



The veterinary guide

2015 edition





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The veterinary guide

2015 edition

This guide, produced for the veterinary profession, provides a current overview of Cats Protection (CP), the UK's leading feline welfare charity. CP helps over 194,000 cats and kittens per year through its national network of over 250 volunteer-run branches and 31 adoption centres.

Cats Protection

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(veterinary and CP volunteer/staff calls only)

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and SC037711 (Scotland)

To be placed on or removed from our mailing list, please contact the Veterinary Department on 01825 741 991 or email: veterinary@cats.org.uk

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Abbreviations used in this guide

| | |
|-------|---|
| AC | Adoption centre |
| BSAVA | British Small Animal Veterinary Association |
| CP | Cats Protection |
| EMS | Extra mural studies |
| FCV | Feline calicivirus |
| FCoV | Feline coronavirus |
| FelV | Feline leukaemia virus |
| FHV | Feline herpesvirus |
| FIP | Feline infectious peritonitis |
| FIV | Feline immunodeficiency virus |
| FPV | Feline parvovirus |
| GA | General anaesthesia |
| MRSA | Methicillin resistant staphylococcus aureus |
| PETS | Pet Travel Scheme |
| TB | Tuberculosis |
| VMP | Veterinary Medicinal Product |

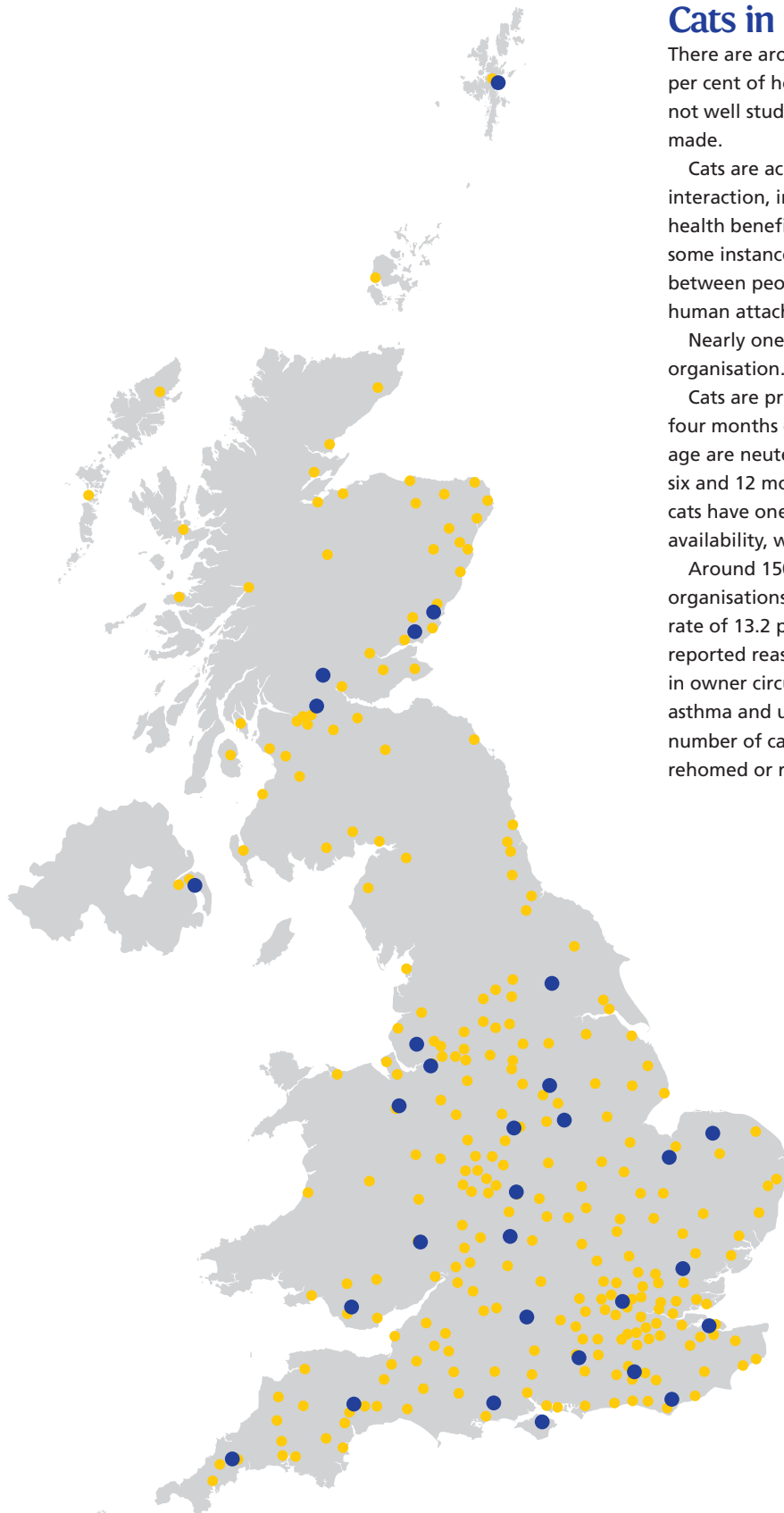
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Cats Protection and the veterinary profession



Cats in the UK

There are around 10 million owned cats in the UK in up to 31 per cent of households. The size of the feral cat population is not well studied, but suggestions of over one million have been made.

Cats are acquired for reasons including companionship, social interaction, inheritance, to teach children care and responsibility, health benefits, replacement of a former pet and perhaps in some instances, to serve an 'ornamental' function. Relationships between people and cats are reported to share many qualities of human attachment bonds.

Nearly one third of pets are acquired from a shelter or welfare organisation.

Cats are prolific breeders and can reach sexual maturity from four months of age. 92 per cent of owned cats over six months of age are neutered, but only 66 per cent of owned cats between six and 12 months are neutered and 19 per cent of owned female cats have one or more litters. Fecundity is linked with resource availability, with well-fed female cats producing large litters.

Around 150,000 cats are reported to enter UK welfare organisations each year, with one study indicating a euthanasia rate of 13.2 per cent. Cats are relinquished for a number of reported reasons, including abandonment or straying, a change in owner circumstances, as unwanted kittens, human allergy/asthma and unwanted feline behaviour. Around one third of the number of cats reported to enter UK welfare organisations are rehomed or reunited by Cats Protection each year.

- CP branches
- CP adoption centres

Cats Protection

Our vision:

A world where every cat is treated with kindness and an understanding of its needs

Our values:

- Cats and their welfare are at the centre of everything we do
- We never put a healthy cat to sleep
- We value and respect our volunteers, supporters and staff
- We are committed to providing a high quality service
- We are open and honest

Our strategy

In the longer term: Our work will ensure that there will be fewer cats needing our help

Strategic aims

This is how we will help more cats:

1. We will significantly increase awareness of Cats Protection and our work.
2. As the leading authority on cats we will help people better understand their needs in order to improve the welfare of all cats.
3. We will help to reduce overpopulation of cats:
 - Through targeted neutering campaigns and education
 - By directing more resources to the promotion of early neutering
 - By doing more research and gathering better data on the impact of our neutering work
4. We will home more cats until our work on information, education and neutering reduces the long-term need for homing.

Helping us to get there

- We will significantly grow income and manage our funds to enable us to help more cats, now and in the future
- We will speak up for cats and represent their interests
- We will increase the extent and effectiveness of our collaboration with animal welfare and other organisations, for the benefit of cats

Cats Protection achieves its work via a network of branches, adoption and homing centres across the UK. These are assisted by regional and central staff, many of whom are based at the charity's National Cat Centre (NCC) in Sussex, all governed by a Board of Trustees.

Branches are run by volunteers, often from their own homes. Each branch has a committee of volunteers and fosterers and fundraises to support its activities, supported by some central CP grants.

Adoption and homing centres are mostly run by paid staff and take the form of traditional shelters.

Adoption centres and branches foster cats in need until a suitable home can be found for them. While adoption centres will invariably have more cats at one site than branches, husbandry standards of which we are proud are generally the same for all cats in the charity's care, with comprehensive manuals of guidance on CP policies and procedures for volunteers and staff. Cats are housed in pens either individually or as queen/litter combinations, or in existing social groups of usually no more than two.

Cats Protection never puts a healthy cat to sleep and only euthanases on veterinary advice. Long-term life in a pen is not acceptable on welfare grounds and so the vet is asked to consider the welfare of cats in the charity's care with physical and behavioural conditions when examining, diagnosing and treating them, to ensure their quality of life in both the short and long term. CP believes there is a home for every cat and is not a sanctuary organisation. Cats that have been in care for greater than four months are considered long-stay and at this time even more concentrated efforts are made to find them a home.

Cats Protection and the veterinary profession

Veterinary care is a key priority of Cats Protection's work and CP is proud of its good relationship with the veterinary profession, being a major client throughout the UK. Every cat in CP care is examined by a vet and is given a minimum level of veterinary care prior to rehoming, which we call our minimum veterinary standards or MVS.

Veterinary practices may interact with CP in a number of ways including:

- treating cats in CP care and/or after their adoption from CP
- using CP neutering vouchers
- signing up to CP's Kitten Neutering Database (KiND)
- reading or directing owners to CP's support materials
- recommending Cats Protection as a source of cats to the public
- fundraising to support CP's work
- this guide has been produced for the information of all veterinary practices in whatever capacity they interact with the charity.

