - “I’ll bite if pushed”

Ears back  
Hackles may be up  
Pupils dilated  
Muzzle tense, wrinkled  
Teeth exposed  
Snarling  
Posture mildly crouched, weight on rear legs  
Tail down and tense

# Determining When to Call for Help

## WHEN YOU SEE THESE SYMPTOMS SEEK VETERINARY ATTENTION

All animals are evaluated for approximate age, health, and temperament prior to being placed in foster care.

Several diseases are commonly seen in a shelter environment and in animals with unknown veterinary histories, most of which have incubation periods before symptoms appear. Therefore, your foster animal may be infected before going into foster care but not show symptoms until after you have brought them home. If an animal is showing signs of disease at the onset of your foster assignment, the staff will send medications and instructions home with you. If symptoms occur once the animal is in foster care, please call the foster staff immediately to schedule a check-up or prescription pick-up.

**Do not take foster animals to your veterinarian. Most vets will not see an animal in foster care and/or you will be financially responsible for the visit and treatment.**

Symptoms should abate within a few days of starting medication. If they persist, call the Director of Humane Education immediately. It is extremely important to administer all medications and finish the entire prescription. This is to prevent mutations of the disease; often symptoms will disappear but the hardiest bacteria will remain. Halting medication early allows strong, hardy bacteria to survive and reproduce. In the future, these bacteria will be much harder to kill and may not respond to prescribed antibiotics.

You will be given instructions when picking up each foster animal. Please follow these instructions closely, as they are designed to protect not only the foster animal, but also your own companion animals and those belonging to friends and neighbors. Many diseases are extremely easy to pass on and can live for long periods outside the “host” foster animal. Please keep reading for descriptions of common diseases and their symptoms.

## CALL US IMMEDIATELY IF YOU SEE ANY OF THESE SYMPTOMS:

### Eyes:

- Yellow or green discharge
- Uneven pupil dilation – **seek immediate attention**
- Swollen conjunctiva, including 3<sup>rd</sup> eyelid
- White film or cloudiness over eyes
- Yellowing on white part of eyes

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### Ears:

- Dark, waxy discharge accompanied by yeasty smell
- Painful reaction when rubbed or cleaned
- Yeasty smell with no discharge
- Frequent scratching at ear accompanied by hair loss around ear

### Nose:

- Yellow or green discharge
- Unexplained scabs or skin loss
- Bleeding from nose (this is not the same as slight bleeding, especially in kittens when sneezing from URI)
- Excessive sneezing

### Mouth:

- Loss of appetite – in adults for more than 2-3 days, in juveniles and kittens for more than one day
- Increased appetite for over one week
- Vomiting, usually more than three times. If vomit is bloody or dark, **seek immediate attention** (Hairball vomiting is quite apparent)
- Coughing and/or gagging accompanied by phlegm
- Trouble eating or chewing
- Pale gums (should be a healthy pink color)
- Ulcers or lacerations on gums, tongue, or lips
- Excessive salivation, especially a change in the amount of salivation (The one exception is if the mother or littermate licks topical flea preventative from the coat, salivation may occur briefly)

### Enlarged Lymph Nodes:

- Neck

- Front and rear legs

**Skin:**

- Lacerations
- Lumps
- Hair loss
- Scabs
- Animal that has frequent scratching or you have bites after holding animal

**Anal/Genital Area:**

- Diarrhea, especially bloody liquid diarrhea - **seek immediate attention**
- No bowel movement for more than 48 hours
- No urination for more than 24 hours, especially in male cats

**Gait:**

- Sudden lameness that does not improve with rest within a day
- Animal exhibits pain upon walking or handling

**Temperature**

- Animals with rectal temperature below 99.5 or higher than 102.5 at rest (outside the normal range) Animals that are playing or exercising may have a higher temperature

**Behavior**

- Lethargic
- Poor appetite
- Increased appetite with weight loss
- Excessive drinking
- Increased urination or accidents in the house
- Straining to urinate or defecate
- Seizures or convulsions – **seek immediate attention**

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## Medical Care - General

### COMMONLY PRESCRIBED MEDICATIONS

The ARL will provide you with any medications needed by your foster animals. Like human medications, it is imperative that an entire course of medication be finished so as not to grow a strain of disease resistant to treatment. Please, unless specifically instructed, do not share medications between animals and dispose of all medications between groups of fosters animals. The shelter staff is always available to discuss medication questions.

