

End of Life Educational Toolkit



www.catvets.com/end-of-life-toolkit



End of Life Educational Toolkit

As veterinarians, we have the privilege of being able to facilitate a peaceful and painless transition for our patients at the end of their life. Our goal should be providing a gentle death so cats feel minimal fear, anxiety, and pain. It is also important to understand that this experience will have a lasting impact on our clients as well. In preparing this experience for our feline patients and clients, it is important to offer a calm and well-planned process that honors the life of the cat. These details will stay with the client and may influence how they express and resolve grief.

The mission of this Toolkit is to provide the veterinary team with the tools necessary to ensure a smooth, calm, and compassionate experience for cats and clients alike. The Toolkit offers advice and insight on each step of the process, beginning with evaluating Quality of Life (QOL) through supporting the client's emotional and mental wellbeing after the procedure.

Instructions for Use

This educational Toolkit is intended to be an implementation tool for veterinary professionals to access and gather information quickly. It is not intended as a complete review of the various techniques and procedures in euthanasia.

To use the Toolkit, click the tabs at the top in the green navigation bar to access each page and read more information about each area, including Decision Making, Euthanasia Experience, Euthanasia Process, Final Arrangements, Frequently Asked Questions (FAQs), and Client Resources. Each page also has an associated printable PDF that you can use in your practice. Additionally, a link to a printable version of the entire Toolkit, which contains information from each page, is included in the left sidebar.

Acknowledgments

The AAFP would like to thank our Task Force for their hard work in developing this educational Toolkit content and providing photos – Wendy Simpson, DVM, Chair; Elizabeth Colleran, DVM, MS, DABVP (Feline); Diane Eigner, VMD, MBA, CVPM, CHPV; Mary Gardner, DVM; and Kira Ramdas, DVM. The AAFP would also like to thank Sheilah Robertson, BVMS (Hons), PhD, DECVA, DACAW, DECAWBM (WSEL), CVA, MRCVS, and Lysa Posner, DVM, DACVAA, as contributing reviewers.

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Decision Making

Quality of Life Discussion

Whenever possible, a Quality of Life (QOL) discussion should take place long before the moment in which a conclusion must be reached on its presence or absence.

- Nurture the relationship with the caregiver. During the development of a relationship between the caregiver and veterinarian, the characteristics of a good feline life can be conveyed and discussed.
- This information can be discussed at a time prior to making immediate decisions or before an emotional crisis.
- Positive QOL discussion can be made at a time of clear thinking and planning.

Differences in Experience of Life

- The differences between human and animal thoughts and evaluation of circumstances are striking and may not be clearly understood by the caregiver.
- A human can weigh the long-term benefits of immediate personal suffering (e.g., chemotherapy, surgery, therapy) while cats live in the moment.
- Cats “become” their pain. There is only the quality of life now and no ability to anticipate that the future may be better.
- The agreement becomes then for the veterinarian and caregiver to keep the best interest of the cat central to any decisions that must be made.

Ongoing Quality of Life Evaluation

During this assessment, you can determine the composition of a cat’s QOL in order to discuss and agree upon with the caregiver. Without this preparation, the emotional bond may be so powerful, and the immediate situation so confusing, that the caregiver may not be capable of thinking clearly about what is best for their beloved cat.

- Ask the caregiver to recall several elements of a good feline life, which may include:
 - Favorite pastimes
 - Resting places
 - Bonding moments
- Use this assessment as a rational gauge and objective assessment of a good life. Assessing and agreeing on QOL can offer a final reassurance of a good decision to euthanize.





Decision Making *continued*

Ongoing Quality of Life Evaluation *continued*

- Utilize these examples in order to compare the cat's current status. Recognizing the difference between a period of health and happiness, and the present state of affairs requires rational evaluation.
- Offset emotions of the moment by participating in active listening and acknowledging their feelings. Communicate the facts when describing the variances in the caregivers' description of their examples of a good feline life versus what the cat is presenting and experiencing now. This is critical in order to make a decision.
- When the planning process commences, it is critical to include a plan for every situation, including emergencies or times when a veterinarian is not available.
 - Updated medical records should always be provided to the caregiver or made available through a web portal or phone app.
 - Contact information for a consultation may be helpful in the event of an emergency or problem that arises after hours or during holidays.
 - Providing these items may prevent unnecessary or counterproductive diagnostics and procedures that can cause pain for the cat and confusion for the caregiver.

