

# VETERINARY CARE GUIDELINES

## Vaccinations and Anti-Parasitic Treatments

GDB puppies leave campus having been given the following vaccinations and anti-parasitic treatments:

- 2 weeks - Pyrantel
- 3 weeks - Ponazuril
- 4 weeks - Pyrantel
- 6 weeks - DA2PP, Intranasal Bordatella, Pyrantel and Ponazuril
- 8 weeks - DA2PP, Heartgard Plus and Ponazuril
- 10 weeks - if a puppy is still on campus when it is 10 weeks old it will be given an additional DA2PP booster

When puppy raisers receive the puppy, they are instructed to continue with the following schedule:

- 12 weeks - DA2PP, Leptospirosis #1
- 16 weeks - DA2PP, Rabies, Leptospirosis #2  
*Puppies are considered fully covered 5 days after this vaccination*
- 18 weeks - Influenza, bivalent #1 (OPTION 1)
- 20 weeks - Parvovirus vaccine only (if available) or DA2PP and Influenza, bivalent #2 (OPTION 1) or Influenza, bivalent #1 (OPTION 2)  
It is thought that maternal antibodies from the dam can last longer than 16 weeks in approximately 1% of GDB puppies and continue to cause resistance to vaccination attempts. This additional vaccine at 20 weeks is expected to confer immunity to Parvovirus to that 1% which did not respond to the initial vaccines.
- 23 weeks - Influenza, bivalent #2 (OPTION 2)
- *GDB does not recommend or reimburse for Corona virus or Lyme disease vaccines*

**NOTE:** some local veterinarians will prefer to administer the influenza vaccination series three weeks apart instead of two. If that is true of the local veterinarian you utilize, the second option is to administer the first influenza vaccination at 20 weeks and the second at 23 weeks.

## Visiting GDB Campuses

GDB puppies are welcome to visit the GDB campuses and attend graduations one day after their second influenza vaccination is complete, whether that be at 20 weeks plus one day, or 23 weeks plus one day assuming that all other vaccinations are also completed.

Puppies not yet fully vaccinated should only visit campus for scheduled veterinary appointments. Puppies coming to GDB campus for veterinary care that are under 16 weeks of age should be carried from the car to the veterinary clinic unless they are too large to be carried safely. Puppies that are 16 weeks of age or older may be walked into the clinic for their appointments. Puppy raisers should park as close to the clinic as possible and keep

puppies off any grass; hard surfaces should be used for walking and relieving. Any individual exceptions to this policy must be approved by GDB Veterinary staff.

## Veterinary Care Reimbursement Guidelines

GDB appreciates all the love and care raisers devote to the puppies they raise. Guide Dogs for the Blind is 100% committed to providing the highest quality of care to the wonderful dog in the GDB program and believes that the Veterinary Care Program will guarantee that this occurs consistently and efficiently. In the event of an emergency, GDB authorizes raisers to get stabilizing treatment for a puppy. As soon as the condition has been stabilized the raiser should request that the attending veterinarian contact veterinary staff at GDB prior to providing further care. The raiser should also contact their leader who will contact GDB as soon as possible.

## Chain of Communication

It is important that there is good, clear communication about the health and care of all guide dog puppies. In order to ensure that this occurs, puppy raisers and leaders are asked to keep in touch with one another, communicate with their CFR and provide timely documentation of veterinary care to GDB.