Name change

Back in 1998, Cats Protection League dropped the League to become Cats Protection. As part of a wider campaign to ensure we are no longer mistakenly called Cats Protection League, we need practices' help! If you are referring to us in any of your materials, invoices, or hold account names as CPL, we ask that they are changed to CP or Cats Protection. We are also working with local media outlets to ensure everyone knows we are Cats Protection.



Shelter medicine

In a CP survey, 94 per cent of UK veterinary practices indicated they were involved in some form of animal charity work and there is increasing UK interest in a large part of that work – shelter medicine. Several vet schools now include shelter medicine on their teaching curriculum for vet students, the British Small Animal Veterinary Association (BSAVA) is including a shelter medicine stream at their 2015 congress and will publish a *Manual of Shelter Medicine* in 2015/2016.

Shelter medicine principles blend animal welfare science with realistic and practical recommendations, to provide for the needs of, and ensure the quality of life of, animals in the care of rescue and rehoming organisations. Charity resources are always limited and consideration of not just the immediate case in front of you but all other animals being cared for by, or needing help from, the charity is essential.

Shelter medicine encompasses herd health principles, preventative medicine and infectious disease management and also consideration of the role stress and behaviour play in case and shelter management. Cats temporarily housed in rescue facilities present unique issues to the veterinary surgeon providing for their care. The veterinary surgeon's guidance for shelter management and husbandry, together with optimal control of infectious disease can be invaluable. It ensures the appropriate progress of animals from rescue/relinquishment enabling them to be fit and available for rehoming, and also ensures suitable integration into new home environments and helps to safeguard their future health as well as the health of others in the area.

Generally the cheaper, although still appropriate, options for case management should be considered, especially for diagnostic tests. This is to ensure prudent use of charity funds and allows resources to be available for treatment and to help other cats in need. For example, amputation may be considered more appropriate than a complicated orthopaedic procedure and similarly chemotherapy, antiviral drugs, immune-modulatory drugs and radioactive iodine treatment may not be considered appropriate for the management of cats where a charity is paying. With regard to healthy cats, as more screening tests become available, it is financially impossible for a charity to screen all cats it rehomes for every possible disease that can be screened for. It is also arguably contrary to welfare to put asymptomatic cats through endless tests solely to facilitate change of ownership and guarantee health to potential adopters.

Association of Charity Vets

A website has been set up to capture interest from vets working with animal charities. The Association has already had several well-attended meetings. If you work in this area or are interested in participating in this exciting venture, supported by Cats Protection and other charities, see www.cats.org.uk/cat-care for further information.

Veterinary students

Cats Protection has funded academic posts at universities for a number of years and offers extra mural study (EMS) placements for veterinary students in their preclinical years at adoption centres across the UK. Students in their clinical years are offered shelter medicine EMS placements with staff at the National Cat Centre Veterinary Clinic. Some vet schools regularly bring groups of students to visit our adoption centres to increase their knowledge of cats and shelter medicine.

CP Veterinary Department

CP's Veterinary Department, which provides field veterinary support for branches, adoption centres and veterinary practices, neutering programmes, behaviour strategies and veterinary provision for cats in the National Cat Adoption Centre and Eastbourne Homing Centre, can be contacted at veterinary@cats.org.uk or telephone 01825 741 991.

This above number is not for public access; the public can be directed to the charity's National Helpline: helpline@cats.org.uk or telephone 03000 12 12 12.

We realise these are tough financial times for everyone with CP branches and adoption centres often full to capacity, helping more cats when able to. Rehoming of cats in need is a short-term solution to the overpopulation issue, supporting neutering is considered a medium term solution and the long-term aim has to be education on neutering and cat care.

Using the guide

This guide details the nature of veterinary care requested for domestic (non-feral) and feral cats in the care of the charity, as well as highlighting some recommendations the charity makes to cat owners.

We hope this guide is useful to you and together with our veterinary resources found at www.cats.org.uk/cat-care can be kept in your practice as a useful reference so that together we can efficiently use our resources to help more cats. Of course content in this booklet may change and we will update it as often as we are able to.



Maggie Roberts

Maggie Roberts BVM&S MRCVS
Director of Veterinary Services
Cats Protection

**CP believes
there is a
home for
every cat
and is not
a sanctuary
organisation**



References

Murray, JK, Browne, WJ, Roberts, MA, Whitmarsh, A & Gruffydd-Jones, TJ. *Number and ownership profiles of cats and dogs in the UK*, *Veterinary Record*, 166(6), (pp. 163-168), 2010
FAB Feral Cat Manual, (p 7), FAB, 2006

Pet Food Manufacturers Association website, <http://www.pfma.org.uk/pet-purchasing-trends-2008/> accessed 18/10/12

Lovegrove G. *Acquisition and Dispossession of Companion Animals*, *CP Clinic*, Issue 2, (pp. 12-15), 2012

Dawson S, *Understanding human-cat relationships: The foundation for sensitive bereavement care*, *CP Clinic*, Autumn Issue, (pp. 8-11), 2010

Murray, JK, Roberts, MA, Whitmarsh, A & Gruffydd-Jones, TJ. *Survey of the characteristics of cats owned by households in the UK and factors affecting their neutered status*, *Veterinary Record*, 164(5), (pp. 137-141), 2009

Clark, CC, Gruffydd-Jones, TJ & Murray, JK. *Number of cats and dogs in UK welfare organisations*, *Veterinary Record*, 170, 2012

Stavisky J, Brennan M, Dean R, *Demographics and economic burden of un-owned cats and dogs in the UK: results of a 2010 census* *BMC Veterinary Research* 2012, 8:163

Casey, R, Vandenbussche, S, Bradshaw, JWS & Roberts, M.A. *Reasons for relinquishment and return of domestic cats (*Felis silvestris catus*) to rescue shelters in the U.K.*, *Anthrozoos*, 22, (pp. 347-358), 2009

German AG. *The extent and implications of unwanted cats and dogs*, *Veterinary Record*, 2012: 170:19 491-492

Cats Protection survey of veterinary practices, unpublished, 2008

Veterinary care of cats in CP care: the minimum veterinary standards

A available funds vary between CP branches and adoption centres; however, all cats in CP care must receive a minimum veterinary standard of care, with most receiving more than the minimum. The tables below highlight the standards, which differ for domestic (non-feral) cats and feral cats. **Each point is then discussed in the pages that follow.**

Cats Protection can order veterinary medicinal products (VMPs) and other cat care supplies centrally for use in Cats Protection cats, under each branch/ adoption centre vet’s direction. **CP maintains a list of commonly used products that the charity prefers are used where appropriate for CP cats (with the vet’s agreement).** An up-to-date list of these products, for which Cats Protection has negotiated a discounted rate, is available. See page 30 for further details

For cases where diagnostic work-ups, surgical procedures or treatments are likely to be costly, Cats Protection representatives or the veterinary surgeon are encouraged to discuss this with their regional manager and Cats Protection Veterinary Department

Domestic (non-feral) CP cats - minimum veterinary standards

Cats Protection describes domestic (non-feral) cats as those cats which are relinquished by their previous owners or are brought into CP care as strays, but which have had socialisation with people during their critical two-to-eight week old period and are thus suited to rehoming in the domestic environment.



Branch minimum veterinary standards for domestic (non-feral) cats*

- Veterinary clinical examination with diagnostic tests and treatment as necessary
- Blood test for FIV and FeLV for all **sick** cats
- Vaccination against FHV, FCV and FPV, with second/booster vaccinations if still in Cats Protection care when due
- Parasite control including flea and anthelmintic treatment
- Neutering
- Microchipping of all cats and kittens aged 12 weeks and over
- Free temporary pet insurance for new owners

Adoption centre veterinary standards for domestic (non-feral) cats

- Veterinary examination with diagnostic tests and treatment as necessary
- Blood test for FIV and FeLV for all **higher risk** cats
- Vaccination against FHV, FCV, FPV and FeLV, with second/booster vaccinations if still in Cats Protection care when due
- Parasite control including flea and anthelmintic treatment
- Neutering
- Microchipping of all cats and kittens
- Free temporary pet insurance for new owners

* Many CP branches work above this level. Please consult with your CP branch for specific details on any work above this minimum that they may wish you to carry out

Feral cats – veterinary care

Cats Protection describes feral cats as those which have not experienced positive interaction with people during their critical socialisation period of two to eight weeks old and are thus not suited to life in the domestic environment.

Cats Protection believes that the most effective and humane way to assist the feral population is by undertaking trap, neuter and return (TNR) schemes wherever possible. This maintains healthy colonies of controlled numbers and avoids the vacuum effect and growth of population which results following feral removal strategies. However, if return to their original site is not feasible, cats should be re-sited to another suitable outdoor situation such as farms or stables.

Feral cats over 12 weeks of age should not be confined to pens unless absolutely necessary and attempts should not be made to try and ‘tame’ them. They should only be confined to pens or cages for the minimal time required for neutering or for minor health issues to be resolved. Most weaned feral kittens should also be neutered and released.