**Under no circumstances should you give human medications to animals without consent of the shelter foster care staff or a veterinarian. The results may be fatal.**

1. **Clavomox:** Commonly prescribed antibiotic for URI in cats and other infections in dogs and cats. Pill or liquid form depending on the age of the cat, and different strengths based on weight. Liquid form must be refrigerated and shaken before use.
2. **Baytril:** A “Second tier” antibiotic used for more stubborn strains of infection. Not for use in kittens.
3. **Cephalexin:** Broad spectrum antibiotic used in treating Kennel Cough and other infections in dogs.
4. **Ciprofloxacin:** Another broad spectrum antibiotic used in treating Kennel Cough and other infections in dogs.
5. **Terramycin:** Antibiotic eye ointment used for URI that has spread to the eyes. Melts quickly and is usually administered 2-3 times per day.
6. **Otomax:** Antibiotic ear ointment used for treating ear infections in dogs.
7. **Albon:** Liquid medication used to treat coccidian. Albon loses its effectiveness when exposed to light and must be stored in a drawer or cabinet.
8. **Cestex:** One dose treatment for tapeworms, the rice-like pellets seen in feces.
9. **Metronidazole:** an antibiotic commonly used to treat protozoal infections and anaerobic bacterial infections in dogs and cats.

### FELINE UPPER RESPIRATORY INFECTIONS

While every precaution has been taken to insure that your foster cat is free from infectious disease, there is a possibility that your foster cat may develop an upper respiratory infection (URI) after arriving at your home. This following is meant to educate you about URI in cats:

- What it is,
- What the symptoms are,
- Which cats are susceptible, and
- The normal course of treatment

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#### What is Feline Upper Respiratory Infection?

Four to five different viruses most commonly cause feline URI. In many ways, it is similar to the common cold in humans. Respiratory infections are common in cats with uncertain veterinary histories who are undergoing the stress of shelter life accompanied by the stress of acclimating to a new home. Feline respiratory infection is a highly contagious disease affecting the nasal passages and sinuses of cats and kittens. It is very common in animal shelters, catteries, multiple-cat households, and free roaming cat populations. URI is “species specific”, meaning it can only infect cats and kittens, not dogs or humans. As a precaution we strongly recommend keeping your new cat separate from other pets for a week or so. This helps the cat settle in and allows you to observe its behavior and health.

#### How is URI Transmitted?

Feline URI is transferred by cats via fluid discharged from the mouths and noses of infected cats, similar to the transfer of the flu virus between humans. Cats can shed the virus through the air by sneezing, coughing, or breathing. Even the hands and clothes of people handling infected cats can spread URI.

#### Which Cats Get URI?

Any cat stressed by poor nutrition, cold or heat, age, fear, or infection with another disease is susceptible to feline URI. Of course, cats brought to an animal shelter face the additional stress of an unfamiliar environment, being away from home, and then when adopted the stress of adapting again. Cats who are especially at risk are unvaccinated cats and kittens (because they have immature immune systems). Recently vaccinated cats who have healthy immune systems are still susceptible to the disease, but symptoms are usually mild and short-term, possibly limited to sneezing with no fever and no loss of appetite.

#### What are the Signs?

Symptoms of feline URI include sneezing, runny nose or red, watery eyes, mouth sores, nasal congestion (often seen as drooling or open-mouthed breathing), mild to severe lethargy and lack of appetite or thirst. Symptoms of feline URI are generally mild at first and tend to worsen within one to three days. The incubation period (the time between infection and the

first signs of illness) lasts from 2-17 days. The illness itself typically lasts from one to four weeks, depending on the strength of the cat's immune system. Again, keeping a new cat separated from other cats in the household is very important.

**How is Feline URI Treated?**

Feline URI is easily treated even though there are no medications available to kill the feline URI viruses, just as there are no drugs to treat many human viruses. Treatment of feline URI is geared towards strengthening the cat's body and immune system, and consists primarily of good nutrition, hydration, and supportive care. Like humans, when cats are feeling poorly they do not eat, especially when they cannot smell. Feed food such as tuna and other pungent canned foods. Antibiotics are often prescribed to prevent or treat secondary bacterial infections that may accompany the viral infection. Infected cats may stop eating or drinking, and may require special treatment to combat dehydration and malnutrition. Nearly all cats and kittens recover with proper care. A few cats may have long-lasting symptoms that may recur when the cat is stressed.

