The AAHA Canine Life Stage Guidelines in Practice
April 2 – 15, 2012
By Joe Bartges, DVM, PhD, DACVIM, DAVCN
AAHA gratefully acknowledges Elanco Companion Animal Health, Hill’s Pet Nutrition, Merial, and Pfizer Animal Health for their sponsorship of this webcast.

CANINE LIFE STAGE GUIDELINES
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PROFESSOR OF MEDICINE AND NUTRITION
THE ACREE ENDOWED CHAIR OF SMALL ANIMAL RESEARCH
THE UNIVERSITY OF TENNESSEE
INTRODUCTION

2010: Veterinarian’s Oath

Being admitted to the profession of veterinary medicine, I solemnly swear to use my scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering, the conservation of animal resources, the promotion of public health, and the advancement of medical knowledge.

I will practice my profession conscientiously, with dignity, and in keeping with the principles of veterinary medical ethics.

I accept as a lifelong obligation the continual improvement of my professional knowledge and competence.

(Approved by the HOD, 1954; Revision approved by the HOD, 1969; Revision approved by the Executive Board 1999, 2010)

http://www.avma.org/about_avma/whoweare/oath.asp

INTRODUCTION

Importance of routine wellness care
Encourage clients
To select primary care veterinary practice
To select primary care veterinarian
Develops strong bond between veterinary care team, patient, and client
Individualized life stage and breed-specific wellness plans
LIFE STAGES

AAFCO
Adult and reproduction (gestation, lactation, growth)
No actuary tables
Proposed life stages based on
Age
Characteristic
May require different approaches to wellness care

![AAFCO Logo]

LIFE STAGES

**TABLE 1**

<table>
<thead>
<tr>
<th>Stage</th>
<th>Definition</th>
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<tr>
<td>Puppy</td>
<td>Maturity until reproductive maturity</td>
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<td>Junior</td>
<td>Reproductively mature, still growing</td>
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<td>Adult</td>
<td>Finished growing, structurally and socially mature</td>
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<tr>
<td>Mature</td>
<td>From midle up to approximately the last 25% of expected lifespan (a window of time around half life expectancy for breed)</td>
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<tr>
<td>Senior</td>
<td>From maturity to life expectancy (approximately the last 25% of expected lifespan)</td>
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<td>Geriatric</td>
<td>All life expectancy and beyond</td>
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*Based on the AHAA Senior Care Guidelines.*

INDIVIDUALIZED APPROACH TO VETERINARY VISIT

Acclimation
Safe travel
Used to leash or carrier
Dog friendly entrance
INDIVIDUALIZED APPROACH TO VETERINARY VISIT

Dog friendly waiting area
Minimize wait
Create calm environment
Strategy to manage timid or fearful dogs
Reduce patient stress

INDIVIDUALIZED APPROACH TO VETERINARY VISIT

Train veterinary staff in low-stress techniques
  Treats or toys
  Quiet and calm body language
  Calm voice
  Pheromones
  Sedation or anti-anxiety medications

INDIVIDUALIZED APPROACH TO VETERINARY VISIT

Relationship-centered client communication
Client is caregiver = final decision maker
Communicate with
  Empathy
  Reflective listening
  Attention to body language
NOTHING BEATS A GOOD HISTORY AND PHYSICAL EXAMINATION

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NOTHING BEATS A GOOD HISTORY AND PHYSICAL EXAMINATION
ITEMS TO DISCUSS, REVIEW, CHECK, AND PERFORM

General
Environment
Behavior
Nutrition
Parasite control
Vaccinations
Dentistry
Reproduction
Breed-specific screening

ALL LIFE STAGES

General – thorough physical examination
Environment - exercise, mental stimulation, safety
Behavior – open-ended questions, recommendations
Nutrition – food and water, supplements, BCS / MCS
Parasite control – endo- / ecto-parasite screening & control
Vaccinations – core vs noncore; titers
Dentistry – assessment; home care
Reproduction – intact vs neutered
Breed-specific screening
**J AM ANIM HOSP ASSOC**
2011;47:1-42