The care feral cats presented by a CP representative should receive includes:

- neuter and ear tip (with health check under GA to ensure fit to neuter and release)
- where funds allow (please consult your CP representative)
 - a blood test for FeLV/FIV if sick or disease is suspected in the colony
 - a single vaccination against FPV, FHV and FCV
 - roundworm, tapeworm and flea treatment. Where concurrent treatment is unavailable or inadvisable, the vet should elect which is most appropriate

Please consult your CP representative for individual feral cats which are not fit for neutering or release – euthanasia on welfare grounds may be necessary.

Further information in relation to each point can be found throughout this guide and a summary document on feral veterinary care on page 26. Please also see page 26 with regard to feral cats presented by members of the public with a CP neutering voucher. /

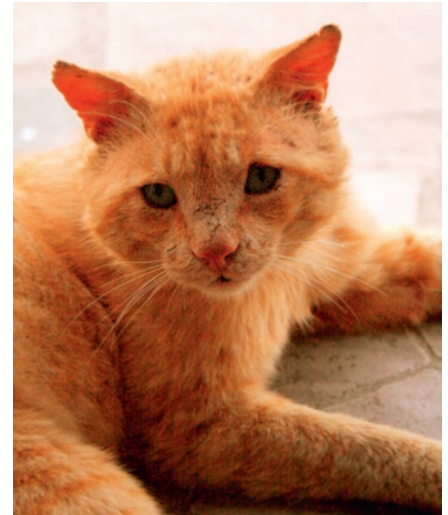


Photo: Martin Dewhurst

Clinical examination of cats in CP care

A full clinical examination should be undertaken as soon as possible after a cat's entry into Cats Protection care. If a cat cannot be adequately examined, it should be sedated/anaesthetised to examine at least once prior to homing. When performing the veterinary examination of CP cats, the vet is asked to consider the following:

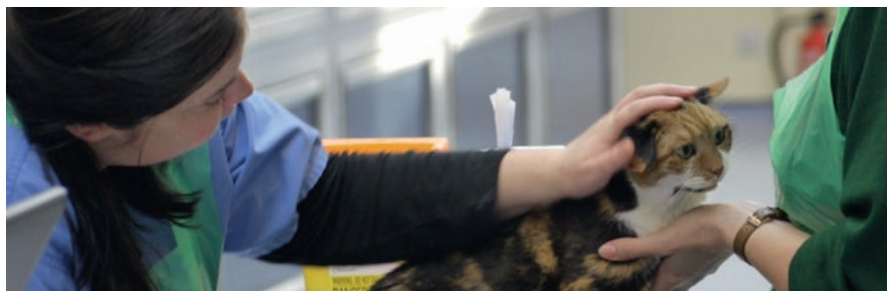


Photo: Martin Dewhurst

Domestic (non-feral) CP cats – veterinary examination

- **Infectious disease:** Please be vigilant in checking for signs of infectious diseases as these are more difficult to control in a rescue environment with the frequent introduction of new, stressed animals. In particular, vets are asked to consider ringworm in cats with any skin lesions, feline parvovirus and upper respiratory tract disease (see infectious diseases section on page 27). A Wood's lamp examination should be carried out – if not already performed by staff/volunteers
 - **Age:** Please make an estimation of the cat's age – making comparison with a previous owner's judgement, if available. It is acknowledged that age estimation is not an exact science, but being able to advise potential adopters of a vet's estimation can be helpful when matching a cat to a potential home and meeting an owner's expectation. It may also affect pet insurance premiums. Adopters are advised of the limitations of age assessments
 - **Sex:** Please make an assessment of the cat's sex and neuter status. Please palpate entire female cats and those of unknown neutered status for pregnancy – ultrasonography to stage pregnancy is not needed. See neutering section on page 16
 - **Microchip:** Please scan for a pre-existing microchip
 - **Stray cats:** Follow CP's stray policy for all stray cats – see page 24
 - **Diagnostic tests:** Please only undertake further examinations or diagnostic tests if necessary in sick cats and when knowing the result of those tests is essential to influence case management – see page 28
 - **Treatment:** Treatment of conditions that carry a reasonable prognosis and do not cause long-term suffering to the cat should be carried out – see routine treatments and quality of life and euthanasia on pages 28 and 23
 - **Fitness to rehome:** Please assess whether the cat is fit to rehome from a veterinary perspective ie it meets all the following criteria:
 - healthy on a full health check or any ongoing conditions are stable
 - has received the minimum veterinary standards – cats are usually rehomed at least 48 hours after a vaccination and 48 hours after castration/seven days after spaying
 - it is not known to pose a zoonotic risk
 - it is likely to cope with transition to an appropriate new home
 - it is expected to enjoy a good quality of life; CP recognises the limitations of a single clinical examination to appraise prognosis and that cats may still become sick shortly after adoption following a clinical examination where nothing abnormal is detected, but the aim is to ensure welfare and reduce the risk of owners facing unexpected consequences soon after adoption
- If a cat is not fit to rehome, please discuss further recommendations which may include monitoring/ further diagnostic tests/further treatment/euthanasia.
- **Records:** All findings and treatment should be recorded, ideally with a medical record for each separate cat. Please ensure all accounts for Cats Protection cats are in the name of the branch/adoption centre and not the Fosterer's name, for example
 - **Recheck:** The vet should recommend when the cat should be rechecked. Cats in Cats Protection care over 12 years old should generally be vet checked at least once every three months and cats under 12 years old should be vet checked at least once every six months. Cats undergoing treatment or those requiring more frequent checks should be checked at time intervals recommended by the vet – or of course upon the CP representative identifying signs of poor health
 - **Referral:** Referral to medical or surgical specialists is generally discouraged – the vet or CP representative should contact the CP Veterinary Department for any CP cat where referral to a specialist is being considered

Feral cats – veterinary examination

When a feral is anaesthetised for neutering, the opportunity should be taken to do as much for the cat as possible and a thorough health check as for domestic cats should be carried out by the vet before surgery commences. Feral cats should not be examined without sedation or general anaesthesia. In particular, please pay attention to:

- **clinical examination:** A clinical examination should be undertaken to assess the cat's health and whether it is expected to have a good quality of life in the wild
- **microchip:** Please scan for a pre-existing microchip
- **diagnostic tests:** All feral cats should be tested for FeLV and FIV where funds allow. Please only undertake further examinations or diagnostic tests if necessary and when knowing the outcome of those tests is essential to influence case management. Tests for which immediate results are unavailable are not appropriate for use in feral cats
- **fitness to release:** Please assess whether the cat is fit to release to its original site or an appropriate alternative site such as farm or stables. Adult feral cats should be confined for the absolute minimum period of time
- **treatment:** Please provide treatment for minor conditions where a single treatment is feasible eg removing a loose tooth, cleaning a wound, treating a minor infection with long-acting antibiotic injections etc. Involved treatments requiring repeated intervention, hospitalisation or confinement are not suitable for feral cats. Euthanasia should be considered for feral cats with conditions that cannot be resolved with one-off treatment
- **records:** All findings and treatment should be recorded



Fitness to travel

On occasion, veterinary practices may be asked to advise on a CP cat's fitness to travel. When assessing whether it is reasonable or appropriate to transport a cat in CP care, please consider the:

- the cat's health
- the cat's behavioural status
- the cat's prognosis in the short and long-term and adoption prospects
- journey time
- type of transportation
- nature of intended destination
- reason for transportation
- alternative options
- any specific considerations needed /

Discussions

The vet is asked to discuss with the Cats Protection representative treatment options, estimated costs and prognosis with regards to the cat's quality of life in care and after adoption. Please also advise the CP representative whether it is recommended potential new owners discuss a cat's condition with the vet prior to adoption and whether medication can be passed on to a new owner.

The vet is asked to discuss any concerns with the CP representative – and CP's Veterinary Department if desired – for example, when commencing prolonged therapy or monitoring of cats with a reasonably guarded prognosis, or when managing an outbreak of infectious disease.



FIV/FeLV testing of cats in CP care

Funds are not generally available for the testing of all cats in CP care for FIV/FeLV

CP recommends the blood testing of its cats deemed to be at greater risk of infection with FIV or FeLV. CP representatives and their vet are encouraged to discuss cases on an individual basis and assess relative risk of each cat before deciding on whether or not to test. At the point of adoption, owners are made aware whether a cat has or has not been tested for FIV and FeLV.

Appropriate cats should be tested as soon as possible after coming into CP care. For example, unless essential, do not wait to test pregnant and lactating queens. Positive results are inevitably traumatic for those caring for the cats, with delays being even more upsetting. Kittens that require testing should be tested as soon as they are big enough to sample ie at around eight to nine weeks of age.

Screening blood testing kits are used first-line. Positive results are confirmed at reliable external reference laboratories using an alternative confirmatory test methodology - except for ferals or cats showing classical signs of the disease. Ideally serum is used for the screening test kits as this may reduce the likelihood of false positive results. Screening test kits can be ordered centrally through CP - see page 30.

Cats Protection FIV/FeLV flow charts offer guidance on testing, confirmation and action in light of results. See www.cats.org.uk/cat-care

Domestic (non-feral) CP cats – FIV/FeLV testing

Follow the stray policy for all stray cats – see page 24.

Cats Protection rehomes confirmed FIV positive cats to indoor homes, if they are clinically well and suited to an indoor lifestyle. Euthanasia is recommended for confirmed FIV positive cats if they are unlikely to have a good quality of life.

Cats Protection euthanases all confirmed FeLV positive cats and those showing classic signs of FeLV that test positive with a screening test.