**Can Feline URI be prevented?**

Feline URI cannot be totally prevented in the shelter environment. Your own veterinarian should regularly vaccinate your cats. All cats are vaccinated upon entry to the ARL. Unfortunately, many cats enter the shelter without previous vaccinations and may already be infected without showing any outward signs. Animals showing symptoms while at the shelter are removed from the adoption floor as quickly as possible and placed in an isolation area where treatment and supportive care is administered. The ARL makes every effort to prevent the spread of these infections.

**How do I keep other household cats free of URI?**

**The best prevention is separation.** When introducing new cats to other pets in your household it is best to keep the new cat in a separate room for several days or longer. This serves two purposes: the new cat can adapt to your home with a minimum of stress, and you can observe the cat's health without exposing your cats to an incubating URI. It is important to follow these guidelines of separation as closely as possible.

**What should I do if my foster cat is showing signs of URI?**

Please refer to the "Determining When to Call for Help" Section

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## TOXIC PLANTS

Here is a quick reference guide to the more common house and garden plants and foods that are toxic to most animals. If you have these plants or foods, you need not dispose of them. Just keep them away from your pets.

**An \* indicates that a substance is especially harmful and can be fatal.**

Alcohol (all beverages, ethanol, methanol, isopropyl)  
Almonds\*  
Amaryllis Bulb\*  
Anthurium\*  
Apricot\*  
Autumn Crocus (Colchicum autumnale)\*  
Avocado (leaves, seeds, stems, skin) \*Fatal to birds  
Azalea (entire rhododendron family)  
Begonia\*  
Bird of Paradise  
Bittersweet  
Bleeding heart\*  
Boxwood  
Bracken fern  
Buckeye  
Buttercup (Ranunculus)  
Caffeine  
Caladium\*  
Calla lily\*  
Castor bean\* (can be fatal if chewed)  
Cherry  
Chinese sacred or heavenly bamboo  
Chocolate\*  
Choke cherry, unripe berries\*  
Chrysanthemum (a natural source of pyrethrine)  
Clematis  
Crocus bulb  
Croton (Codiaeum sp.)  
Cyclamen bulb  
Delphinium, larkspur, monkshood\*  
Dumb cane (dieffenbachia)  
Elderberry, unripe berries\*  
English ivy (all Hedera species of ivy)  
Fig (Ficus)  
Four o'clocks (Mirabilis)  
Foxglove (digitalis)

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## DISEASE DIRECTORY

Here is an alphabetical list of diseases encountered in a shelter environment and foster homes. Prevention is the key to keeping shelter and foster animals healthy. Please practice exemplary disease control habit and wash your hands often. Some of the following diseases can occur in both dogs **D** and cats **C** while others are species specific. Diseases noted with **H** are zoonotic in nature and are “communicable from lower animals to man under natural conditions”. These diseases can be passed from animals to humans.

### Canine Distemper **D**

**Cause:** Canine distemper virus. Highly contagious, transmitted by aerosol droplets from secretions of infected dogs

**Symptoms:** Fever, lethargy, nasal and ocular discharge, anorexia, diarrhea. Hardening of the footpads is often observed.

Some dogs that appear to have recovered often develop neurological complications including twitching of muscles (especially jaw muscles), paralysis and seizures later in life

**Treatment:** Supportive care and prevention of secondary infection. No one treatment is specific or successful. High mortality rate

**Prevention:** Vaccination, isolation of infected animals

### Cat Scratch Fever **H**

**Cause:** Bacteria-Bartonella henselae – cat bite or scratch

**Symptoms:** Humans – fatigue and fever. Infection at site of scratch and swelling of local lymph nodes

**Treatment:** Self limiting over 1-2 week period. Supportive care. Antibiotics

**Prevention:** Fleas are the major vector for the transmission of B. henselae among cats; therefore, flea control is important

**Zoonosis:** Incidence is low in the rocky Mountain region due to cool temperatures, low humidity, and low rainfall

### Cherlettiella (Walking Dandruff) **H C D**

**Cause:** Chelettiella mite. Mite lives on the coat and skin of cats and occasionally dogs

**Symptoms:** Small scabs, scratching and hair loss in cats. Sometimes mites are visible on the hair coat

**Treatment:** Topical medications and/or ivermectin

**Prevention:** Identification and treatment to prevent spread of parasite

**Zoonosis:** Susceptible people may exhibit small red spots on the skin, usually on the abdomen after handling or living with infected animals. Infection is self-limiting, since the mites cannot live and reproduce off the natural host – the cat

