

Dear Community Veterinarian,

Thank you very much for all you do for community animals, and especially for your care of animals from our local BC SPCA branch. The BC SPCA operates 36 shelters across the province, none of which have veterinarians working in the branch. We rely on community veterinarians as partners in caring for the 43,000 companion animals we assist every year across the province.

As you know, the type of care is vast: examining sick and injured animals, performing spay/neuter and other surgical and dental procedures, and providing humane euthanasia for animals suffering from medical and behavioural problems which prevent them from being rehomed. In many cases, our relationship with veterinarians extends well beyond providing care for shelter animals. Community veterinarians also: assist with cruelty investigations and documentation, promote our animals for adoption, provide post-adoption exams, participate in our new BC Pet Registry microchip program, spay and neuter community animals at a discount, and support our staff and volunteers in fundraising events. We could not function without you!

This is an exciting time for the BC SPCA. We are in the process of implementing the Canadian Standards of Care (CSC) in Animal Shelters (<https://www.canadianveterinarians.net/documents/canadian-standards-of-care-in-animal-shelters>). This document establishes minimum standards of care, as well as best and unacceptable practices. It was produced in 2013 and is based on the 2010 Association of Shelter Veterinarians Standards of Care.

As part of implementation, we are reviewing our procedures for humane euthanasia, decision-making, and pain management in shelter animals (please see attached for more information). We are committed to finding homes for all healthy companion animals, as well as those with medical and behavioural conditions that can be treated while in our care. Our euthanasia rates have been steadily dropping over the years, and our current Live Release Rate is 90%. This is one of the highest Live Release Rates in North America.

We recently implemented the international Asilomar Accords system for data collection and now have written guidelines for determining treatability and adoptability based on medical and behavioural conditions, publicly available at <http://www.spca.bc.ca/pet-care/adoption/asilomar.html>.

My role is to manage our animal health program, including population level protocols for infectious disease prevention, euthanasia, decision-making, etc. We are working on a new website that will have a section for veterinarians to access updates relating to our animal health policies and procedures. I would love to hear from you if you have any questions, concerns, or feedback about our shelter animal health programs.

Thank you again for your passion for animal welfare,



Emilia Gordon, DVM
Senior Manager, Animal Health

Shelter Management Updates

Pain Management

The CSC Guidelines state: “Shelters often care for animals with acute or chronically painful medical conditions.... Pain must be recognized and treated to alleviate suffering.... Failure to provide treatment for pain is unacceptable.” The Guidelines go on to emphasize that if a procedure is painful for humans, it should be assumed to also be painful in animals.

In June 2016, we implemented a protocol stating that after spay/neuter or any other dental or surgical procedure that could induce pain, our **shelter animals must receive at least three days of pain control beyond the date of the procedure**. This includes all dogs, cats, and rabbits (including pediatrics).

For community vets performing surgical procedures for us, please be aware that your branch will be asking you to prescribe analgesia. If an animal will go home with an adopter during the course of the medication, we will request (and pay for) a prescription labelled specifically for that animal. For animals who will be housed in the shelter or in foster, we allow shelter stock medication to be used (typically Metacam) but only as instructed by the attending veterinarian and only if you approve it. As long as some type of pharmacologic pain control is used for at least three days, it can be whatever medication, dose, and duration you feel is appropriate.

Decision-Making

The CSC Guidelines state: “Treatment decisions should be based on a number of criteria such as the ability to safely and humanely provide relief, prognosis for recovery, the likelihood of placement after treatment, and the number of animals who must be treated. Duration of treatment expected, expense and resources available for treatment should also be considered.”

When you provide care for individual shelter animals, **please offer our branch staff the same options you would for any other patient**. They will determine, based on their resources and capabilities, which option they would like to pursue.

When animals are in a stray hold (typically 4 days from intake), we are limited in what diagnostics and treatments we are able to provide, but we will always provide treatment to alleviate suffering. When animals are “ours” (have completed stray hold, been surrendered by a guardian, etc.) our goal is always to move them along the pathway towards adoption as quickly as possible.

Example: if an older stray cat comes in dehydrated, we might elect to support the cat with subcutaneous fluids initially, but as soon as the stray hold is up, we would want to determine whether the cat was adoptable. Knowing our limited resources, it might be tempting not to offer us bloodwork. However, delaying bloodwork is unlikely to change the cat’s eventual outcome (which would hopefully be adoption with disclosure of any condition present, but could be euthanasia if the cat is diagnosed with IRIS Stage 3 or 4 renal disease).

Because we strive to limit the length of time an animal is in care, we really appreciate being offered standard diagnostic and treatment options initially.

Humane Euthanasia

The CSC Guidelines include the following relating to euthanasia of shelter animals:

- Every individual animal must be treated with respect
- Any agent or method that is unacceptable according to the AVMA Guidelines on Euthanasia is also unacceptable for use in shelters
- The most humane methods are IV or IP injection of sodium pentobarbital
 - When euthanizing dogs and cats, IP injections of a pure sodium pentobarbital solution should be used only for cats, kittens, and small puppies
 - Sodium pentobarbital should not be injected by any non-vascular route other than the IP route discussed above
 - Intracardiac injections are unacceptable unless it has been reliably verified that the animal is unconscious, comatose, or anesthetized
- The use of carbon monoxide as a method of euthanizing dogs and cats in shelters is unacceptable

As our euthanasia numbers continue to drop, we are no longer able to certify new staff in performing humane euthanasia (historically we have offered 2-day training courses, but this relies on a predictable supply of animals to be euthanized in one location, and for welfare reasons we are not willing to transport or lengthen the hold time of animals to be euthanized). This means that we are increasingly reliant on community veterinary clinics for euthanasia services.

If you provide euthanasia services for our shelter animals, thank you for performing this difficult but necessary task.

Shelter animals requiring euthanasia may range from very sick/moribund animals to apparently healthy animals who have severe behaviour problems. The latter can be difficult in both an emotional and a logistical sense. Our policy is that we will euthanize any animal who is likely to severely injure or kill another companion animal or human.

Some euthanasia tips that we have found helpful:

- Pre-sedation of all animals, or at least those who are aggressive, fearful, or anxious
 - Possible drug combinations: mixture of ketamine/ace/torb, or domitor/ketamine/torb, or alfaxan, etc
- Low-stress handling of animals
 - Keeping cat carriers covered, elevated, and away from dogs
 - Minimal restraint
 - Soft surfaces
 - Using treats and gentle handling

Another thing we greatly appreciate is for one of our staff members to have the opportunity to stay with the animal. Often they have been the primary caretakers for these animals for days, weeks, or months and have had to make this last, difficult decision in the absence of an owner. We know it may not always be possible, but when it is possible it's enormously helpful for both the animals and the staff.