## The process for Vet Care Reimbursement is broken down into two tiers:

- **Tier 1** care is for mild illnesses and conditions (*see detailed list below*). Total treatment cost for Tier 1 conditions ***should not exceed \$150***. When at the vet with the puppy, please ask the vet if care is likely to fall in this range. Treatment for **Tier 1 conditions does not require preauthorization** from Guide Dogs for the Blind. Puppy raisers will communicate all health concerns about their puppies to their leaders and follow their direction for care. Leaders will consult with the CFR when necessary to determine when a puppy should be taken to the vet.
- **Tier 2** includes any treatment that is estimated to cost **more than \$150**. In addition, any conditions that are chronic or recurring are considered Tier 2. ***Preauthorization for Tier 2 treatment is required***. If a problem does not resolve as expected, recurs more than once, or requires urgent attention, the leader will alert the CFR. ***The puppy raiser is responsible for contacting GDB for preauthorization of care***. The raiser is most familiar with the situation and has first-hand knowledge of the dog and its condition. The GDB vet will make recommendations for further care. Many of the more difficult and/or chronic conditions will involve the GDB veterinarian working directly with the CFR, leader and puppy raiser. Working together will insure a clearer, more effective treatment plan for the puppy.
- In addition to the care of specific conditions, GDB appreciates the raiser's efforts to ensure that all veterinary invoices and other records are sent in to GDB as quickly as possible. This allows us to maintain a complete and up-to-date record for each puppy. This is especially important when a dog requires urgent care or is experiencing a complex, chronic problem.

To help puppy raisers recognize what type of care their puppy needs, please review the following guidelines.

## **Guidelines to determine Tier 1 or Tier 2 Level of Care by Condition**

### **Lameness**

- For mild lameness: (still bears weight on limb, no other obvious pain or discomfort) raisers should let leader know of limp and provide strict rest for 24 to 48 hours. If limp persists after 48 hours, or if resolved with rest but reoccurs soon after resuming normal activity, schedule vet visit.
- For moderate to severe lameness: (obvious lameness, partial to total non-weight bearing, obvious pain when handled or moving), schedule vet visit.

#### Vet visit:

Exam and meds are ok. If radiographs are recommended, visit is likely to exceed Tier 1 care. Call GDB Vet Care Coordinator for authorization. Typically the specific area of discomfort that is causing the lameness should be identified prior to taking any x-ray.

### **Eye Problems**

Tier 1: if the puppy has minor eye discharge (a bit of 'sleep' in the corner of its' eyes once or twice a day) or minor watery eyes with no other symptoms, the raiser should monitor to see if this resolves on its own. If it persists for a week or more or becomes worse during this time, the raiser should consult their leader.

If a puppy has marked redness (inflammation, conjunctivitis), significant ocular discharge, squinting, rubbing/pawing at its eyes, or otherwise seems to be showing signs of eye discomfort, the puppy raiser should contact their leader and take the pup to local vet for exam and meds. This does not require preauthorization.

If a puppy's eye(s) appear cloudy, the puppy raiser should consult with their leader and make an appointment to take the dog to the vet.

#### Vet visit:

As long as the estimate for this care is less than \$150, it is considered Tier 1 and no preauthorization is necessary.

Tier 2: if the local veterinarian recommends an exam with the ophthalmologist or recommends any sort of surgery, the raiser should contact their leader and the GDB Vet Care Coordinator for consultation.

If a raiser is concerned about a puppy's vision, the raiser should notify their leader and contact the GDB Vet Care Coordinator.

### **Urinary tract problems**

Tier 1: if a puppy is urinating frequently or inappropriately, the raiser should consult with their leader to determine whether the pup's pattern may be more indicative of a houstraining or marking issue vs. a medical problem. If the leader feels a medical issue

could be at the root of the problem, an exam by the local vet is recommended. The leader may also consult with the CFR at this point.

Vet visit:

The veterinarian will likely do an exam and collect a sample of urine to help determine if there is a medical issue contributing to the frequent/inappropriate urination. The veterinarian may dispense medications to treat a urinary tract infection if one is identified. The most common causes for frequent/inappropriate urination in GDB pups include:

- non-medical issues like excitement, immaturity (poor housetraining), drinking lots of water (tanking).
- vaginitis
- bladder infections

Tier 2: if a puppy has been treated for a urinary infection and symptoms resolve but then return a short time after treatment, the puppy raiser should consult with their leader and consult with the GDB Vet Care Coordinator.

**Skin problems**

Tier 1: there are a large variety of things that can cause skin problems. If a puppy raiser notices a problem, they should contact their leader for advice on whether it is minor and manageable at home, or whether the pup should see the vet. Sometimes small or minor lesions can be addressed at home by use of medicated shampoo (chlorhexi), ear cleaner (chlorhexi flush) or Neosporin ointment. Ensure adequate flea control on ALL pets in the household, including indoor or outdoor cats. The leader may choose to consult with the CFR at this time.