### Coccidiosis **H C D**

**Cause:** About 20 species of coccidian infect the intestinal tract of cats and dogs

**Symptoms:** Rare in healthy unstressed animals. More common in puppies and kittens. Can be serious if in combination with other diseases. Causes diarrhea usually without other symptoms, diagnosed by fecal exam

**Treatment:** Antibiotics

**Prevention:** Good sanitation and husbandry practices

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### Cryptosporidiosis **H C D**

**Cause:** Intestinal protozoan or parasite, Cryptosporidium parvum

**Symptoms:** Diarrhea and lack of appetite

**Treatment:** Usually self-limiting in healthy animals. Antibiotics may be helpful in certain cases

**Prevention:** Isolate infected animals from other pets. Simple hygienic measures such as hand washing and isolation of known infected animals from people

**Zoonosis:** Concern – immune suppressed individuals

### Ear Mites **C**

**Cause:** Otodectes cynotis. More common in cats than dogs, usually seen from kittens coming from farms or colonies

**Symptoms:** Severe itching of the ears, head shaking, head tilt, and dark red dry debris in ears. Mites are easily seen under a microscope

**Treatment:** Clean ears, apply mite-killing medication

**Prevention:** Treat queens to prevent spread to kittens

### Feline AIDS (FIV) **C**

**Cause:** Feline immunodeficiency virus. Primarily a disease of older cats. Male cats are more often infected than females.

Virus is transmitted through biting and fighting. Accurate tests are available to diagnose infected cats

**Symptoms:** Anemia, weakness, lethargy, cats that simply aren't thriving

**Treatment:** Supportive care to treat symptoms

**Prevention:** Prevent contact with infected cats

## Feline Distemper C

**Cause:** Feline Panleukopenia virus. Highly contagious. All secretions and excretions from infected animals may contain virus. Easily spreads from direct contact or carried on objects (fomites) such as bedding, brushes, bowls, clothing, or shoes

**Symptoms:** Vomiting, lethargy, diarrhea, anorexia, dehydration, fever. Very high mortality rate. All unvaccinated cats are susceptible. Symptoms may first be seen in a previously healthy queen and 3-5 days later in the kittens. Kittens infected in-utero or shortly after birth suffer cerebellar hypoplasia causing lack of coordination if they survive

**Treatment:** Supportive care to combat dehydration and secondary bacterial infections

**Prevention:** Vaccination and good husbandry practices

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## Feline Infectious Peritonitis (FIP) C

**Cause:** Corona viruses. There are two forms of corona virus infection in cats:

1. Feline enteric corona virus (FECV) which causes mild diarrhea that often resolves without treatment and usually goes undiagnosed
2. FIP corona virus, which is a mutated form of FECV. This form of corona virus causes fatal disease in some cats. Kittens and cats less than two years old and cats older than 10 years are most often affected. Variably contagious. Mostly a disease of catteries and colonies of cats. As few as 5-15% of cats exposed to FIP develop the disease. Some cats may be a-symptomatic for years

**Symptoms:** This is probably the most frustrating disease we encounter at the shelter, because it is difficult to diagnose. It cannot be distinguished from FECV by titer. We cannot predict if an exposed cat will succumb to the disease. Weakness, lethargy, anorexia, anemia, fever unresponsive to antibiotics, distended abdomen, respiratory distress, diarrhea and sometimes neurological manifestations. Laboratory tests and very high corona virus titers along with clinical symptoms are suggestive of FIP but only necropsy and histopathology of tissues can confirm the disease

**Treatment:** Usually fatal. Treating symptoms may alleviate discomfort **\*Due to the unpredictable course this disease usually takes, and the difficulty in definitively diagnosing, cats suspected of FIP by a veterinarian are euthanized.**

**Prevention:** Prevent contact with infected cats. A vaccine is available. This disease is the focus of active research to diagnose, treat, and prevent

## Feline Leukemia C

**Cause:** Feline leukemia virus. Can be transmitted to kittens from the queen. A blood test is accurate and inexpensive to diagnose the disease

**Symptoms:** Chronic wasting disease causing anemia, lethargy, anorexia, respiratory, gastrointestinal or neurological symptoms. Cats seem very ill. Most cats succumb to cancer or are predisposed to other disease because of their weakened immune system

**Treatment:** The body can rarely rid itself of the virus. Supportive care to treat symptoms. Most cats die despite treatment

**Prevention:** Testing and euthanizing positive cats. Cats appearing healthy can be carriers, so testing is very important.