Examples of questions to explore with a caregiver when assessing QOL

Parameter	Questions to explore
Hurt	How can the pain be controlled? What can we do to improve comfort?
Hunger	How can we improve appetite?
Hydration	How can we improve hydration?
Hygiene	How can we improve hygiene?
Happiness	What enjoyable activities are pursued? Which people are deeply connected?
Mobility	How can we improve comfort?
More Good Days than Bad Days	Good Day = normal activities and daily life. Bad Day = nausea, difficulty breathing, pain, discomfort, etc.

Adapted from "Shearer TS, ed. Palliative Medicine and Hospice Care, Veterinary Clinics of North America Small Animal Practice. 2011; 41(3):477-702"

When Early QOL Discussions Do Not Occur

There are times when these preparations have not been done because there is no time or the relationship between caregiver and veterinarian is new. In these instances, the veterinarian must be the guide. The veterinarian is obliged to consider the needs of the feline patient above all.

- It is the responsibility of the veterinarian to guide the caregiver to the best outcome for the cat.
- The veterinarian can employ Aesculapian authority when recommending options. Aesculapian authority is conferred to individuals considered "healers" in society and offers veterinarians:
 - The perception of the veterinarian as an "expert" based upon their education and experience.
 - The veterinarian's "moral" authority to heal, relieve suffering, and save lives.
 - The "charismatic" perception that the veterinarian's expertise is unique and not held by the caregiver.
- Employing Aesculapian authority gives the veterinarian the influence to overcome the misgivings of caregivers who are emotionally unprepared to make a choice independently.
 - The abuse of Aesculapian authority is well-documented.
 - When properly employed and with ending suffering as the goal, Aesculapian authority can be a powerful asset.
 - More information can be found in an article under Further Reading section of this Toolkit.
- The FAQ page of this Toolkit addresses additional difficult circumstances in euthanasia.

As a veterinarian, the goal of euthanasia for any feline patient is to alleviate suffering and ensure a compassionate end-of-life transition with minimal fear, anxiety, and pain, while also supporting the human-animal bond with their caregiver.



Euthanasia Experience

The experience of euthanizing a beloved cat stays with a caregiver forever. As practitioners, it is critical to understand the psychological and emotional impact of this end-of-life procedure. To make the experience as peaceful and professional as possible, it is important for certain steps to be followed by both veterinary staff and caregivers. If euthanasia can be done in such a way as to minimize anxiety or pain in the patient, the transition will be much easier for all involved.

Four Key Steps for Easing Euthanasia

Step 1: Deciding Upon Euthanasia

A caregiver's experience with euthanasia begins when first considering it as a treatment option.

- Introducing euthanasia as a treatment option
 - It is appropriate for a veterinarian to introduce humane euthanasia as a treatment when a cat's functional and comfortable life carries a guarded or poor prognosis. Some clients may not feel comfortable bringing it up out of fear of judgment, especially if they cannot afford treatments or diagnostic tests. They may also be concerned that you will be angry with them for suggesting it.
 - Deciding when to euthanize a pet is a very difficult choice for most people. Some caregivers may ask the veterinarian to make the decision. Providing clear and nonjudgmental guidance in terms of what to consider is helpful in empowering the client to make their own choice.
- Scheduling the appointment
 - Ideally, the veterinary team should be updated about the cat's health status and informed that the caregiver might be calling in the next few days. If possible, they should not be put on hold.
 - Also, make sure the team conveys empathy, so the caregivers know that you care.
 - First, ask your clients when they prefer to schedule the procedure.
 - If possible, try to schedule the procedure when the veterinary clinic is quiet, or when the veterinarian will have enough time not to be rushed by later appointments.
 - Try to make arrangements for body care with the caregivers prior to the procedure. Provide them with options for deciding what they would like to do with their loved one's remains.
 - Let caregivers know the cost of euthanasia and aftercare in advance.
 - If euthanasia needs to be done immediately, find a quiet location in the practice for caregivers and their cat to spend time together.