Potential adopters are made aware whether a cat has been tested prior to rehoming.



CP Minimum veterinary standard – domestic (non-feral) cats to test for FIV and FeLV

- Highest risk cats – sick cats (either already sick when coming into Cats Protection care or which become sick) – showing clinical signs of disease consistent with retrovirus infection

Adoption centre veterinary standard – domestic (non-feral) cats to test for FIV and FeLV

- Highest risk cats – sick cats (either already sick when coming into Cats Protection care or which become sick) – showing clinical signs of disease consistent with retrovirus infection
- High risk cats
 - All entire, sexually mature cats (including pregnant and nursing queens)
 - All cats known to be in contact with cats that are FIV or FeLV positive (this includes all kittens of FIV positive queens)
 - Any cat before it undergoes extensive treatment or surgery
 - Any cat the vet is suspicious of
- Other cats to consider testing if resources allow:
 - All stray cats
 - Orphan kittens or kittens whose queen's FELV/FIV status is unknown

Please see Cats Protection FIV/FeLV flow charts which offer guidance on testing, confirmation and action in light of results. See www.cats.org.uk/cat-care

Feral cats – FIV/FelV testing

Feral cats that require FIV/FelV testing should be blood tested under general anaesthesia (GA) using screening tests. The test should be carried out immediately while the cat remains under GA.

- All sick cats should be tested, but check funding source first and also first please consult your CP representative for individual feral cats which are not fit for neutering or release
- Ideally all feral cats should be tested if funds are available
- It is advised that if not all cats in a colony are being tested a sample of about 25 per cent should be tested. If they are all negative, the rest of the colony does not need to be tested. If any test positive, then all cats in the colony should be tested

If positive for either FelV or FIV, feral cats should be euthanased without confirmatory blood tests as they would have to be confined pending results, which is contrary to their welfare. /



Vaccination of cats in CP care

Vaccination of rescue cats is essential to protect individuals and facilitate herd immunity to limit the spread of infectious diseases. Only veterinary surgeons may vaccinate CP cats, following a clinical assessment and they should complete a CP vaccination record card for each cat. Vaccines preferred for use in Cats Protection cats can be ordered centrally through CP, see discount scheme section on page 30.

Domestic (non-feral) CP cats – vaccination

Timing: All cats should be vaccinated as soon as possible after entry to Cats Protection using Cats Protection’s preferred vaccine. If they have previously been vaccinated in line with the relevant minimum veterinary standard of care – see page 8 – and are up to date, there is no need to repeat the vaccination. However, veterinary evidence of these vaccinations must have been provided. CP cats should usually be vaccinated before neutering.

Stray cats: Stray cats of unknown vaccination status should be vaccinated, even though an owner could come forward, to minimise the risk of an unvaccinated cat contracting infectious disease and the risks to other cats in CP care. See the stray policy on page 24.

Datasheet: Cats should be vaccinated as per the datasheet of the CP-preferred product. Use of vaccines outside the datasheet, eg use of vaccine in young kittens in the face of an FPV outbreak, should first be discussed with CP Veterinary Department.

Pregnancy and lactation: Avoid vaccinating pregnant queens if they are not to be neutered during pregnancy. Lactating queens should be vaccinated at approximately one to two weeks post-partum on a risk:benefit analysis for the particular case (eg in an adoption centre with high feline density, a cat may be at greater risk than when with a fosterer with a single cat where there has been no history of disease in the pen). CP can consent to a vaccine being used off-licence.

Adoption: Cats are kept in CP care at least 48 hours after any vaccination before adoption, in case of a vaccination reaction. /

Feral cats - vaccination

Where funds allow, feral cats should be given a single vaccination while under anaesthesia against FHV, FCV and FPV as part of the trap-neuter-return programme. This may offer protection against FPV for many years. /



CP recommends owners take their cats for at least an annual veterinary health check and have regular booster vaccinations as advised by their vet.

Parasite control for cats in CP care

Flea and worming treatment

Sensible use of flea and worming treatment in rescue cats benefits each individual cat and helps to control environmental issues and the potential spread of infectious and zoonotic disease in facilities used to house vulnerable cats. Flea and worming treatments for Cats Protection cats can be ordered centrally through CP – see discount schemes section on page 30.

Domestic (non-feral) CP cats – flea and worming treatment

All domestic (non-feral) cats (including strays) are treated against fleas and worms as soon as possible after entry into CP care, using CP's preferred treatments as per the datasheet, and appropriate to the age, health and physiological status of the cats. CP has procedures detailing appropriate parasite treatment protocols and intervals for adult, pregnant and lactating cats and kittens in the charity's care. The CP Parasite Procedures can be found at www.cats.org.uk/cat-care.

Feral cats – flea treatment

Feral cats should be given a single treatment against fleas under general anaesthesia, where funds allow, as part of the trap-neuter-return programme if the vet deems it necessary and appropriate.

Feral cats – worming treatment

Feral cats should be given a single treatment against roundworm and tapeworm under general anaesthesia, where funds allow, as part of the trap-neuter-return programme. Where concurrent flea, roundworm and tapeworm treatment is unavailable or inadvisable, the vet will elect which treatment(s) are most appropriate for the case.



CP recommends owners seek veterinary advice on the type, frequency and administration of parasite control for their own cats.

Neutering

The promotion of neutering is one of CP's core objectives. All CP cats which are old enough are neutered prior to being rehomed. For further information, including a veterinary video guide to prepubertal neutering, see our resources at the Kitten Neutering Database (KiND) at www.cats.org.uk/cat-care.

Domestic (non-feral) CP cats – neutering

Age: Domestic kittens in Cats Protection care can be neutered any time from two days after first vaccination. However, adoption should not be delayed by holding kittens back in care for neutering, if a suitable owner has been found. All CP cats four months and over must be neutered before homing where there is an available vet in agreement. Follow the CP stray policy (see page 24) for all stray cats.

Pregnancy: It is recommended cats in CP care up to approximately six weeks of pregnancy are spayed. Giving birth and raising kittens in CP care is stressful for the mother, is arguably detrimental to her welfare and can influence the behaviour of her kittens. It also leads to difficulties in providing safe and adequate socialisation and social referencing, to ensure the kittens become well-adapted pets and have good welfare in their new homes. If end-stage pregnancy or giving birth are imminent ie, there is milk in the mammary glands and/or the cat is showing typical behavioural changes, the pregnancy may be allowed to continue, although the vet is asked to assess each case.

Lactation: Female cats in CP care should usually be spayed at approximately eight weeks after kitting to ensure the kittens are adequately nourished and to facilitate their behavioural development. In contrast with bitches, queens can be neutered when lactating and it does not prolong lactation.

Surgical approach: Female cats in CP care are generally spayed by the left flank approach - to facilitate post-operative monitoring by CP representatives - with dissolvable sutures where possible. The ovaries and cervix should always be ligated. However, female CP cats of unknown neuter status undergoing exploratory laparotomy, when a scar suggestive of neutering has not been found, should have midline surgery performed in the first instance.

Analgesia: All cats should be given analgesia at neutering. Post-operative analgesia should be provided on a case-by-case basis as assessed by the attending veterinary surgeon.

Assessment of neutered status:

Options for the assessment of a cat's neutered status can be found at www.cats.org.uk/cat-care

Feral cats – neutering

Age: Feral cats are neutered from weaning.

Pregnancy: Feral cats should be neutered up to the latest stage of gestation as possible, to prevent the stress of confinement.

Lactation: Lactating feral queens should be neutered – in contrast with bitches, it does not prolong lactation. If the kittens were not found, she should be released earlier than 48 hours post-operatively to allow her to return to her litter, although there may be other queens in a colony situation that would suckle the kittens.

Surgical approach: Feral queens should be spayed by the left flank approach, with dissolvable sutures wherever possible. The ovaries and cervix should always be ligated.

Medication: Analgesia and antibiotic treatment should be given to every feral cat.

Ear tip: Feral cats must be identified as neutered by straight line removal of a 10mm tip (5mm in small kittens) of the left ear and is a condition of voucher payment. This is an internationally recognised means of identification which can be seen at a distance and in low light. This prevents the stress of re-trapping, repeated anaesthesia and surgery. Microchipping should not be performed, except where individual identification is required such as for temporary housing in a CP feral enclosure.

Release: Most female feral cats should be released 24 to 48 hours after neutering (with dissolvable sutures) and most male feral cats should be released 12 to 24 hours after neutering, although weather or health constraints may require exceptions. Acceptance and reintegration back into a colony is likely to be impeded by delays.

CP neutering vouchers

CP helps tens of thousands of cat owners with the costs of neutering through its regional and national campaigns and it is estimated that CP supports the neutering of around one in six cats neutered in the UK. Further information can be found at www.cats.org.uk/what-we-do/neutering

Kitten neutering principles

Keep healthy

Younger animals with juvenile immune system so best to do earlier in the day, before other operations.

Keep fed

Withhold food for three hours only before surgery; do not withhold water. Offer food early in recovery.

Keep calm

Keep littermates together, including recovery and reduce stress from noise, handling etc.

Keep accurate

Weigh accurately and calculate doses based on BSA.

Keep warm

Don't clip or wet excessively when prepping, warm ambient temp, keep insulated throughout and express bladder.