Vaccination of negative cats. Keeping your companion cat vaccinated and indoors will significantly reduce chances of contracting the virus

## Feline Upper Respiratory Disease Complex (URI) C

**Cause:** Feline rhinotracheitis virus, feline calicivirus, Chlamydia (feline pneumonitis), mycoplasma and reovirus. Most “distemper” vaccines contain components against feline distemper, rhinotracheitis, calicivirus, and Chlamydia. The vaccine itself can cause transient signs of URI

**Symptoms:** Sneezing, nasal and ocular discharge (conjunctivitis), anorexia, fever, dehydration and oral ulcerations. Mild to severe symptoms

**Treatment:** Severe causes may require aggressive treatment, but most resolve with good nursing care, reduced stress (exit from the shelter), and often antibiotics

**Prevention:** Vaccination, prevent stress, good husbandry practices, and clean environment

## Giardia H C D

**Cause:** Giardia lamblia, a flagellate protozoan that inhabits the small intestine of mammals, diagnosed by fecal exam

**Symptoms:** Diarrhea, weight loss or failure to gain weight. Feces are malodorous, runny to cow pie consistency and often contain blood. A-symptomatic carrier animals may only develop symptoms when under stress of the shelter environment

**Treatment:** There are a variety of treatments, none of which is foolproof. Good husbandry helps to prevent/treat. Many animals recover quickly after adoption

**Zoonosis:** Immune compromised individuals are at risk

## Internal Parasites H C D

**Cause:** Hookworms, tapeworms, whipworms, and roundworms. Diagnosed by fecal exam

**Symptoms:** A-symptomatic to diarrhea, weight loss, anemia, dehydration and wasting

**Treatment:** Most dewormers are effective, but must be specific to the parasite being treated

**Prevention:** Deworming and sanitation

**Zoonosis: Roundworm** (*Toxocara canis* or *Toxocara cati*): following ingestion of infected eggs, larvae penetrate the intestine and migrate through tissues including skin, lungs, central nervous system and eyes; **Hookworm** (*Ancylostoma* spp. And *uncinaria* spp.) Infectious larvae in the soil infect humans by skin penetration. Migration is usually limited to the skin but may involve the lungs or eyes

### **Kennel Cough** D

**Cause:** Canine adenovirus 2, canine Para influenza virus, canine distemper virus, bordetella bronchiseptica and other bacteria, mycoplasma. Highly contagious

**Symptoms:** Harsh dry coughing, retching, and gagging. Cough is easily induced by gentle palpation of the trachea or larynx. Symptoms range from usually mild and inconvenient coughing to bronchopneumonia with fever, nasal discharge, and depression. Kennel cough is worse in dogs suffering from concurrent cardiac or respiratory disease

**Treatment:** Rest, antibiotics, and cough suppressants. Symptoms may persist for days to weeks. Some dogs recover without treatment

**Prevention:** Bordetella vaccination prevents the bordetella component of kennel cough, which is most common, but does not protect from other causes. Since kennel cough is an airborne disease, isolation if infected dogs significantly reduces the spread

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### Otitis Externa (ear infections)

**Cause:** Bacteria and/or yeast. Dogs with allergies or a low thyroid condition are most likely to have ear infections. Wetness in ears and ears weighed down by a lot of hair potentiates the condition. Ear mites are uncommon in dogs

**Symptoms:** Head shaking, scratching at ears, head tilt, malodorous ears, red ears, ears swollen and warm on the inner surface

**Treatment:** Cleaning ears daily with specific drying solutions and treating with medicated ear preparations. Identify underlying cause – allergy, hypothyroidism

**Prevention:** Treat as soon as signs are seen. Prophylactic cleaning of ears if dog has a history of infection. Keep ears dry after swimming or bathing, treat underlying cause if one is identified

### Parvo

**Cause:** Canine parvovirus (thought to be a mutated form of feline panleukopenia virus, the causative agent in feline distemper). Very contagious among unvaccinated dogs. All secretions should be considered infectious. Virus can be shed in the feces of infected dogs for about two weeks and can remain viable in the environment for years