Four Key Steps for Easing Euthanasia continued

Step 2: Preparing for Arrival

Several steps can be taken prior to the euthanasia appointment that can ease the caregiver's and patient's experience. This includes premedicating the cat at home and setting up a peaceful space at the practice where the family can say goodbye to their loved one in private.

- Premedication
 - Premedicating a cat at home allows for minimal restraint upon arrival at the veterinary practice. It also lessens the likelihood of adverse events following death, such as muscle twitching or agonal breaths.
 - Drugs should be administered at the appropriate time before peak clinical effect is desired (see table). For example, gabapentin should be administered 2-3 hours before the cat is placed in the carrier for travel or before an at-home appointment.
 - If a caregiver is unable to easily orally medicate the cat, then don't recommend it. Remember, it is important to not create a stressful experience for the cat, as well as impart a lasting negative experience for the caregiver.
 - If it is too stressful for the cat to receive medication before they arrive, the veterinary team should administer a sedative and anti-anxiety medication as soon as they arrive.

Premedication Options and Dosages

Premedication	Dosage	Time to Peak Clinical Effect
Gabapentin	10-40 mg/kg PO	1-2 hours
Trazodone	100 mg/cat PO	2 hours
Lorazepam*	0.125-0.25 mg/cat PO	30 minutes
Buprenorphine	0.02-0.03 mg/kg TM	30-45 minutes

**Can cause excitement in some cats, so ideally should not be given for the first time as a premedication in this instance.*
PO = Per os or by mouth TM = Transmucosally

- Preparing the space
 - Before caregivers and their cat arrive, the veterinary team should set up a "comfort room" in the practice where the caregiver can sit with their loved one. Ideally, the space would include:
 - Soft lights
 - Low noise
 - Privacy
 - Enough seating for all family members
 - Provide soft, soothing blankets to wrap the patient in after the procedure is complete.
 - Stock a small basket with supplies for caregivers, including:
 - Tissues and/or wet wipes
 - Bottles of water
 - Create a peaceful ambiance.
 - Dim the lights
 - Set up a battery-operated candle
 - Consider the location where you will have the needles, syringes, and other equipment to use for the procedure. Seeing these items can be upsetting to the caregivers, so it may help to keep these items in a travel basket or bag.
 - If the caregiver chooses to have time alone with their loved one, provide a wireless doorbell in the room so the caregiver can notify the veterinary team when they are ready to begin or when they are ready to leave.





Four Key Steps for Easing Euthanasia continued

Step 3: Receiving Clients at the Hospital

When caregivers arrive at the veterinary practice, it is important that the veterinary team is prepared to make the caregivers' experience as calm and clear as possible.

- Upon arrival
 - Immediately escort caregivers and their cat into the comfort room.
- Explain the process
 - Talk to caregivers about what to expect.
 - Explain the changes that will take place in the cat as the procedure progresses.
 - Let caregivers know how long it will take for the sedative to take effect.
 - Advise caregivers that their cat's eyes will not automatically close when they are sedated or once they have passed.
 - Offer options for when they will say a final goodbye:
 - Before the procedure starts
 - Once the cat is completely sedated
 - After the cat has passed away
 - Offer caregivers some time with their cat before the euthanasia and/or after the cat has passed away. Be prepared, as this may end up being a short or long time.
 - Some caregivers will spend hours in the room with their cat.
 - Some caregivers want the cat removed as soon as the euthanasia is complete.
- Inform the practice
 - Ensure that others in the practice environment are aware that euthanasia is taking place in order to provide privacy and offer kindness.
 - Inform other clients that euthanasia is occurring by placing a battery-operated candle and note in the lobby. Please see the Client Resources section of this Toolkit for a free sign to print and use for your practice.
 - Place an overstuffed animal in the treatment room so the rest of the veterinary team know euthanasia is occurring.