**2011 AAHA Canine Vaccination Guidelines**

Members of the American Animal Hospital Association (AAHA) Canine Vaccination Task Force:

*Les R. W. Robson, DVM, DABVP (Canine)*
*John G. DuVernois, DVM, DABVP* 
*R. Richard Ford, DVM, MS, DACVM* 
*Kris G. Kumpf, DVM, DABVP (Viral)* 
*Robert T. Franklin, DVM, DACVP* 
*Kate F. Hurley, DVM, MSc, DACVIM* 
*Randy B. McCune, DVM, JD* 
*Michael A. Paul, DVM, DACVIM* 
*Randy D. Schuver, PhD, DACVIM*

**AAHA VACCINATION GUIDELINES**

- Core:
  - Distemper
  - Parvoivirus
  - Adenovirus
  - Rabies (1 or 3 yr)

- Noncore:
  - Measles – single dose; 0-12wk
  - Parainfluenza
  - Bordetella
  - Influenza
  - Borrelia burgdorferi (Lyme)
  - Leptospira
  - Melanoma
  - Crotalus atrox (Diamondback rattlesnake)
  - Coronavirus – not recommended
AAHA Dental Care Guidelines for Dogs and Cats

Introduction
Dental care is essential to prevent opertative needs and quality of life. The survival of the oral cavity, if left unattended, may often cause not only oral health problems but also other dental or systemic diseases. This paper includes guidelines for materials and equipment, initial cleaning and instruction, label communication, and post-treatment care.

Stages

Specific Life Stages

Puppy

Neonate -> Repro Maturity

General – thorough physical examination
Congenital disorders
Environment – exercise, mental stimulation, safety
Increased risk of hazards
Behavior – open-ended questions, recommendations
Socialization – handling; pre-school; bite inhibition; crate training
Nutrition – food and water, supplements, BCS / MCS
Breeding and size target nutrition; feeding schedule
Parasite control – endo / ecto-parasite screening & control
Paradigm & aesthetic potential
Vaccinations – core vs non-core; others
Core vaccines to 16 weeks
Dentistry – assessment; home care
Deciduous teeth; extra / incomplete dentition; occlusion; chew toys; developmental issues
Reproduction – intact vs neutered
Diseases related to breeding; genetic counseling; breeding age; Brucella testing
Breed-specific screening
Diseases inherited disorders if used for breeding
**SENIOR LAST 25% LIFESPAN**

General – thorough physical examination

See AAHA Senior Care Guidelines

Environment – exercise, mental stimulation, safety

Daily exercise needs; environmental adaptation for mobility / sight / hearing

Behavior – open-ended questions, recommendations

Cognitive evaluation / questioning

Nutrition – food and water, supplements, BCS / MCS

Iterative approach – make adjustments; weight control

Parasite control – endo / ecto-parasite screening & control

Fecal examinations 1-4 times / yr

Vaccinations – core vs noncore; titers

Continuous care and appropriate noncore; titers

Dentistry – assessment; home care

**J AM ANIM HOSP ASSOC 2005;41:81-91.**

**AAHA Senior Care Guidelines for Dogs and Cats**

This paper presents a working framework for enhancing the well-being of senior cats and dogs. It focuses on developing a holistic approach to care for these animals, emphasizing preventive measures and early intervention to address age-related challenges.

**HX & PE**

Evaluation under anesthesia; screen for neoplasia; increase frequency with age

Reproduction – intact vs neutered

Discuss inherited disorders if used for breeding

Pain & Distress

**Sick Pet**

Fecal examinations 1-4 times / yr

Client education and communication

**AAHA SENIOR CARE GUIDELINES**

Healthy vs Sick

Healthy Pet

HX & PE

MDB

Preventative care

Focused area of client education

Sick Pet

HX & PE

MDB – extended

Client education and communication

Treatment & monitoring

Anesthesia & Surgery

Pain & Distress

End-to-near issues
GERIATRIC
LIFE EXPECTANCY & BEYOND

General – thorough physical examination
See AAHA Senior Care Guidelines

Environmental – exercise, mental stimulation, safety
Daily exercise needs; environmental adaptation for mobility / sight / hearing

