

## **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 do □ Recommend regular veterinary examinations and 12 months). □ Educate owners on signs of early orthopedic disc pet owner observations of mobility and activity a and stage of OA during PE.	d appropriate diagnostics (every 6 to ease and osteoarthritis (OA). Collect
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 change ☐ Ask open-ended questions regarding behaviors or euthanasia (e.g., house training, separation and social relationships). ☐ Recommend continued training classes for behave Educate on selecting appropriate trainers. ☐ Encourage adult training and active lifestyle base	that often result in relinquishment exiety, unruly behaviors, aggression, vior, socialization, and wellbeing.
Nutrition  ☐ MCS is especially important to evaluate as it pert ☐ Emphasize weight control and benefits to overall muscle condition for the patient.	
Parasitology  ☐ Continue year-round control for intestinal parasit ☐ Perform fecal examination for intestinal parasites lifestyle and use of preventives. ☐ Continue heartworm preventive throughout all lif ☐ Continue testing annually for heartworm and tick ☐ Continue year-round flea and tick control based ☐ Discuss zoonotic potential for external parasites	fe stages. c-borne infections. on risk assessment.

☐ Continue core vaccines per current guidelines:
<ul> <li>o 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.</li> <li>o 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.</li> </ul>
<ul> <li>◆ 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.</li> <li>□ Continue appropriate noncore vaccines per current guidelines, and re-evaluate lifestyle and exposure risk:</li> </ul>
<ul> <li>Bordetella bronchiseptica, Borrelia burgdorferi, Influenza (H3N8, H3N2),</li> <li>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.</li> </ul>
☐ 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
<ul> <li>Evaluate the progression of any periodontal disease.</li> <li>Perform conscious and unconscious oral evaluation as indicated.</li> <li>Recommend full-mouth radiographs, dental cleaning/polishing, charting, and scoring per AAHA Dental Care Guidelines for Dogs and Cats.</li> </ul>
<ul> <li>Reproduction</li> <li>□ 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.</li> </ul>
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.

**Vaccinations**