Anaesthetic considerations

CP recommends that female cats are intubated for neutering and maintained on O₂. Also, that at least 20 minutes elapses after initial i/m medetomidine/ketamine injection before administering atipamezole.

Quad protocol

A useful protocol is to use equal volumes of: Medetomidine 1mg/ml, Ketamine 100mg/ml, Midazolam 5mg/ml and Buprenorphine 0.3mg/ml. Can mix in same syringe and give at same time.

CP recommends members of the public have their cats neutered at four months of age or younger

Quad protocol feline dose rates

| Bodyweight (kg) | Body surface area (m ²) | Volume anaesthetic drugs* (ml) | Volume reversal agent 5ml/ml (ml) | Volume Meloxicam* 2mg/ml (ml) |
|-----------------|-------------------------------------|--------------------------------|-----------------------------------|-------------------------------|
| 0.50 | 0.07 | 0.04 | 0.020 | 0.05 |
| 0.60 | 0.07 | 0.04 | 0.020 | 0.06 |
| 0.70 | 0.08 | 0.05 | 0.025 | 0.07 |
| 0.80 | 0.09 | 0.05 | 0.025 | 0.08 |
| 0.90 | 0.10 | 0.05 | 0.025 | 0.09 |
| 1.00 | 0.10 | 0.06 | 0.030 | 0.10 |
| 1.10 | 0.11 | 0.06 | 0.030 | 0.11 |
| 1.20 | 0.12 | 0.06 | 0.030 | 0.12 |
| 1.30 | 0.12 | 0.07 | 0.035 | 0.13 |
| 1.40 | 0.13 | 0.07 | 0.035 | 0.14 |
| 1.50 | 0.14 | 0.08 | 0.040 | 0.15 |
| 1.60 | 0.14 | 0.08 | 0.040 | 0.16 |
| 1.70 | 0.15 | 0.08 | 0.040 | 0.17 |
| 1.80 | 0.15 | 0.09 | 0.045 | 0.18 |
| 1.90 | 0.16 | 0.09 | 0.045 | 0.19 |
| 2.00 | 0.17 | 0.10 | 0.050 | 0.20 |

*Off Licence – Obtain informed owner consent.



Kitten Quad

A handy App to help vets calculate drug dosages using this 'quad' combination, can be found by searching for 'Kitten Quad' in the Apple App Store or Google Play Store



KiND
Kitten Neutering Database

Kitten neutering database (KiND)

The kitten neutering database is a search resource enabling the public to find a vet who will neuter their four month old kitten. The requirement to join the register is that a practice will neuter at four months or earlier and this can also help businesses to acquire bonded clients. CP also hopes to recruit kitten neutering champions. Could those of you who are already neutering at four months or younger consider becoming champions of the cause? This could just take the form of agreeing to be a mentor over the phone or inviting other vets to your practice to see some kitten neutering in action. For further details, go to www.cats.org.uk/cat-care/.

Microchipping of cats in CP care

Cats Protection supports the microchipping of cats as the preferred means of permanent identification.

Domestic (non-feral) CP cats – microchipping

All domestic (non-feral) CP cats which have not already been microchipped should be microchipped prior to adoption as per the relevant adoption centre or branch minimum veterinary standard of care. CP's preferred microchips should be used – see page 30.

Some CP representatives are trained to implant microchips by CP's microchip provider.

Cats Protection microchips can not be used for cats that are not in the charity's care and CP staff and volunteers cannot microchip cats that belong to the public

Kittens can be microchipped from around eight to nine weeks of age – often at the same time as the first vaccination.

Follow the stray policy (see below) for all stray cats.

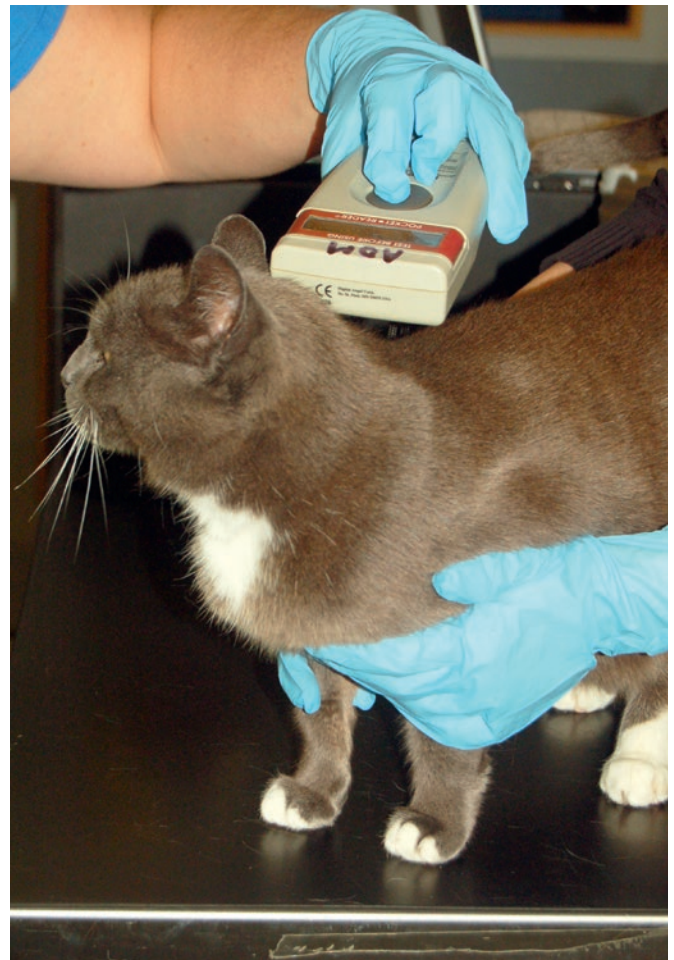
Adverse reactions in CP cats - which may include microchip failure, loss, migration or hair loss as well as injury or disease - should be reported to the Veterinary Medicines Directorate Directorate (VMD) through its 'adverse event following microchipping' scheme - www.vmd.defra.gov.uk

Cats relinquished to CP care with pre-existing microchips have their registered details checked:

- In the case of strays, to attempt to reunify them (see the stray policy on page 24)
- In the case of cats relinquished by their owners, to double-check registered ownership

The microchip's details are re-registered to the new owners at the point of adoption by a member of the public. Cats microchipped while in CP care have their microchips registered to their new owner also at the point of adoption.

CP encourages owners to ensure they always keep their registered contact details up to date. This is especially important for those owners whose cats are still registered outside the UK following their travel into the UK – if these cats stray and their foreign-registered microchip is identified, there is no way of finding out if these cats have entered the country legally through the PETS scheme or whether they pose a risk of rabies and so quarantine or euthanasia may be enforced in the absence of authorities tracing an owner. /



Feral cats – microchipping

Feral cats should not generally be microchipped. When neutered as part of a trap-neuter-return programme, they are identified as neutered by removal of the 10mm tip of the left ear, a mark which can be seen at a distance and in low light. See page 17

Adoption of CP cats

CP believes there is a home for every cat and is not a sanctuary organisation

Cats are matched to potential new owners who are given guidance on integrating their new pet to ensure a successful long-term relationship. At the point of rehoming, an adoption form is completed which transfers ownership and the duty of care to the new owner. Members of the public can find their local CP branch or adoption centre by looking on our website www.cats.org.uk/find-us or contacting the National Helpline (see page 31).

Medical information for new owners

It is CP policy that when a cat is adopted, the new owners are made fully aware of any known health issue or disease the cat had while in, or prior to being in, CP care, whether this is ongoing and whether is likely to recur. **In particular, information on the current dental status is useful.**

A medical summary form is available for completion from the branch, adoption centre or CP Veterinary Department. This is a useful and concise way to ensure owners are fully informed of a cat's health status, preventive care and known health issues. Written in lay terms, it can quickly resolve any later disputes by indicating known presence or absence of a pre-existing condition, and ensures cats are matched appropriately to new owners. It should be completed by the vet whose care the cat is under and is completed at the time the cat is deemed fit to rehome. The form should be updated if any other medical issues arise before the cat is adopted.

Pet insurance

A temporary cover note is issued by CP at the point of adoption, regardless of the cat's age, which provides cover for conditions which are not pre-existing. Should an owner make a future claim, a copy of the cat's medical record while in CP care may be requested by the insurer.

CP does not pay for owners' bad debts, nor for treatment carried out on cats prior to accepting them into its care.