Four Key Steps for Easing Euthanasia *continued*

Step 4: The Euthanasia Procedure

The euthanasia procedure can be performed in the comfort room where clients have been spending their final moments with their cat.

- Early steps
 - Keep the caregivers and cats together at all times during the appointment until the clients are ready to separate. The human-animal bond should not be broken.
 - Veterinarians can use a small basket to carry the sedation and euthanasia materials into the room. It is not necessary to put in a catheter.
- Sedation
 - If a client can easily administer an oral premedication to their cat before the appointment, it can result in less anxiety and discomfort for the injectable sedatives that will subsequently be given by the veterinarian.
 - Additional sedatives to be given intramuscularly (IM) or subcutaneously (SQ) should provide an acceptable level of anesthesia to minimize any pain before administering the euthanasia solution. Please see the Euthanasia Process section of this Toolkit for a table of pre-sedation drug combination protocols.
- Administering the euthanasia
 - Learn how to become comfortable with caregivers holding their cat during the procedure.
 - Make this opportunity available to those who want it.
 - Try to stay out of the way of the caregiver.
 - Always check the patient's heart after administration.
 - Ideally, the veterinarian should stay in the room until the cat has passed and death is confirmed by auscultation.
 - Utilize the Euthanasia Process section of this Toolkit for additional information.
- Be attentive to your words
 - It is normal for clients to want to reminisce about happier times while waiting for the sedative to take effect.
 - Be comfortable with silence for those who prefer it.
 - Confirming death can be done with beautiful statements such as "She has her wings."
 - Verbally reassure clients that they are making the best decision for their cat.
 - Let clients know they can take as much time as they wish with their loved one after the procedure is complete.





Euthanasia Process

The euthanasia appointment is the last opportunity a veterinarian has to serve a patient and the caregivers directly. With planning, the appointment can go very well. Preparation begins with being familiar with available euthanasia techniques and by obtaining and organizing the supplies associated with the multi-step procedure.

Preparation

- In both the home and the hospital setting, veterinarians should ensure they have the appropriate medications used for pre-euthanasia sedation/anesthesia and euthanasia.
- Equipment needed includes various sizes of syringes (1 cc, 3cc, 5cc, 10cc) and needles (27g, 25g, 22g, 21g, 18g).
- Needle gauge and length size will vary depending on the euthanasia technique used. A quiet cordless rechargeable clipper can come in handy.
- Additional supplies include:
 - Non-alcoholic hand sanitizer that can be used to wet the fur to help visualize the vein
 - Stethoscope to confirm the heart has stopped
 - Tourniquet to place proximal to the chosen intravenous (IV) site
- Be transparent with the process. Explain and prepare caregivers about each step of the process, and inform them of when you start each step. Just as you narrate your examination, narrate the euthanasia process, so the caregiver knows what to expect.
- It is best to explain, in very basic terms, the sedatives that will be administered, and which euthanasia technique will be used.
- To avoid confusing or upsetting caregivers, do mention that you might need to change the euthanasia technique during the procedure.
- For some clients, it can be very upsetting when their cat's eyes don't close, either after the cat is sedated or after the cat has died. Informing them of this before you begin with the sedation may impact the way they decide to hold their cat during the process.
- Since urination and defecation are common perimortem changes, it is good practice to place a waterproof pad under the patient before you administer medications.





Euthanasia Process *continued*

Sedation

When at all possible, the cat and the caregiver should not be separated after their arrival at the veterinary practice. Separating the cat from the owner causes tremendous stress and anxiety for both the cat and the owner. Using other options besides an IV catheter for administering the euthanasia solution, such as a butterfly catheter for intravenous access, or another route from the techniques listed below, will provide a more comforting experience for all, whenever possible. If a patient must be taken to another room in the practice, it is best to ask the client for permission and to explain the reason for needing to take the cat from the room.