**Symptoms:** Profuse diarrhea that is often bloody, vomiting, anorexia, lethargy, shock, death. Fatal if not treated

**Treatment:** Supportive care to treat dehydration from the diarrhea and vomiting, pain relief, anti-diarrheas, and antibiotics to treat secondary infections **\*Due to the highly contagious nature of parvo, the ARL does not treat any dog or puppy who tests positive for this virus. Parvo positive dogs and puppies are euthanized.**

**Prevention:** Vaccination and good husbandry practices to prevent puppies from exposure to the virus. Isolation of infected animal to prevent the spread of disease

### Plague

**Cause:** Yersinia pestis. Rodents are natural hosts. Cats are infected by ingesting infected rodents or rabbits or by being bitten by Yersinia infected rodent fleas

**Symptoms:** Fever, lethargy, and swollen lymph nodes

**Treatment:** Antibiotics and supportive therapy

**Prevention:** Prevent contact with rabbits and rodents

**Zoonosis:** Human infections of plague are not uncommon in Colorado and can be life-threatening. Human infections can be caused by inhalation of respiratory secretions or contact with contaminated membranes or secretions from infected cats

### Rabies

**Cause:** Rabies virus

**Symptoms:** Variable from the ‘dumb’ to the ‘furious’ forms. Fatal disease

**Treatment:** None. It is always fatal

**Prevention:** Vaccination

**Zoonosis:** Fatal in humans. Exposure to the saliva of infected animals through contact or bite

### Ringworm

**Cause:** Microsporium and trichophyton dermatophytes – fungal species that inhabit the soil but cause skin rashes in man and animals

**Symptoms:** Quite variable from a-symptomatic carriers to hair loss and skin scaling in cats

**Treatment:** Topical and oral medications **\* Due to the highly contagious and cyclical nature of ringworm, the ARL does not treat this condition in the shelter or in foster homes.**

**Prevention:** Identify infected and carrier animals and treat

**Zoonosis:** Circular, reddened areas of flaky skin. Most cases are easily treated with over-the-counter anti-fungal preparations for people

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### Salmonellosis

**Cause:** Bacteria belonging to the genus Salmonella

**Symptoms:** Fever, lethargy, lack of appetite, vomiting, diarrhea and abdominal pain

**Treatment:** Antibiotics in some cases. Fluid and nutritional support

**Prevention:** Isolate infected animals from other pets. Clean infected areas with household bleach, iodophors, or quaternary ammonium compounds. Simple hygienic measures such as hand washing and isolation of known infected animals from people

**Zoonosis:** Contagious to humans. Causes & symptoms as noted above

### Sarcoptic Mange

**Cause:** Sarcoptes scabiei, a mite that infects a variety of species

**Symptoms:** Severe, intense itching caused by female mite when she burrows into the skin to lay eggs

**Treatment:** Topical dips or injectable medications

**Prevention:** Identifying and treating infected animals, good sanitation practices

**Zoonosis:** Can infect susceptible individuals causing severe itching and rashes. See your physician for treatment

### Taxoplasmosis

**Cause:** Toxoplasmosis gondii. Cats enter the life cycle of the toxoplasma organism following the ingestion of cyst infected meats. At least 30% of cats and humans have previously been infected. Cats are the only known definitive hosts for the organism to complete its life cycle

**Symptoms:** Clinical infections in cats are uncommon

**Zoonosis:** Healthy individuals are generally not affected. Transplacental infections can cause a variety of birth defects or stillbirth. About 10% of AIDS patients will suffer from toxoplasmic encephalitis. Cats usually only shed oocysts in their feces once in their lifetime and the shedding period lasts from several days to several weeks. Oocysts have to sporulate to be infectious. Oocyst sporulation occurs in 1-3 days in the presence of oxygen. Therefore, contact with fresh feces cannot cause infection. Since cats are fastidious and do not allow feces to remain on their skin for time periods long enough to allow sporulation, infection from direct contact with cats is unlikely. To avoid infection at-risk individuals:

- Do not allow cats to hunt and do not feed them undercooked meat
- Clean litter box daily
- Wear gloves when working in soil where cats may defecate
- Keep sandboxes covered
- Boil water obtained from the general environment
- Control intermediate hosts such as cockroaches and earthworms. Humans in the United States are commonly infected by eating undercooked meats, pork in particular

### Urinary Tract Infection (UTI)

**Cause:** Some animals, like some people, are more susceptible to urinary tract infections. Diet can influence urinary pH.