Owner's veterinary fees

Adopters are sought who are able and prepared to take on the commitment of their new pet, including those with on-going medical conditions. It is extremely rare for CP to provide follow-up veterinary financial support to new owners, as financial support for owners including payment of third party veterinary fees are not one of the charity's core objectives. To do so would take resources away from the essential main aims of the charity. In rare instances, CP will enter into agreements at the point of adoption, to fund specified veterinary costs towards specific conditions in identified cats, where adoption has otherwise proven impossible without such financial support. In these situations, a specific agreement form is completed by both CP and adopter and copied to the veterinary practice concerned. /

The form is titled 'Medical Summary for Homing' and includes the following sections:

- To be completed by the Vet:**
 - 1. Colour, 2. Sex, 3. Estimated DOB
 - 4. Neuter status (tick appropriate box below):
 - Intact: Not yet neutered Neutered by previous owner Neutered by CP
 - Extraneous surgery suggested: Not needed Suggested
 - Notivectics present: Assume needed Star (Suggestive) needed
 - 5. FIV/FeLV tested: Yes No
 - 6. Summary of known medical conditions before and whilst with Cats Protection (CP):
 - Excluding dental status below, nothing abnormal has been detected:
 - Conditions:

| Condition | Currently | Recurrent/occasional | Resolved |
|---|--------------------------|--------------------------|--------------------------|
| Any previous or current condition especially those that could recur | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recommended reduce frequency of seizure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Current medication if ongoing condition | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Discordant FIV/FeLV results | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Any dental work performed | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- To be completed by CP Rep:**
 - Microchip No. (give details here if possible)
 - Table for worming:

| 1. Worm treatment | Last date treated | Product used | Next dose due | 2. Next vaccination due |
|-------------------|-------------------|--------------|---------------|-------------------------|
| | | | | |
 - 3. Current diet
 - 4. Weight if known: Date: _____ Weight: _____ kg Target weight (if nec): _____ kg
 - Adopter: _____ Date: _____ CP Rep: _____ Date: _____

At the bottom, it states: 'Top copy: Adopter Middle copy: Petplan Bottom copy: Branch' and includes a small logo for Cats Protection.

Branch – medical summary form

- Branches may choose to use a medical summary form

Adoption centre – medical summary form

- Adoption centres must use a medical summary form

Feline behaviour

Behavioural issues seen in cats in CP care

Cats enter CP care from a variety of sources and backgrounds. In some cases – for example with stray cats – very little history is known. Some cats have pre-existing behavioural issues, which may be the reason for their relinquishment, other cats may develop behavioural issues while in Cats Protection care. Some cats have no behaviour issues evident while in care, but display behaviour issues after adoption.

Given that behaviour problems can have a variety of causes and often the information available only shows how that cat behaves under a specific set of circumstances and factors, it can be very difficult to predict how that cat might behave in a different situation eg in a different pen or with a different carer or once adopted.

CP branches and adoptions centres are advised that all cats showing a change in behaviour or behavioural issue should first have a full veterinary health check with discussion about the specific issue, to rule out any medical causes for that behaviour, before any further behaviour advice is sought. Having ruled out medical causes, before considering any therapeutic treatment, drug or nutraceutical for a CP cat to manage stress or a behavioural issue, please first consider whether there is something about the environment or the management of the animal that can be improved or changed, otherwise the underlying cause may not be dealt with. If a medical/ pharmacological treatment is needed, please also consider the strength and quality of evidence for its efficacy as resources are limited, as well as considering the evidence of its safety.

Given the difficulties faced with a cat exhibiting behavioural problems in rescue care, it is important that measures are taken to try to prevent the development of behavioural problems, through attention to relinquishment information, husbandry and the environment.

Acute and chronic stress in cats in CP care

All cats entering CP care may experience some degree of acute stress due to the change of environment, routine and in some cases, presence of other cats. Individual cats will vary in the time taken to adapt to their new environment. CP representatives caring for cats in the charity's care are given guidance on signs of stress to watch for, as indicated below:

- being withdrawn or hiding more than usual
- sleeping more than usual – some cats will feign sleep while trying to monitor their environment
- becoming less tolerant around people/other animals, or being less tolerant of being handled
- showing aggressive behaviour
- hesitating or becoming more reluctant to use important resources eg only eating or using the litter tray at night
- crouching in a hunched up position with squinty eyes – some cats may cringe away as people approach
- reduction in play behaviour and interaction with people
- reduction in eating or drinking behaviour
- overeating
- increased anxiety or fear
- sleep disturbance
- pacing, circling or restlessness
- coat becoming scruffy or matted (undergrooming)
- house soiling
- overgrooming

Branches and adoption centres are recommended to seek veterinary advice for cats that show prolonged signs of anxiety or stress, such as always hiding, only eating or using a litter tray at night or showing aggressive behaviour.

Examples of husbandry and environmental measures used to help alleviate **acute stress** in Cats Protection cats include, but are not limited to:

- providing a place to hide, such as an igloo bed, a cardboard box or a CP Cat Hide, part of CP's Feline Fort® system
- providing elevated perches
- providing opacity between pens to block the view of other cats
- providing continuity of the cat's scent, such as a double bed system where only one bed is washed at a time
- minimum number of caregivers for familiarity
- providing a consistent, predictable routine
- not mixing cats taken into Cats Protection care from different sources or previous homes
- separating cats which appear not in the same social group even when from the same previous home



Photo: Martin Dewhurst

As cats adapt to their environment, their stress levels tend to decrease and then will plateau. However, stress levels can rise again due to the development of boredom and frustration.

Rescue and rehoming facilities must maintain effective infectious disease control and together with limited space this inevitably restricts the opportunities for cats to exhibit a full repertoire of normal behaviour patterns.

Cats in care have limited control over their environment, can be surrounded by a changing population of unknown cats and their environment is less complex and therefore stimulating than that of the home and outdoor environment. Chronic stress can be evident in cats which had previously adapted to the change of environment but which then develop behavioural issues and it may contribute to a variety of medical conditions.

Examples of husbandry and environmental measures available to help alleviate **chronic stress** in Cats Protection cats include, but are not limited to:

- providing a variety of toys on rotation to maintain novelty
- providing interactive play sessions eg using fishing rod style toys
- providing one-on-one interaction, such as petting and attention
- providing feeding enrichment, such as puzzle balls and puzzle boards

CP kitten socialisation programme

As cats do not have an innate 'need' to be with people – tolerance of and desire to be around people being a learnt behaviour – early handling by a variety of people is essential in order to socialise kittens with humans. The experiences kittens have within their first two months of life are extremely important in influencing their behaviour for the rest of their lives.

Domestic (non-feral) kittens

Being born into and/or raised in a rescue setting can present a unique challenge as the 'unusual' environment – compared with the 'usual' domestic setting – may be considered 'normal' by these kittens and this may present challenges in their new home after adoption. Cats Protection has a structured kitten socialisation programme to help prepare kittens for the variety of experiences they may encounter later in life. The programme, covering the first two to eight weeks of life, introduces and repeats various positive experiences throughout the socialisation period of the kitten. It is very important these experiences are positive as negative experiences during the first two to eight weeks can be as damaging as no experiences.

Feral kittens

The onset of a fear response or hazard avoidance response is six weeks in kittens. It is extremely difficult to socialise kittens that have had no human contact after weaning and almost impossible after reaching sexual maturity. In the interest of welfare, feral kittens found after weaning can be trapped, neutered and returned to their colony, to prevent the stress of confinement, and forced close exposure to people.

While feral kittens that are brought into a home environment before the onset of fear can become socialised with people, it is

worth bearing in mind that genetic influence from the parents, hormonal influence from the queen and learnt responses before coming into human contact will play a role in the friendliness of the kitten in adulthood.



Photo: Mandy Thomas

Fearful behaviour

Domestic (non-feral) cats

Cats Protection recommends a gradual desensitisation and counter-conditioning programme for domestic cats and kittens over the age of eight weeks that have previously been socialised with people during the kitten socialisation period but that remain or have become anxious or fearful.

Feral cats

Feral cats have not been socialised to people or the domestic environment during their socialisation period between two and eight weeks of age. Subsequently, they are not suitable for a desensitisation programme and this would compromise their welfare.

Therefore, feral cats, including feral kittens found after weaning, should be trapped, neutered and returned to their colony, to prevent the stress of confinement.

Feline behaviour advice for the public

For specific, detailed behavioural advice for cats owned by members of the public, CP recommends that owners consult their vet, for a specific related health check, who may then recommend referral to a suitably qualified behaviourist. If the vet is unable to recommend anyone, CP would recommend the Association for the Study of Animal Behaviour (ASAB) to find a Certified Clinical Animal Behaviourist (CCAB) at <http://asab.nottingham.ac.uk/> or The Association of Pet Behaviour Counsellors (APBC) at [www.apbc.org.uk.](http://www.apbc.org.uk/) /

Pain in cats in CP care



Please be especially vigilant for signs of pain in CP cats so that it can be managed appropriately. These signs can be confounded by being in the rescue environment – such as with limited space. Management will of course improve welfare and may also enable those cats to find the right new home more quickly by improving any associated behavioural issues. /

The rescue and rehoming facility for the temporary housing of a cat has some limitations – for example, space and human time spent with each cat. CP representatives caring for cats in the charity’s care have guidance on signs of feline pain to watch for, as indicated below:

- becoming more withdrawn or hiding more than usual
- sleeping more than usual, especially in one place, or slowing down
- becoming less tolerant around people or being handled
- aggressive behaviour
- hesitating or becoming more reluctant to jump up or down, or go through the cat flap
- stiff after resting or showing a preference for using a particular leg when going up and down
- crouching in a hunched up position with squinty eyes
- reduction in play behaviour and interaction with owners
- reduction in eating or drinking behaviour
- increased anxiety or fear
- sleep disturbance
- pacing, circling or restlessness
- coat becoming scruffy or matted, particularly in hard to reach areas
- vocalisation, especially when moving or using the litter tray
- not using the litter tray
- overgrooming
- some cats will purr when in pain

Quality of life and euthanasia of cats in CP care

Cats Protection does not euthanase healthy cats in its care and euthanasia must only be carried out on the recommendation of a vet following their assessment of overall quality of life and prognosis.