Vet visit:

If the club leader or CFR recommend a vet visit, the puppy may be taken for an exam and/or medications. Sometimes a skin scraping test is indicated. Likewise, if the local vet recommends a diet change this must be discussed with the club leader and CFR. Consultation with the GDB Vet Care Coordinator may also be indicated.

Tier 2: any of the following situations require consultation with the GDB veterinary staff before proceeding:

- The local vet is recommending blood tests or allergy tests because of skin problems
- If pup experiences recurrent skin problems, the puppy raiser and leader should seek input from the CFR who may consult with the GDB vets, depending upon nature of problem.

**Vomiting**

Tier 1: for a pup that vomits once or twice and appears healthy otherwise, withhold food and water for 6-12 hours and monitor. If no further vomiting occurs, slowly reintroduce water first and then small amounts of food after this waiting period.

If the puppy has severe vomiting (more than 2-3 times in the first hour) and it continues after the fasting period or if the pup acts lethargic or listless, the puppy raiser should

consult the leader.

Vet visit:

Tier 2: if vomiting is particularly severe and continuous, especially if the puppy is acting lethargic or listless or if vomit contains blood, seek medical care at the local veterinarian immediately. The raiser should call the leader and the GDB veterinary clinic once the pup is at the hospital being examined.

If a pup requires a vet visit, the veterinarian may want to do a radiograph of the abdomen as well as dispense medications, and possibly a special diet. Please make sure the local vet stays in close contact with the GDB vets.

**Diarrhea**

When to contact a veterinarian:

- the puppy's temperature goes above 103 degrees
- vomiting accompanies the diarrhea for more than half a day
- quite a bit of blood appears in the stool
- the diarrhea persists more than two days
- the puppy cannot keep water down
- the puppy is markedly depressed

Tier 1: if diarrhea is mild (stools are loose or watery but no blood) and pup is acting normally, the pup should be fasted for 8-12 hours depending on the severity and the puppy's age (8 hour fast for puppies under 4 months; 12 hour fast for puppies over 4 months). It is ok to continue to give water normally during this time. If diarrhea stops and the puppy is acting normally, then a bland diet (see below) can be started after the fasting period. If stools improve, the bland diet should be continued until they are normal and then the regular diet should be slowly re-introduced over a 2-3 day period.

If stools continue to be loose after the initial fast and introduction of bland diet, raisers should contact the leader for more instructions.

If the puppy has recurring bouts of diarrhea with days or weeks of normal stool in between, the leader should be contacted and consult with the CFR. The leader may recommend taking the puppy to the vet. The veterinarian may want to do more diagnostic tests after examining the pup. The raiser should take a fresh stool sample to the visit as the vet may want to analyze it. If anything more than routine tests or treatments are recommended, the puppy raiser should contact GDB Vet Care Coordinator first for more instructions.

Vet visit:

Tier 2: if diarrhea is severe (large amounts, frequent episodes, or bloody) the raiser should contact their leader for more advice before starting the bland diet protocol.

If vomiting is also present or dog is acting very lethargic or depressed, take the dog to the vet immediately. Contact the leader and the GDB vet clinic when at the hospital and the pup is being examined.

### ***Bland Diet for Diarrhea***

Feed the puppy absolutely nothing for the first 8 hours (for a puppy under 4 months), or 12 hours for an older puppy (4 months or more) after a diarrhea episode occurs.

When the puppy is ready to eat again use either a formulated bland food such as Hill's Science Diet I/D recipe or prepare a bland diet of cooked (not instant), white rice and non-fat or low fat cottage cheese. The meal should be 1 part cottage cheese to 3 parts rice. Use homemade diets exclusively for 24-48 hours; during this time offer plenty of fresh water. Puppies should not be on a homemade bland diet exclusively for more than 3 days without consulting with the local veterinarian.

