

Intake Policy/Protocol Template

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Revision History

Date	Notes	Lead Reviewer(s)
[Month, Year]	[Description of change]	[Name(s)]

Purpose

This protocol aims to outline a standardized set of vaccinations and preventive care prior to or at the moment of intake at [YOUR ORGANIZATION] to promote individual and population health and streamline organizational operations.

Policy

All animals entering our care receive an intake exam, vaccines, prophylactic deworming, and ectoparasite prevention at the moment of arrival in the shelter and/or prior to arrival. Dogs also receive heartworm prevention. Routine screening is performed for heartworms in dogs.

Protocol

Timing

- Intake exam and treatments should be performed as soon as reasonably possible after entering care and must be completed the same day as arrival.
- A 2-week booster vaccination is given. Foster or operational logistical issues may make vaccination at the 2-week mark difficult, and any time within the 2-3 week range is medically acceptable.

Intake exam

An intake exam should be performed by a trained staff member (veterinarian, technician, or designated staff member trained in medical intake protocols).

Record-keeping

All exam findings and treatments are entered into the animal's records in the shelter software in a timely manner.

Puppies (less than 6 months)

- Vaccines:
 - Modified live DHPP

- Administer immediately upon intake, regardless of age. Neonatal vaccination is critical in shelter settings to protect against high-risk pathogens such as distemper and parvovirus.
 - Additional doses: every 2 weeks until 20 weeks of age
 - Location: right forelimb/scapula area
 - Intranasal Bordetella and parainfluenza
 - Initial vaccine: 4 weeks of age (or upon arrival if older)
 - Rabies:
 - If 3 months of age or older, rabies may be given at intake, if allowed by law/circumstances
 - Location: right rear limb
- Pyrantel (50mg/ml): 1ml/10 lbs. by mouth on intake, repeat every 2 weeks until 12 weeks of age
- Ponazuril: 50mg/kg by mouth once
- Heartworm prevention beginning at 8 weeks, repeat according to label
- Flea/tick prevention beginning at 8 weeks, repeat according to label
- Microchip (except if neonate) if not already present on scan

Adult Dogs (6 months or older)

- Vaccines:
 - Modified live DHPP
 - Initial vaccine upon intake
 - Second dose: one additional dose in 2 weeks; next due in one year
 - Location: right forelimb/scapula area
 - Intranasal Bordetella and parainfluenza
 - Initial vaccine upon intake, then annually
 - Rabies:
 - May be given at intake, if allowed by law/circumstances
 - Location: right rear limb
 - Nursing/pregnant dogs are vaccinated according to this protocol
- Pyrantel (50mg/ml): 1ml/10 lbs. by mouth upon intake
- Heartworm antigen test (any brand)
- Heartworm prevention, repeat according to label
- Flea/tick prevention, repeat according to label
- Capstar can be used at label dose in animals over 4 weeks of age with a high flea-load at intake
- Microchip if not already present on scan

Kittens (less than 6 months)

- Vaccines:
 - Modified live FVCRP

- Administer immediately upon intake, regardless of age. Neonatal vaccination is critical in shelter settings to protect against high-risk pathogens such as panleukopenia.
 - Additional doses: every 2 weeks until 20 weeks of age
 - Location: Distal right forelimb (below elbow)
 - Rabies:
 - if 3 months of age or older, rabies may be given at intake, if allowed by law/circumstances
 - Location: distal right rear limb (below hock)
- Pyrantel (50mg/ml): 1ml/10 lbs. by mouth on intake, repeat every 2 weeks until 12 weeks of age.
- Ponazuril: 50mg/kg by mouth once
- Flea prevention beginning at 6-8 weeks, according to label
- Capstar can be used at label dose in animals over 4 weeks of age with a high flea-load at intake
- Microchip (except if neonate) if not already present on scan

Adult Cats (6 months or older)

- Vaccines:
 - Modified live FVCRP
 - Initial vaccine upon intake
 - Additional doses: one additional dose in 2 weeks; next due in one year
 - Location: Distal right forelimb (below elbow)
 - Rabies:
 - if 3 months of age or older, rabies may be given at intake, if allowed by law/circumstances
 - Location: distal right rear limb (below hock)
 - Nursing and pregnant cats are vaccinated according to this protocol
- Pyrantel (50mg/ml): 1ml/10 lbs. by mouth on intake
- Flea prevention beginning at 8 weeks, according to label
- Microchip if not already present on scan

Additional Guidance

Microchip Scanning

- 1) Utilize a universal scanner that scans for chips on multiple frequencies.
- 2) Ensure the scanner is charged appropriately and/or has functional batteries.
- 3) Hold the scanner close to the animal and move it slowly beginning at the neck and going down the back.

- 4) Utilize the S.C.A.N. technique described below. Move the scanner systematically using an “S” pattern to cover the entire back moving the scanner slowly.
- 5) If no chip is found, continue scanning around the neck and sides and then down the legs of the animal.
- 6) If a chip is found:
 - a) If the animal was transferred into Best Friends from a shelter, confirm on the transfer records that they also found the microchip and attempted to contact the owner. If not, work with that shelter to determine if the owner can be located.
 - b) If the animal has a microchip implanted, do not implant a second microchip. Use the existing microchip number for registration purposes.
 - c) If the animal was found stray and brought to our location for scanning, contact the microchip registry appropriate for the microchip to assist the finder in locating the owner.
 - d) Use the AAHA lookup tool if necessary to identify the chip manufacturer:
<https://www.aaha.org/petmicrochiplookup>
- 7) Scanners may be covered by a thin disposable plastic bag that can be changed between animals or scanners can be wiped down between animals. Keep the scanner clean but do not spray cleaners or other liquids onto scanners.
- 8) S.C.A.N Technique Source: SCAN: How to do a good job scanning for a microchip.
 - a) S is for slow: Scan slowly, no more than half a foot per second.
 - b) C is for close: Hold the scanner very close to the animal. As an animal’s body weight increases, the sensitivity of the microchip scanner may decrease.
 - c) A is for area: Cover lots of area when scanning. Start by the shoulder blades, where you would expect the microchip to be, but microchips can migrate, so be sure to cover the animal’s whole body. It’s recommended to go down a snake-like pattern down the back of the animal then go down each side of the animal as well.
 - d) N is for next steps: It is important to take the next steps as outlined above if a microchip is found. However, if a microchip is not found, that does not guarantee a microchip is not present. It just may not have been found at the time this scan was completed. Multiple scans are recommended for all animals.

Related Documents

1. [Association of Shelter Veterinarians Guidelines](#)
2. [Neonatal Vaccination Recommendations](#)
3. [SCAN: How to do a good job scanning for a microchip](#)
4. [Microchip Registry Lookup](#)

Disclaimer: This document is NOT intended to be replicated as-is for implementation at your organization; however, it can serve as a guideline for what to include/consider when composing a protocol for your organization. The information provided within this document is simply an example with which a licensed veterinarian may construct their own shelter medical protocol.

Template created by the Best Friends Animal Society National Shelter Medicine Team – email sheltermedicine@bestfriends.org for questions.