Euthanasia of CP cats is performed by the vet, on welfare grounds, as a result of poor feline physical and/or emotional health.

Cats Protection defines a good quality of life as a cat having its welfare needs met and expressing positive signs of physical and mental fitness, mental happiness and demonstration of positive natural behaviours. This can be assessed and interpreted following physical and clinical assessment, and observation of behaviour. This assessment is facilitated by good communication with your CP representative.

Cats Protection has a duty of care as owners or keepers of cats under the Animal Welfare Act which sets out the following needs:

- the need for a suitable environment
- the need for a suitable diet
- the need to be able to exhibit normal behaviour patterns
- the need to be housed with or apart from another animals
- the need to be protected from pain, suffering and disease

Long-term life in a pen is not considered to be acceptable on welfare grounds and so the vet is asked to consider the welfare of cats in the charity's care with physical and behavioural conditions when examining, diagnosing and treating them, to ensure their quality of life in both the short and long term. Examples where euthanasia might be contemplated are:

- cats with acute or chronic conditions where the short-term prognosis is poor
- cats with chronic conditions which preclude them finding a suitable home
- cats with chronic diseases where stabilisation of the condition has not been possible
- cats with conditions where the cat is not amenable to appropriate treatment
- cats with severe behavioural problems causing welfare issues
- conditions where treatment would cause undue suffering to the cat
- all cats confirmed to be FeLV positive (see FeLV flowcharts at www.cats.org.uk/cat-care)
- zoonotic conditions that are not easily managed and pose significant risk to people eg TB

Euthanasia recommendations should be discussed with the authorised CP representative and any disagreements should be discussed with the CP Veterinary Department. It is not acceptable on welfare grounds for a CP cat to have a poor overall quality of life and prognosis, without due consideration being given to euthanasia.

Post-mortem examinations should be performed in cases of sudden death or euthanasia of cats in CP care where infections disease such as feline parvovirus should be ruled out, in the interests of protecting other cats – see page 28.

Cats which die or are euthanased in CP care should have general cremation organised by the veterinary practice.

Stray cats

Please contact the CP Veterinary Department for further guidance and please follow the stray policy – see page 24. /



Stray cats

A cceptance forms are completed by owners when they relinquish their cats to CP. Acceptance forms transfer legal ownership to the charity. With stray cats, ownership issues are more complex.

Cats are regarded in law as property. It is theft if a cat is dishonestly taken from its owner or from anyone else who has possession or control of it, where there is an intention to permanently deprive that person of the cat. It is also a potential offence under the Criminal Damage Act for a person, without lawful excuse, to neuter or euthanase a cat that belongs to another person or is in the care, control or charge of others. Therefore, except where there are urgent welfare concerns, CP makes reasonable efforts to find and reunite a stray cat with its owner prior to undertaking non-urgent work. A CP acceptance form must still be completed by the finder of the cat who passes the cat to CP.

The CP veterinary standard of care that stray cats accepted into CP care receive will be the same as for other domestic (non-feral) cats relinquished to CP care by their owners, but because of their stray status, the timings may differ.

Please note

This guide is not intended to constitute legal advice; it is simply an explanation of the procedures which the charity adopts in respect of stray cats which come into our care. We cannot provide legal advice in individual situations and would always recommend you consider seeking independent legal advice for non-CP stray cats.



CP stray policy

Stray cats must be held in CP care for 14 days before rehoming or non-urgent euthanasia, but other non-urgent procedures such as neutering and non-urgent dental work can be undertaken after seven days. The time-frame starts from when the cat enters CP care, and not before, regardless of whether paper collars have been used, or any history available from the finder.

All details of treatment of stray cats, including euthanasia, should be recorded carefully in case the owner comes forward at a later date. Where euthanasia has been undertaken, the veterinary practice is asked to retain the cat's body for the 14-day period in case an owner comes forward and wishes to identify it.

As soon as possible after admission of a stray cat into CP care:

- CP will make reasonable efforts to find an owner – such as scan for a microchip, advertise, check websites, lost and found registers
- vaccinate as per the branch/adoption centre minimum veterinary standard to reduce the risk of it contracting or transmitting disease to other cats in CP care
- treat for fleas, roundworm and tapeworm
- blood test cats for FIV/FelV under the standard used by the branch or adoption centre. For those that test positive:
 - results should be confirmed at an external laboratory
 - guidance should be given by the attending vet regarding treatment of any sick stray FIV/FelV positive cats. They should not be euthanased during the 14 day period unless on the advice of the attending vet



First seven days in CP care:

- carry out any urgent veterinary treatment for welfare reasons.
- euthanasia should only be carried out when the vet feels there is no other alternative and the cat's welfare would be compromised by continuing treatment - it is recommended to note on the euthanasia consent form how long the cat has been in Cats Protection care
- if a cat needs a general anaesthetic immediately after it enters CP care for urgent treatment, it is acceptable that the cat is neutered at the same time if the vet feels it is appropriate rather than anaesthetising it a second time



Seven or more days in CP care:

- neuter and undertake other non-urgent treatment (except non-urgent euthanasia)
- if it is suspected a specific stray cat may require non-urgent euthanasia after 14 days, it may be appropriate to delay anaesthesia for neutering and other assessment until the cat has been in CP care for 14 days, in case euthanasia is indicated
- if a stray cat is anaesthetised for non-urgent treatment such as neutering between seven and 14 days after coming into care, but an untreatable problem such as a tumour is discovered while the cat is anaesthetised, it may be appropriate that euthanasia is carried out immediately for welfare reasons – contact the CP Veterinary Department for advice when necessary

Fourteen or more days after a stray cat comes into CP care:

- a cat may be **rehomed** – once it is deemed fit to rehome – and non-urgent euthanasia may be undertaken if necessary – for example an FeLV positive cat which is not yet in a critical state to have warranted immediate euthanasia. It is recommended that stray cats with a microchip where the owner has not been traced should not be rehomed for at least 28 days after coming into CP care

Odour issues

If the smell or behaviour of a mature stray tom cat is causing issue, such as stress to other cats in CP care, during the seven-day holding period before a tom cat can be neutered, the issue can usually be dealt with using one or more of the following methods:

- moving the cat elsewhere
- using appropriate odour-eliminating products
- cleaning thoroughly with recommended disinfectants

If the issue cannot be resolved, a medical option, such as use of delmadinone may be considered where the vet feels it is appropriate.

Please contact the CP Veterinary Department for advice if unsure what procedures may be undertaken in individual cases.

If an owner comes forward for a stray cat, they will be advised of any treatment or procedures carried out while in CP care and their outcome. /

Feral cats

CP provides neutering vouchers to members of the public who need help with feral colonies. Unfortunately, due to financial constraints, we can only provide assistance for the neutering of cats and do not provide assistance for other treatments. It is a condition of payment that feral cats neutered are ear tipped. For feral cats presented by CP representatives, the following provides a guide to their veterinary care, which summarises the points, which are covered in more detail on pages 8 to 23 of this booklet.

General Principle: Trap, Neuter and Return (TNR)
Return to original site if at all possible. If not, re-site - immediately - to another outdoor site

Under general anaesthesia:-

Blood testing for FeLV and FIV

- ideally all, but minimum test all sick cats, but check funding source first
- if funds do not allow testing all, a sample of about 25 per cent of a colony should be tested - if any of these test positive then test all
- euthanase if positive for either FeLV or FIV, with no confirmatory testing, as confinement pending confirmation is contrary to their welfare

Roundworm, tapeworm and flea treatment, where funds allow

- Where concurrent treatment unavailable or inadvisable, vet to elect which is most appropriate

Neutering (including health check under general anaesthesia to ensure fit to neuter and release)

- Kittens
 - if weaned, neuter and return. However, if less than eight weeks old and people are able to socialise them, then socialise and rehome (treat as a domestic cat and neuter by four months)
 - if eight to 12 weeks, neuter and return is preferred, but may be able to socialise and rehome
 - if greater than 12 weeks old neuter and return, as socialisation is unlikely to be successful and therefore inappropriate. Do not try to 'tame.'
- Pregnant cats should be neutered as late in gestation as the vet feels is safe for the queen as confining her until the kittens are weaned is contrary to her welfare. If she cannot be neutered it's usually preferable to return her
- Soluble sutures
- Analgesia and antibiotic injection

Ear tipping

10mm straight-line amputation of the tip of the left ear in adults



(slightly less in kittens)

- Treatment of illness or injury
 - only minor conditions where a single treatment is feasible and their ability to recover and thrive in their natural environment upon release, is not compromised
 - not treatments requiring repeated intervention or hospitalisation
 - consider euthanasia for cats with conditions that cannot be resolved with one-off treatment, consulting your CP representative

Microchipping

- generally not recommended

Vaccination

- one dose of vaccine against at least FPV at neutering, if funding permits

General guidelines for release after neutering, case and weather-dependent

- males 12-24 hours after surgery
- females 24-48 hours after surgery
- feral cats should not be confined to pens for prolonged periods

Infectious diseases in cats in CP care

Cats Protection has strict husbandry standards for its cats to minimise the spread of infectious disease. Caring for rescue cats of variable age, physiology, nutritional and health status, which are experiencing acute stress through changes of location leads to increased susceptibility to and/or the shedding of a variety of feline infectious diseases.