Alkaline urine provides a good environment for bacterial growth. Magnesium content in the diet can cause urine sediment to form

**Symptoms:** Not using the litter box, housebreaking problems, frequent small urinations, and painful urination. Very lethargic sick cat if urine sediment causes the urethra in male cats to be plugged – this condition can be life threatening. This is a common reason for owners to surrender their animals to shelters and most owners have not consulted a veterinarian for diagnosis or treatment for 'housebreaking' problems or cats not using the litter box

**Treatment:** Complete urinalysis and often X-rays are required for diagnosis and to guide treatment, anesthesia, urinary catheterization and close veterinary monitoring are required for 'blocked' male cats. Appropriate antibiotics and in some cases a prescription diet are required. Urinalysis is repeated about 10 days after initiation of treatment

**Prevention:** Feeding a good quality diet. Awareness of symptoms and early treatment

**Protect yourself and your pets at home – wash your hands and practice safe animal handling**

**Report all animal bites to the Director Humane Education.**

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# Spaying/Neutering

## **Foster Care Requirement:**

One of the requirements of the PAST Program is that unaltered animals be spayed or neutered. The foster care provider will be required to take their foster pet to the appointment and pick them up. Cats can be spayed when in heat, dogs cannot.

## **Preparation of Animals:**

Adult animals should not have food after 9 pm the night before surgery. It is okay to provide water. Please do not feed adults the morning of surgery, as undigested food or water may cause an animal to vomit under anesthesia.

## **Where Surgery is Performed:**

Animals will be scheduled at Pine Point Veterinary Hospital in Scarborough. Animals are scheduled to arrive for surgery between 8:00 and 8:15 am. All cats and kittens must be in carriers. The animals are usually ready to be picked up between 3:30 and 5:00 pm the same day. If there is a delay in surgery or an animal must stay overnight, the veterinary practice will notify you directly.

## **Important Not To Miss Appointments:**

Under no circumstances is being a "No Show" at surgery acceptable. The Veterinarians performing the surgery for the ARL have made space in their surgical schedule for these specific animals. By missing an appointment, you are jeopardizing our excellent relationship with these vets as well as your foster home status. Please call the ARL as well as the veterinary practice if you have an emergency that prevents you from taking your foster to surgery.

## **General Post-Operative Care:**

After your foster animal is spayed/neutered s/he should be kept quiet, has lots of rest, and be away from family pets and active children. Animals recovering from anesthesia can be extra sensitive to noise and bright lights, and their reactions to the usual family activity may be somewhat unpredictable. Cats may bite or scratch as they recover from anesthesia. To avoid injury, keep the animal quiet and in a warm room the first evening.

## **Special Care Required for Females Spayed when in Heat:**

If your female foster animal was in heat when she was spayed, the heat scent will persist for several days after spaying. **It is imperative that this female be protected from the attentions of any male animals in the homes. Severe injury may result if she is bred.**

## **Food:**

Give the animal small amounts of water throughout the first evening. Give small amount of food in the early evening. If he/she vomits, take food away until morning. Eating or drinking too soon can cause vomiting. Some animals may have decreased appetite for one to three days following surgery.

## **Incision:**

- Should be kept dry for two weeks (no bathing, swimming, etc.)
- Check incision site daily. Watch for swelling, blood, pus, reddening, painfulness or anything that seems unusual or causing the animal pain
- Do not allow the animal to lick or chew at their incision, as this may lead to infection or other serious complications.
- It is crucial that rough play is avoided and cats be prevented from jumping immediately following surgery
- If it appears that sutures have been ripped or torn, especially in females, and the surgical area has opened, contact the shelter immediately. When possible, we will send you back to the practice that performed the surgery
- Some animals may have an area on the front leg shaved. This is from the IV catheter

## **Post-Surgery Check in:**

Please call the shelter two days after surgery or at any time you have questions or concerns about the surgery.

## **Suture Removal:**

- Absorbable suture material does not need to be removed, and this is used for the majority of animals.
- For spays that have been difficult, stainless steel sutures or staples may have been used and must be removed in 10-14 days.
- Males do not usually require suture removal; however, in certain circumstances, this may be necessary.
- If suture removal is required, it can be done at the shelter. If a foster situation requires that the animal remain in foster care for more than two weeks after surgery, please call the shelter to schedule suture removal. However, please keep in mind that we may not be able to accommodate the procedure on all days.

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