Behavior – open-ended questions, recommendations
Cognitive evaluation / questioning

Nutrition – food and water, supplements, BCS / MCS
Iterative approach – make adjustments; weight control

Parasite control – endo- / ecto-parasite screening & control
Fecal examinations 1-4 times / yr
Vaccinations – core vs noncore; titers
Continue core and appropriate noncore; titers

Dentistry – assessment; home care
Evaluation under anesthesia; screen for endocarditis; increase frequency with age

Reproduction – intact vs neutered
Disease status; if breeder – genetic counseling; breeding age; Brucella testing
Breed-specific screening
Disease inherited disorders if used for breeding

BREEDS

Be aware of breed specific problems

Examples:
Cardiomyopathy in Dobermans
Breed associated glomerulopathy - UPC

Contact lab – “breed specific” variations of “normal”

Example:
Serum creatinine concentration in Greyhounds

DNA testing may aid in identifying breed-associated specific risks for disease
**BREEDERS**

- Promote responsible practices
- Congenital vs inherited
- Breeding of dogs with conditions
- Promote collaboration between breeders, breed clubs, and researchers

**SERVICE & WORKING DOGS**

- Companionship plus service or work
- Maintain health and ability to serve
- More frequent evaluations?
- Integration of CAM
  - Chiropractic and acupuncture for musculoskeletal health
  - Nutrition and performance

**BEHAVIOR AWARENESS**

- Developmental periods are continuum
- Normal behavior
  - Socialization
    - 2-3 weeks of age – critical
    - 2-12 weeks – socialization period
    - Handling, nail trimming, bite inhibition, safe exposure
    - 8-10 weeks – “fear period”
- Exercise and environment
  - Toys, games, obedience training, crating
- Problem behavior
NUTRITION
Assessment and re-assessment
Overweight and obese
Evidence-based nutrition
Review and discuss
Supplements
Non-traditional diets

DENTAL CARE
Dental exam while awake – begin young
Before and after dental photographs
Dental scoring
Breed-associated dental disease

ZOONOTIC DISEASE / PET SENTINEL
Veterinarian role
Keep up to date on zoonotic diseases in area
Food associated illnesses
CDC and FDA / AVMA web sites
SAFETY
Examples
- Home / environmental toxins, plants, drugs
- Electric cords
- Foreign bodies
- Human consumables toxic to dogs
- Temperature extremes
- Vehicle transport
- Bodies of water
- Physical hazards
- Wildlife and other animals
- Plan for care in event of client / pet illness or disasters
- Identification and registration of pet

REPRODUCTIVE HEALTH
Discuss reproductive future of pet
Neutering
  Early neutering
  Coordinating surgical neutering with permanent dentition eruption

IMPLEMENTATION
Goal: Improved quality and quantity of life
Life stage guidelines
  Life style of pet / owners
Veterinary health team
  Pet
  Client
  Veterinarian
  Veterinary nurse
  Staff
Health visits for re-assessment and recommendations
Healthcare financial planning
Buddy Bartges
Age 12

Questions to the Speakers

Please email your questions to webconference@aahanet.org by Sunday, April 22, 2012.

Dr. Bartges will provide written responses to all of the questions and they will be posted on AAHA’s website by Friday, May 4, 2012.
Instructions for CE Certificate

1. To complete the evaluation, please go to the following website:
   http://www.keysurvey.com/survey/423805/1252/

2. After completing the evaluation, you will automatically be linked to the Continuing Education Certificate. The CE certificate can only be accessed after the evaluation is completed.

3. Download the CE Certificate (in PDF format) to your computer and print enough copies for those persons viewing the web conference with you.

Thank you for your participation!

AAHA gratefully acknowledges Elanco Companion Animal Health, Hill’s Pet Nutrition, Merial, and Pfizer Animal Health for their sponsorship of this webcast.