



CANINE LIFE STAGE HEALTH CHECKLIST

FOR ALL LIFE STAGES

General (PE and Consultation)

- Conduct a thorough physical exam, including 5 vital assessments (TPR, pain, nutritional assessment).
- Provide transportation advice, including safety (restraint), motion sickness, and anxiety.
- Discuss boarding and grooming.
- Consult about current medications and supplements, nutraceuticals, and herbs.
- Make recommendations concerning frequency of visits.
- Provide or recommend appropriate client education online resources.
- Document and review trends on important clinical parameters in the medical record.

Pet Lifestyle and Safety Risk Assessment

- Discuss and emphasize daily exercise needs appropriate to age.
- Make recommendations concerning exercise, mental stimulation, and enrichment.
- Discuss the pet's exposure to other animals (wild or domestic).
- Discuss housing, confinement, temperature, and sanitation, including general safety considerations.
- Consult on exposure to toxins (plants and other hazards), infectious and parasitic disease (boarding, grooming, dog parks, geographic location, travel, and exposure to other animals).

Zoonoses and Human Safety

- Educate about zoonotic risks including endoparasites (e.g., hookworms, roundworms, tapeworms), dermatophytosis, toxoplasmosis, geographically relevant ectoparasite-transmitted diseases, rabies, *Salmonella*, and *Campylobacter* spp.
- Discuss family member risk factors to zoonotic disease transmission.
- Provide bite prevention education.
- Discuss the importance of properly removing feces from the environment and how to do it.
- Discuss risks of raw food.

Behavior

- Consult on fear and stress-reducing handling and pre-visit anxiolytics.
- Conduct evaluations for specific behaviors of concern.
- Discuss normal behavior.
- Ask open-ended questions about changes and any specific client concerns.
- Advise that behavior recommendations and consultations are available.
- Evaluate emotional and behavioral history.

Nutrition

- Regularly evaluate for needed change in nutrition/diet based on reproductive and health concerns.
- Conduct screening or extended nutritional assessments as indicated. See *AAHA Nutritional Assessment Guidelines for Dogs and Cats* for additional information.
- Discuss supplement use.
- Use medical records to identify trends in weight and BCS/MCS.
- Modify diet per BCS/MCS.
- Evaluate the feeding schedule, food choice, and quantity.

Parasitology

- Year-round control of intestinal parasites per CAPC/CDC and *AAHA/AVMA Preventive Care Guidelines*.
- Perform routine fecal examination for intestinal parasites.
- Recommend year-round heartworm preventive per CAPC and *AAHA/AVMA Preventive HealthCare Guidelines*.
- Recommend year-round flea and tick control per CAPC Guidelines or defer to the *AAHA/AVMA Preventive Healthcare Guidelines*, which acknowledge clinical discretion based on risk assessment for tick control.
- Perform routine examination for fleas and ticks.

Vaccinations

- Evaluate risk assessment and use of noncore vaccinations as indicated, as per current AAHA guidelines.
- Evaluate current information about use of serology/vaccine titers.

Dentistry

- Evaluate the existence and adequacy of home care/daily dental hygiene.
- Perform oral exam and document assessment of dental condition.

Reproduction

- Examine genitalia of intact and neutered/spayed animals.
- Verify and document neuter/intact status.

Breed-Specific Screening

- Evaluate and report findings for genetic or developmental disorders or diseases that occur at higher frequency in particular breeds (e.g., osteoarthritis, neoplasia).

BCS: body condition score
CAPC: Companion Animal Parasite Council
CDC: Centers for Disease Control and Prevention
MCS: muscle condition score



CANINE LIFE STAGE HEALTH CHECKLIST

PUPPY:

FROM BIRTH THROUGH CESSATION OF RAPID GROWTH (~6 TO 9 MONTHS OF AGE, VARYING WITH BREED AND SIZE)

General (PE and Consultation)

- Evaluate congenital disorders.
- Recommend microchip/permanent identification.
- Discuss future exam frequency (every 3 to 4 weeks).

Pet Lifestyle and Safety Risk Assessment

- Discuss increased awareness of hazards at this age (e.g., plants, puppy-proofing, foreign body ingestion).

Zoonoses and Human Safety

Covered in the “All Stages” section.

Behavior

- Recommend owners begin socializing and handling from neonate.
- Educate on sensitive periods.
- Identify red flags that need further treatment.
- Educate on selecting appropriate trainers.
- Address desensitization and grooming needs.
- Discuss bite inhibition.
- Discuss the benefits of crate training relative to housetraining, safety, and comfort.
- Encourage appropriate socialization based on the individual.

Nutrition

- Evaluate breed and size for targeted nutrition.
- Discuss establishing a feeding schedule and good feeding and watering habits.

Parasitology

- Discuss parasite prevalence in puppies and zoonotic potential.
- Recommend early deworming beginning at 2 weeks of age and repeating every 2 weeks until started on year-round parasite control.
- Discuss high prevalence of intestinal parasites in puppies. Perform more frequent fecal examinations during the first year of life.
- Start on heartworm preventive as early as label allows (usually 4–8 weeks of age).
- Start on flea and tick control as early as label allows (usually 6–8 weeks of age).

Vaccinations

- Recommend core and noncore (if indicated) vaccines finishing at 16–20 weeks.
- Consider antibody titer testing for the purpose of determining protection from infection from canine distemper virus, canine parvovirus, and canine adenovirus-2.