The puppy can also be given Pepto-Bismol for up to 48 hours. This over the counter medication is available in several forms. Pepto caplets may be the easiest form to give the puppy. They are capsule-shaped tablets that are meant to be swallowed like a pill (no chewing needed and no messy liquid to clean up). For puppies less than 20 pounds, give either 1 teaspoon or one half of a caplet. For puppies 21-40 pounds, give 2 teaspoons or 1 caplet. For puppies over 40 pounds, give 4 teaspoons or 2 caplets. This medication can be given 2-3 times per day for up to two days in a row.

### **Coughing**

Tier 1: if a puppy is coughing mildly and it does not resolve within 24-36 hours on its own, or gets worse, the raiser should call their leader. A thorough history of the puppy's coughing (e.g., how long it has been going, when does it happen, and whether it is getting worse) will be helpful at this point.

If the pup's coughing is severe and they are acting lethargic or depressed, the leader may advise the raiser to take the pup to the veterinarian.

#### Vet visit:

Usually coughing can be treated symptomatically with medications. Further tests such as radiographs are generally unnecessary, especially if this has not been a chronic problem.

Tier 2: if the veterinarian recommends additional tests including radiographs, the puppy raiser should contact their leader and the GDB veterinary clinic for authorization.

### **Ear infections**

If a raiser notices discharge or debris in the puppy's ears, they will have to assess the severity to decide whether the pup should be taken to the vet.

Tier 1: mild debris noted after cleaning may be normal. If debris is still present in subsequent cleanings or the puppy raiser notices any redness or pain when cleaning the ears, they should contact their leader. If there is a large amount of discharge, swelling or redness, a bad odor in the ears, or dog seems to be in pain (crying out or scratching at ears), the raiser should contact their leader and make an appointment with the local vet.

#### Vet visit:

The veterinarian will likely look inside the ear canals to assess the severity of the infection. They may want to take a sample of the debris to evaluate what is causing the infection. They will probably dispense medications to treat this and schedule a follow-up

visit to ensure the ear infection has resolved. These rechecks are very important as ear infections can linger for long periods of time if not eliminated completely.

Tier 2: if an ear infection does not resolve after treatment or if the puppy continues to develop new ear infections, the raiser should inform their leader and contact the GDB veterinary clinic for consultation.

### **Vaccinations and Spay/Neuter**

Vaccinations given according to the approved schedule are Tier 1 and no pre-authorization is required.

**Never** spay or neuter a GDB puppy without authorization from Guide Dogs for the Blind. The Puppy Raising office sends an official spay/neuter letter to raisers to give to their veterinarian. When having a puppy spayed or neutered, no reimbursement authorization is necessary as long as the cost for the procedure falls within the existing guidelines (neuters:\$200; spay: \$250). Immediately upon completion of the altering procedure, the local veterinarian will complete and return the spay/neuter certificate provided to Guide Dogs for the Blind.

### **Fleas**

All GDB puppies that live in states where fleas reside go home with a supply of Frontline. Frontline should be applied the first of every month. If Frontline is not effective contact the leader who will contact the CFR about using Frontline every 3 weeks instead of 4 or the possibility of using an alternative product (see *Flea Prevention Information for Puppy Raisers* in the *Forms and Resources* section).

Flea infestations can occur quickly in any home. It is important that all family pets are treated with a flea control medication. Frequent vacuuming of the home with special attention paid to dog beds and dog areas can also cut down and help manage flea infestations. Flea eggs laid on the host (dog or cat) generally fall to the ground where they hatch. Vacuuming can greatly reduce the number that survive and hatch. It may also be necessary to treat the home with a flea control spray or fogger and treat the yard before an infestation is under control.

### **Non-Reimbursable Items**

The following items are not available for reimbursement:

- Any grooming, including toenail clipping and anal gland expressing
- Food and supplements not on the approved Nutritional Guidelines or pre-approved by GDB
- Vaccinations not listed on the approved guidelines
- Pill pockets
- Flea and tick prevention (provided by GDB directly)
- Heartworm preventative (provided by GDB directly)
- City or county licensing fees or Rabies tag fees