

Standard LPCHS Protocol for Sick Kittens & Cats

This is a resource for fosters to better understand our treatment protocols. Fosters should NEVER begin treatment for an ailment without first checking in with the Foster Coordinator, shelter animal care staff, or the LPCHS veterinarian.

- ❖ UPPER RESPIRATORY INFECTION: clinical signs include nasal discharge (snotty nose), sneezing, conjunctivitis (swollen, goopy/watery eyes)
 - KITTEN & ADULT:
 - SQ Convenia injection once (0.045cc/#)
 - Oral famciclovir: 90 mg/kg BID x 14d (minimum - may require longer treatment)
 - This is typically caused by feline herpes virus which is contagious but fairly easy to kill in the environment (unlike parvovirus).
- ❖ CONJUNCTIVITIS
 - KITTEN & ADULT
 - Erythromycin or Terramycin eye ointment in affected eyes BID-TID depending on severity for minimum of 14 days.
 - Administration instructions: place ~1/8" strip of ointment in inside corner of affected eye 2x/day for 14d.
 - This is often caused by Chlamydia which is only sensitive to those antibiotics. NPB will not help.
- ❖ PANLEUK/PARVO CONCERN: symptoms include anorexia, lethargy, diarrhea, vomiting (in that order of frequency)
 - KITTEN & UNDERVACCINATED ADULT
 - Place in cat iso.
 - SQ Convenia injection once (0.045cc/#)
 - SQ fluids: 36mL/kg TID
 - Nutrical QID if not eating
 - NOTIFY VET if Panleuk is suspected.
- ❖ DIARRHEA
 - KITTEN THAT IS BAR AND EATING WITH NO WEIGHT LOSS
 - STRONGID:
 - Check when received 1st dose and administer 2nd dose if 14d have passed
 - ALBON: 55mg/kg 1st day, 27.5mg/kg daily x 6d

- If diarrhea continues for 2 days after Albon treatment is finished, start metronidazole at 17mg/kg daily x 8d
 - If diarrhea is watery and kittens are < 2#, give 24mL/kg SQ fluids TID
 - KITTEN THAT IS NOT EATING (worried about parvo/panleuk)
 - See panleuk/parvo protocol above.
 - Can also try feeding Churro.
 - ADULT THAT IS FULLY VACCINATED
 - Start probiotics daily. Discontinue probiotics when stool is normal.
 - Diagal once.
 - If diarrhea continues for more than 2 days, start metronidazole 17mg/kg daily x 8d.
 - ADULT THAT IS NOT FULLY VACCINATED (worried about parvo/panleuk)
 - See panleuk/parvo protocol above.
- ❖ ANOREXIA
 - KITTEN - worried about parvo/panleuk
 - See panleuk/parvo protocol above.
 - If acting completely normal otherwise, try different types of food including Churro.
 - Use ¼" strip of mirtazapine ointment rubbed onto ear once daily for 3d.
 - ADULT - most likely due to stress of being in the kennel. Cats can become very sick (may develop hepatic lipidosis - fatty liver disease - which can kill them), especially obese ones, if they stop eating. Could also be due to calicivirus lesions in mouth - see below.
 - Weigh cat, record current weight in pet point, and note if cat has lost weight.
 - Try canned "junk" food or a/d or RC recovery if cat has lost weight.
 - If still no eating after 3 days of offering different types of wet food, use Mirtazapine ear ointment found in surgery according to label directions. Alert Colleen that this cat may need a foster home.
 - If no eating after receiving Mirtazapine for 3 days tell Colleen that this cat absolutely needs a foster home asap.

- NOTIFY VET if cat has lost weight &/or anorexia persists and mirtazapine use is necessary.
- ❖ VOMITING
 - KITTEN - worried about parvo/panleuk especially if accompanied by anorexia, lethargy, diarrhea.
 - See panleuk/parvo protocol above.
 - If acting completely normal otherwise, monitor for additional episodes.
 - ADULT - most likely due to stress or a hairball (if cat is medium or long haired)
 - One or two episodes is not alarming in an otherwise healthy/normal cat. Monitor the cat and if it seems fine otherwise, no treatment is necessary.
 - If the cat is medium or long haired, administer hairball treatment.
 - NOTIFY VET if vomiting continues for more than one day &/or animals has > 2 episodes per day.
- ❖ RINGWORM
 - Inspect suspicious lesions under Wood's Lamp. Lime green fluorescence is a presumptive diagnosis. Perform fungal culture to confirm any questionable lesion.
 - Treatment:
 - Lime sulfur dip (8 oz concentrate per 1 gallon of water) on whole body 2x/week for 4 weeks.
 - Label dip with date water is added and keep under sink in surgery suite away from light.
 - Diluted dip is good for 7 days after adding water. Only dilute amount of dip that is needed to minimize waste.
 - ◆ 2 oz per 1 quart water
 - ◆ 0.5 oz per cup
 - ◆ 30cc = 1 oz
 - Oral itraconazole 0.5mL/kg PO once daily x 3 courses of 7d pulse (treat for 7d, no treatment for 7d) treatment.
 - Kittens & cats must be re-weighed and a new dose calculated before starting treatment for each course.

- For litters, keep together in isolation, perform lime sulfur dip 2x/week for 4 weeks on all kittens and treat every kitten with itraconazole pulse therapy for 3 courses.
- During last week of itraconazole treatment (week 5), examine animal with wood's lamp, culture any bright green fluorescence. Treat any fluorescing lesion with clotrimazole or miconazole topically daily and perform lime sulfur dip 2x/week. If culture positive, continue lime sulfur dips 2x/week, and add 4th week of itraconazole
- ❖ EAR MITES:
 - Confirm presence under microscope
 - Kitten \geq 4 weeks: use "ear juice" in surgery cabinet (1 part 1% ivermectin to 3 parts mineral oil), 1 drop/# kitten in each ear, 2 treatments 14d apart
 - Adult: 0.1cc ivermectin topically in each ear, 2 treatments 14d apart
- ❖ CALICIVIRUS: ulcers present on tongue, pads of paws; often notice cat drooling and anorexic.
 - Place in isolation. This is contagious. Fortunately the virus is relatively easy to kill in the environment.
 - SQ Convenia (0.045cc/#) to treat secondary bacterial infection.
 - Unfortunately there is no antiviral treatment effective for Calicivirus.
 - To treat moderate pain: Meloxicam 0.3 mg/kg SQ once then 0.03 mg/kg PO daily.
 - To treat severe pain: use meloxicam as above plus buprenorphine 0.02 mg/kg IM TID
 - NOTIFY VET if Calicivirus is suspected.