- Deep sedation or anesthesia is preferred to ensure the cat is fully asleep prior to administering the final injection. Sedation minimizes fear, anxiety, and pain; lessens the need for restraint; allows for closeness with caregivers; and can lessen unwanted side effects of the administration of euthanasia solutions.
- Whatever combination of drugs is used, the patient should be completely unaware of their surroundings and unresponsive to all stimuli.
- Subcutaneous injections using very small gauge needles are recommended to minimize stimulating the patient. Remember that some cats may be in chronic pain, and they may be hyperalgesic and/or hyperactive.
- The goal is to prevent our patients from feeling pain.

Popular pre-euthanasia sedation techniques combine an anxiolytic medication like benzodiazepines with phenothiazines, and then with or without the addition of an opioid.

Pre-sedation Protocols

Drug Combination Protocols for IM or SQ Administration	Body Weight in Kilograms	
	<4.5 (10 lbs.)	4.5 - 9.0 (10-19 lbs.)
Ketamine 100 mg/ml	0.1 ml	0.15 ml
Acepromazine 10 mg/ml	0.1 ml	0.15 ml
Tiletamine-Zolazepam 100 mg/ml	0.2 ml	0.3 ml
Ketamine 100 mg/ml	0.3 ml	0.4 ml
Butorphanol 10 mg/ml	0.3 ml	0.4 ml
Acepromazine 10 mg/ml	0.1 ml	0.1 ml
Midazolam 5 mg/ml	0.3 ml	0.4 ml
Tiletamine-Zolazepam 100 mg/ml reconstituted with the following: 2.5 ml of acepromazine 10 mg/ml and 2.5 ml of Ketamine 100 mg/ml	0.2 ml	0.3 ml
Tiletamine-Zolazepam 100 mg/ml reconstituted with the following: 5 ml of acepromazine 10 mg/ml	0.1 ml	0.2 ml
Dexmedetomidine 100 mcg/ml	10 mcg/kg	
Ketamine 100 mg/ml	1-2 mg/kg	
Butorphanol 10 mg/ml *	0.4 mg/kg	

**Butorphanol is optional with this protocol and is based on veterinarian preference.*

Intravenous Administration	Body Weight in Kilograms	
	<4.5 (10 lbs.)	4.5 - 9.0 (10-19 lbs.)
Propofol 10 mg/ml **	8-12 mg/ml	

****Propofol can be administered intravenously when a catheter is already in place. Unlike other protocols, propofol will cause an immediate profound sedation that may be startling to a caregiver. Please discuss the effects of propofol with a caregiver before administration.**



Euthanasia Process *continued*

Euthanasia Administration

Euthanasia solutions used for domestic animals are barbiturate solutions or barbiturate-combination solutions.

- Barbiturate solutions are approved for all methods of administration.
- Barbiturate-combination solutions (e.g., pentobarbital and phenytoin sodium) are not approved for intraperitoneal (IP) injections.
- Euthanasia should never be attempted with inadequate amounts of euthanasia solution on hand.
- The euthanasia technique using the smallest amount of euthanasia solution is the IV method (1 ml/4.5 kg [10lbs]).
- For additional information and guidance on administering anesthesia, please see the AAFP Feline Anesthesia Guidelines (available at catvets.com/anesthesia).



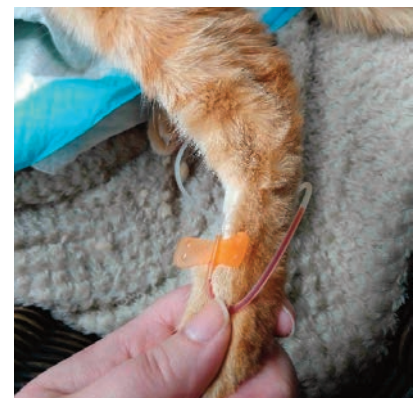
End of life patients can be very debilitated, making IV venipuncture very challenging. End of life practitioners should familiarize themselves with approved euthanasia techniques so they can confidently approach each euthanasia appointment. These techniques include:

Intrarenal (IR) Technique

- The dose is 3 ml/4.5 kg (10lbs) of euthanasia solution.
- The IR route of administration is well suited for cats and is the route recommended by the AAFP.
- It works very well when loved ones are near and when vein access is difficult.
- Caregivers can hold their cats as they pass, honoring the human-animal bond.
- Respiratory and cardiac arrest occurs quickly (less than 30 seconds). Death typically occurs within one minute when the injection is properly positioned in the renal cortex or medullary tissue.
- The left kidney is located outside of the retroperitoneal space and is usually easier to locate than the right.
- This technique does require that the patient is unconscious, so anesthesia is required.
- Disadvantage: the small kidney size in patients suffering from chronic kidney disease can make this a challenging technique, and there is the possibility of confusing fecal balls or abdominal masses for a kidney. Also, an improperly positioned injection can prolong death, taking as long as 15 minutes. This technique requires a larger volume of euthanasia solution, so it is imperative that enough solution is on hand.

Intravenous (IV) Technique

- The standard dose used is 1 ml/4.5 kg (10lbs) of euthanasia solution, but patients who have circulatory compromise should be given 2 ml/4.5 kg (10lbs).
- Used in the relaxed cat.
- Solution is injected steadily and will cause complete lack of consciousness in approximately five seconds with deep anesthesia in approximately ten seconds.
- Cardiac standstill will occur within approximately 40 seconds but depends on factors like circulation times, etc.
- Many practitioners can use a well-placed butterfly catheter so that the cat does not have to be removed from the room for IV catheter placement.
- The cephalic and medial saphenous veins are the veins most commonly used.
- Sedation should be given prior to administration.
- Disadvantage: the cat's medical condition and relative size can make locating and accessing a vein challenging, and may not be possible with smaller cats. The veterinarian must possess good venipuncture skills to perform the IV technique.





Euthanasia Process continued

Euthanasia Administration continued

Intrahepatic (IH) Technique

- The dose is 2 ml/4.5 kg (10lbs) of euthanasia solution.
- The patient needs to be unconscious, so anesthesia is required.
- Death occurs in approximately two minutes.
- The liver is right up against the diaphragm and takes up half of the caudal ribcage space. The needle is placed on either side of the xiphoid notch aiming up under the rib and towards the head in a laterally recumbent patient.
- Disadvantage: inadequate penetration of the liver will slow the time from administration to death to as long as ten minutes. To avoid this, the veterinarian should use an adequate needle length. One-inch (1") needles are used for most cats. When this technique is used, caregivers should be told it can take as long as ten minutes for the patient to pass.

Intraperitoneal (IP) Technique

- The dose is 3 ml/4.5 kg (10lbs) of euthanasia solution.
- The IP technique is an easy technique to master.
- Injections are given along the midline caudal to the umbilicus or low on the right lateral abdomen.
- Use $\frac{3}{4}$ " or 1" needles to avoid penetrating abdominal organs.
- Patients should be anesthetized.
- Respiration should cease in approximately six minutes with cessation of heartbeat at approximately eight minutes.
- Disadvantage: this technique requires a larger volume of euthanasia solution, so it is imperative that enough solution is on hand. The presence of abdominal fluid or low blood pressure can significantly slow the absorption of the euthanasia solution, so proper patient selection is required for this technique to provide the desired result.

Intracardiac (IC) Technique

- The dose is 1 ml/4.5 kg (10lbs) of euthanasia solution.
- The IC route is often used when vein access is a challenge or when an immediate death with little preparation is desired.
- It is mandatory that the patient should be completely unconscious when this method is chosen, so anesthesia is required.
- A stethoscope is used (this is something you can feel as well) to find the point of maximum intensity of the heart sounds. This is typically at the fourth intercostal space in line with the shoulder on the left and at the fourth intercostal space in line with the elbow on the right.
- The syringe is held perpendicular to the body wall when it is inserted. If a rib is encountered accidentally, gently redirect the needle as it is inserted.
- It is important to use a syringe large enough to hold the appropriate amount of euthanasia solution and accommodate aspiration of blood to ensure proper placement of the needle before injection of the euthanasia solution.
- Disadvantage: most caregivers will be uncomfortable with this technique, so if this technique is chosen, it is best to discuss why this method is best for the patient.