Dentistry

- Evaluate deciduous dentition, persistent deciduous teeth, extra or incomplete dentition, oral development, and occlusion.
- Discuss acceptable chew toys for dental health and safety.
- Evaluate developmental anomalies and permanent dentition.
- Inform that home oral hygiene training can be started in puppies with erupted, permanent dentition. Juvenile patients actively exfoliating deciduous teeth may experience discomfort associated with home dental care efforts and negative experiences should be avoided.

Reproduction

- Discuss spay/neuter or breeder planning/consult.
- Review literature about advances in temporary contraceptive techniques.
- Examine for tattoo or place tattoo after spaying.
- For intact animals, discuss the hazards of roaming, appropriate breeding frequency, genetic counseling, and breeding ages (start and finish). Consider Brucellosis testing. Evaluate reproductive health, including prostate, testes, and mammary glands. Obtain history of female dog heat cycles.

Breed-Specific Screening

- Discuss inherited disorders for all dogs in which breeding is being considered.
- Educate new owner on breed-related considerations. Screen for abnormalities of dentition, portosystemic shunts, and the orthopedic, respiratory, and cardiovascular systems.





CANINE LIFE STAGE HEALTH CHECKLIST

YOUNG ADULT:

FROM CESSATION OF RAPID GROWTH UNTIL COMPLETION OF PHYSICAL AND SOCIAL MATURATION, (~3 TO 4 YEARS OF AGE)

General (PE and Consultation)

- Evaluate congenital disorders.
- Address the special needs of working/service dogs.
- Discuss frequency of veterinary visits (once per year).
- 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.

Pet Lifestyle and Safety Risk Assessment

- Discuss increased awareness of hazards at this age (e.g., plants, puppy-proofing, foreign body ingestion).

Zoonoses and Human Safety

Covered in the “All Stages” section.

Behavior

- Evaluate current behaviors of concern in relation to normal behavior.
- Ask open-ended questions regarding behaviors that often result in relinquishment or euthanasia (e.g., house training, separation anxiety, unruly behaviors, aggression, social relationships).
- Recommend continued training classes for behavior, socialization, and wellbeing.
- Educate on selecting appropriate trainers.
- Encourage adult training and active lifestyle based on the individual.

Nutrition

- Evaluate breed and size for targeted nutrition.
- Establish target weight range based on BCS and MCS. Discuss risk of weight gain after sterilization.
- 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 heartworm preventive throughout all life stages.
- Test annually for heartworm and tick-borne infections.
- Continue year-round flea and tick control based on risk assessment.
- Discuss zoonotic potential for external parasites in all life stages.

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 of booster vaccination.

Dentistry

- Evaluate deciduous dentition, persistent deciduous teeth, extra or incomplete dentition, oral development, and occlusion.
- Discuss acceptable chew toys for dental health and safety.
- Evaluate developmental anomalies and permanent dentition.
- Consider first dental cleaning, oral exam, and dental charting, especially in dogs with malocclusions or unerupted teeth and in smaller breeds with crowded dentition.
- Evaluate gingival health and accumulation of plaque and calculus. Missing permanent teeth should have intraoral dental radiographs taken to confirm the teeth are truly not present.
- Recommend full-mouth radiographs, dental cleaning/polishing, charting, and scoring per *AAHA Dental Care Guidelines for Dogs and Cats*.

Reproduction

- Discuss spay/neuter or breeder planning/consult.
- Review literature about advances in temporary contraceptive techniques.
- Examine for tattoo or place tattoo after spaying.
- For intact animals, discuss the hazards of roaming, appropriate breeding frequency, genetic counseling, and breeding ages (start and finish). Consider Brucellosis testing. Evaluate reproductive health, including prostate, testes, and mammary gland. Obtain history of female dog heat cycles.

Breed-Specific Screening

- Discuss inherited disorders for all dogs in which breeding is being considered.
- Screen for orthopedic, ophthalmic, renal, and hepatic abnormalities.

BCS: body condition score
MCS: muscle condition score





CANINE LIFE STAGE HEALTH CHECKLIST

MATURE ADULT:

FROM COMPLETION OF PHYSICAL AND SOCIAL MATURATION UNTIL THE LAST 25% OF ESTIMATED LIFESPAN (BREED- AND SIZE-DEPENDENT)

General (PE and Consultation)

- Address the special needs of working/service dogs.
- Recommend regular veterinary examinations and appropriate diagnostics (every 6 to 12 months).
- 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.

Pet Lifestyle and Safety Risk Assessment

Covered in the “All Stages” section.

Zoonoses and Human Safety

Covered in the “All Stages” section.

Behavior

- Conduct a routine evaluation for cognitive changes and anxiety/phobias.
- Ask open-ended questions regarding behaviors that often result in relinquishment or euthanasia (e.g., house training, separation anxiety, unruly behaviors, aggression, social relationships).
- Recommend continued training classes for behavior, socialization, and wellbeing.
- Educate on selecting appropriate trainers.
- Encourage adult training and active lifestyle based on the individual.

Nutrition

- 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 heartworm preventive throughout all life stages.
- Continue testing annually for heartworm and tick-borne infections.
- Continue year-round flea and tick control based on risk assessment.
- Discuss zoonotic potential for external parasites in all life stages.

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 of 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, discuss the hazards of roaming, appropriate breeding frequency, genetic counseling, and breeding ages (start and finish). Consider Brucellosis testing. Evaluate reproductive health, including prostate, testes, and mammary gland. Obtain history of female dog heat cycles.

Breed-Specific Screening

- Discuss inherited disorders for all dogs in which breeding is being considered.
- Screen for neoplasia risk, renal, hepatic, endocrine, and cardiovascular abnormalities.



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