



CANINE LIFE STAGE HEALTH CHECKLIST

SENIOR:

THE LAST 25% OF ESTIMATED LIFESPAN THROUGH END OF LIFE

General (PE and Consultation)

- Body mapping.
- If senior pets are sedated or anesthetized for any procedure, this is an opportunity for a more comprehensive physical exam (oral examination, abdominal palpation, orthopedic evaluation, etc.).
- Educate owners on signs of early orthopedic disease and osteoarthritis (OA). Collect pet owner observations of mobility and activity at home. Evaluate for the presence and stage of OA during PE.
- Educate clients on the need for more frequent examinations (at least q 6 mos) in conjunction with appropriate diagnostic screening tests.

Pet Lifestyle and Safety Risk Assessment

- Evaluate necessary environmental adaptations for mobility, sight, and hearing.
- Increase awareness of the impact of mobility or vision issues in responding to environmental challenges (ability to move out of the heat, cold, navigate in the dark).

Zoonoses and Human Safety

Covered in the “All Stages” section.

Behavior

- Routine evaluation for cognitive changes, anxiety/phobias and cognitive dysfunction.

Nutrition

- Identify and address comorbidities.
- MCS is especially important to evaluate as it pertains to mobility in aging dogs.
- Emphasize weight control and benefits to overall health; discuss the ideal weight and muscle condition for the patient.

Parasitology

- Continue year-round control for intestinal parasites.
- Perform fecal examination for intestinal parasites 1 to 4 times per year depending on lifestyle and use of preventives.
- Continue on heartworm preventive.
- Test annually for heartworm and tick-borne infections.

Vaccinations

- Continue core vaccines per current guidelines:
 - Distemper, Adenovirus-2, Parvovirus, +/- Parainfluenza: Administer a single dose of a combination vaccine within 1 year following the last dose in the initial vaccination series. Administer subsequent boosters at intervals of 3 years or longer.
 - Rabies: Administer a single dose of vaccine. In most states and provinces, veterinarians are allowed discretion in administering either a 1-year or a 3-year labeled rabies vaccine.
 - ◆ The interval between subsequent doses is determined by the product label of the last vaccine dose administered (i.e., either 1 year or 3 years). For state-specific information on rabies immunization and law, visit rabiesaware.org.
- Continue appropriate noncore vaccines per current guidelines, and re-evaluate lifestyle and exposure risk:
 - *Bordetella bronchiseptica*, *Borrelia burgdorferi*, Influenza (H3N8, H3N2), *Leptospira* (4-serovar): Where risk of exposure is sustained, administer a single dose 1 year following completion of the initial 2 doses, and annually thereafter.
- Consider antibody titer testing for the purpose of determining protection from infection from canine distemper virus, canine parvovirus, and canine adenovirus-2.
- The frequency of antibody testing should be based on clinical judgement, but it is reasonable to perform antibody testing at least as often as the interval or booster vaccination.

Dentistry

- Evaluate the progression of any periodontal disease.
- Perform conscious and unconscious oral evaluation as indicated.
- Recommend full-mouth radiographs, dental cleaning/polishing, charting, and scoring per *AAHA Dental Care Guidelines for Dogs and Cats*.

Reproduction

- For intact animals, evaluate reproductive health, including prostate, testes, and mammary gland. Obtain history of female dog heat cycles.

Breed-Specific Screening

- Screen for neoplasia and late-onset disorders. Provide ongoing management of breed-related conditions.

BCS: body condition score
MCS: muscle condition score