Please demonstrate excellent hygiene to CP representatives who will inevitably follow your example. Please wash hands/use disinfectant wipes or gels between examining cats, wipe the stethoscope and other equipment between uses on CP cats, etc.

Cats Protection has some guidance for the management of infectious disease outbreaks. Please note that some infectious disease agents require specific disinfectants and husbandry regimes – particularly ringworm, feline parvovirus and coccidia.

The vet or CP representative should contact the CP Veterinary Department at least, in the event of:

- a case of feline parvovirus
- a case of MRSA
- a case of TB
- a case of any notifiable or reportable disease
- any situation where there are difficulties controlling outbreaks of infectious disease and where further guidance is needed
- more than one case of FIP
- an outbreak of ringworm*
- an outbreak of cat 'flu*
- an outbreak of vomiting or diarrhoea*

* In these cases, an 'outbreak' is where a disease has spread to other cats in the facility

Please explain the nature and risk of any zoonotic infections diagnosed in CP cats to their carers. The charity cannot rehome cats with known zoonotic infections until they are confirmed free of the disease or are of minimal zoonotic risk, and it has a duty to protect CP representatives from zoonotic diseases. When dealing with uncommon zoonotic diseases (such as MRSA, TB, etc) or for further guidance, please contact the CP Veterinary Department. /



Routine procedures/treatments for cats in CP care

Consent

Please ensure informed consent is given by an authorised CP representative before undertaking any diagnostic, surgical or medical procedure or hospitalisation on CP cats and follow the stray policy.

Diagnostic tests in cats in CP care

Additional diagnostic tests should only be performed in sick cats when knowing the outcome is essential to influence case management. Judicious use of funds for diagnostic tests allows resources to be available to help other cats in need. Also, with regard to healthy cats, as more screening tests become available, it is financially impossible for the charity to screen all cats it rehomes for every possible disease that can be screened for. It is also arguably contrary to welfare to put asymptomatic cats through endless tests solely to facilitate change of ownership and 'guarantee' health to potential adopters. It is important that adopters are informed of the level of testing that has been done and the fundamental nature of pet ownership ie that pet health cannot be guaranteed.

The following are examples of tests rarely considered necessary in the shelter environment:

- laboratory identification of FHV or FCV
- screening for FCoV
- routine testing for FPV – except where there is clinical suspicion
- ultrasonography for pregnancy

Post-mortem examinations should be performed in cases of sudden death, or euthanasia of cats in CP care where infectious diseases such as FPV should be ruled out, in the interests of protecting other cats. However, extensive post-mortem tests for non-infections causes are not generally considered appropriate use of charity funds

Diagnostic testing including routine pre-anaesthetic and geriatric blood tests and blood pressure monitoring should only be performed in cats where there is clinical suspicion of disease, and not routinely in all healthy cats, regardless of their age

Laboratory submission forms should always be in CP's name and not the name of the fosterer for example.

If in doubt, contact the CP Veterinary Department.





Medical treatments

As funds are limited, please consider the strength and quality of evidence for the efficacy and safety of products including nutraceutical products when recommending them to cats in CP care. See page 30 for details on centrally ordering discounting products for use in cats in the charity's care.

Cascade

Cats Protection understands that there may be occasions when it will be necessary to use medicines, which while not specifically authorised for the treatment of cats may be used legally when justified by the veterinary surgeon clinically, under the Veterinary Medicines Regulations 'Cascade,' and that there may be unknown side-effects associated with the use of such medicines. Please discuss this with the authorised CP representative when prescribing products to cats in CP care under the 'Cascade.'

Complementary therapies

Complementary therapies, in place of conventional therapies, should not be used for the minimum veterinary standard in cats in CP care. If they are used additionally in CP cats, this should only be by a suitably trained veterinary surgeon.

Referrals

Referral of CP cats to medical or surgical specialists is generally discouraged and it is recommended that CP representatives discuss with their regional manager and CP Veterinary Department before internal or external veterinary referral is undertaken.

Common conditions

When considering treatment options for cats in CP care, please also consider their impact on rehoming (where their welfare needs can often be better met) and timing - for example, hyperthyroid cats are generally more easily homed following thyroidectomy where appropriate, rather than on daily medication. Cats with fractures can generally be rehomed more quickly following amputation, rather than complex surgical repairs. See www.cats.org.uk/cat-care for guidance on the approach to management of common conditions in cats in CP care such as heart murmurs, FPV, ringworm, FIP and FIV/ FeLV testing scenarios.

Dental treatments

Only necessary therapeutic dental procedures should be performed on CP cats where a periodontal problem is of immediate concern to the cat's welfare – for example, Feline Odontoclastic Resorptive Lesions (FORLs), broken or loose teeth causing pain or marked gingivitis/stomatitis. Preventive dental procedures should not be performed due to cost, additional stress and their potential to prolong the time before a cat is available for homing. It is important that potential owners are informed of the cat's dental status prior to adoption. /

Costs

CP funds are limited and so generally the cheaper, although still appropriate, options for CP case management should be considered – for example, amputation instead of complicated orthopaedic procedures may be in the cat’s best interests.

For cases where diagnostic work ups, surgical procedures or treatments are likely to be costly, CP representatives are encouraged to discuss this with their regional manager and CP Veterinary Department.

In contrast with some other charities, CP branch and adoption centre cats and funds raised are not owned by the branch/ adoption centre but are owned by CP. Cases, costs and records can therefore be discussed and shared with CP regional managers and the CP Veterinary Department, when necessary. See page 28 for further information on routine treatments.

Commonly ordered products and discount schemes

Following selection of clinically appropriate products, CP has negotiated discounts with a number of suppliers to enable CP to make considerable savings when buying veterinary products for cats in its care. To take advantage of these discount schemes, most items must be ordered via CP. The discount schemes include:

- **Veterinary Medicinal Products (VMPs):** A veterinary wholesaler scheme is available for the purchase of vaccines, flea and worming products and commonly used veterinary medicinal products for use in CP cats
- **FIV/FelV testing kits:** FIV/FelV screening testing kits can be purchased through the veterinary wholesaler scheme, as with VMPs above
- **microchips:** A scheme to purchase microchips directly from the manufacturer is available for use in CP cats
- **external laboratory:** A comprehensive veterinary diagnostic laboratory scheme is available for discounted tests on samples submitted from CP cats

These discount schemes are regularly reviewed by the Veterinary Department and are subject to change. An up-to-date list of Cats Protection’s commonly-ordered products for which CP has negotiated a discounted rate, is available from your CP representative or CP Veterinary Department and at www.cats.org.uk/cat-care. We request that these products are ordered and selected, where appropriate.

Most commonly used veterinary medicinal products can be ordered through the CP wholesaler scheme. It is however more cost effective for most injectable medications (excluding vaccines) to be supplied through the vet’s own stock, due to the relatively short in-use shelf life of these products.



Invoices

Accounts should be in the name of CP and the branch/adoption centre, and not a fosterer’s name for example and the specific cat(s) should be detailed. We would be grateful if veterinary practices can provide CP branches and adoption centres with invoices/statements that meet HMRC invoicing requirements of a VAT invoice, detailing all services charged, to enable CP to reclaim the attributed VAT where appropriate. Where any VAT exemptions apply, these are the responsibility of the veterinary practice. Authorised CP representatives can provide invoicing address details. /

CP contact details

Veterinary Department:

01825 741 991 or veterinary@cats.org.uk
(not for the public)

Neutering Department:

01825 741 926 or neutering.support@cats.org.uk

National Helpline:

03000 12 12 12 or email
helpline@cats.org.uk

Finance Department:

01825 741 949 or accounts@cats.org.uk

Postal address:

Cats Protection
National Cat Centre
Chelwood Gate
Haywards Heath
Sussex
RH17 7TT



Information for Vets

Guidelines, disease protocols and procedures for vets can be found on our website at www.cats.org.uk/cat-care and click on Information for Vets.

PR

- If you are treating a Cats Protection cat that has an interesting background story, please contact the charity's Media Office on 01825 741 911 between 9am and 5pm, Monday to Friday (excluding Bank Holidays) or email media.office@cats.org.uk
- Promotion of the excellent joint work carried out by vets and local Cats Protection branches to the public benefits everyone and helps spread important animal welfare messages
- Feline case reports and articles for a veterinary audience, intended for *CP Clinic* magazine are always welcome and can be sent to the Veterinary Department

Support materials:

- national website www.cats.org.uk
- *CP Clinic* – magazine for veterinary professionals – one free copy per practice is available
- leaflets - *Essential Guides* and *Veterinary Guides* – can be helpful to give to clients to support your advice during consultations – they can be downloaded on the website and hard copies ordered free for the practice, subject to availability
- neutering posters – promoting neutering to your practice
- Diabetic Cat Register – register of volunteers willing to give non-veterinary support and advice to owners of newly diagnosed diabetic cats. Owners can contact the National Helpline for a copy
- *The Cat* magazine – magazine for all cat lovers – one free copy per practice is available for display in your waiting room

Your local CP branch/adoption centre details:

Details of your local branch can be found at www.cats.org.uk/cat-care

Thank you

Cats Protection is grateful to the following for their support in the production of this guide:



For more information, go to www.cats.org.uk/cat-care and click on **Information for Vets**.

Cats Protection Reg Charity 203644 (England and Wales) and SC037711 (Scotland)