When the euthanasia procedure is planned with care and consideration for the cat to be euthanized, the outcome should be a peaceful and pain-free transition. The caregivers that are present for the procedure should be fully informed and aware of the steps that will be followed. Though you want death to come quickly and gently, you want there to be enough time for everything the caregiver(s) and the team needs. Lastly, you want those who have experienced the loss to know where to go if they need support. Bereavement and grief counseling services can be found in the Client Resources section of this Toolkit.

Additional information can be found under the Further Reading section of this Toolkit.



Final Arrangements

Our duties to our patients and our clients do not end when the last breath is taken. Closure and a healthy respect for the unique human-animal bond should always be given to our patient's families. The following list of final arrangements demonstrates some ways in which we can honor this bond.

Demonstrating Respect and Sensitivity for the Cat in the Practice

- Light a battery-operated candle to signify that euthanasia is scheduled or in process. Consider a separate candle for practice team members, and one in the front office to notify other clients. If a candle is not possible, you may dim the office lights slightly.
- Handle deceased pets with care when carrying or transferring them for the caregivers.
- Remove all bandages, feeding tubes, intravenous tubes, and tape to prepare the body for burial or cremation.
- Reconfirm asystole.
- Cover deceased pets with a blanket. Keep them out of sight of other patients and avoid high-traffic areas.
- As soon as possible, transfer deceased patients to freezer storage or back to their caregivers.
- Create a dedicated space in the staff lounge as a crafting area so that staff on break or during slow periods could use the time to creatively memorialize patients by decorating locks of fur or clay paws. Finished crafts could be given to caregivers or kept by the team member who cared for them.

Preparing Final Arrangements

- Offer a necropsy for owners who might benefit from the knowledge and in order to offer closure that a difficult diagnosis might bring.
- Offer to place a hold on remains until the owners can decide how to proceed if they have not preplanned.
- Provide thoughtful options to take cats home for burial, such as quilted lined bags or biodegradable coffins to prevent leakage.





Final Arrangements *continued*

Preparing Final Arrangements *continued*

- Select a reputable business for postmortem care or interment, and have standard options to offer clients, including sending the cat home for burial (where legal), private and/or group cremation, or interment. When recommending a business for postmortem care:
 - Review the experiences other pet owners have had with them online.
 - Know their options and process from intake to return.
 - Determine if they use partitions where ashes can commingle or cremate one pet at a time.
 - Ask if they use electronic tracking systems.
 - Inquire if you can view a cremation or visit the facility. You can confirm whether owners have those options.
- To increase transparency and help dispel misinformation, office staff should know where the cat's ashes are scattered.
- Provide a booklet or email website links of aftercare options, such as urns, jewelry made from ashes, and other mementos.
- Inspect the urn or remains when they are returned to your possession to ensure the appropriate services have been performed, and verify correct identification prior to returning ashes to the owner.
- If a pet funeral home is available in your area for viewings and services, make this option known to interested families.
- If a veterinary teaching institution is nearby, consider suggesting a donation of the remains to science and/or the education of future veterinary professionals. Alternatively, offer to keep them for the continued education of new graduates at your practice, or learning new procedures that could later benefit other cats and clients.

Memorializing the Cat

- It is important to demonstrate respect and sensitivity to each caregiver. Ask the caregiver if they wish to receive an item to memorialize their cat.
- Send a sympathy card personalized with a photo of their cat and a heartfelt message. Also, consider including a token in the card, such as a plantable paper containing wildflower seeds.
- Create clay paw prints or nose prints. Consider a few ideas:
 - Decorating with colored beads, such as hearts.
 - Using stamped letters for their names, or carving in names or messages using a needle or sharpened pencil.
 - Using cookie cutters of various shapes to make the base (e.g., circles, hearts, etc.).
 - Painting them to reflect the cat's coat and eye colors, or their collar.
 - Make a hole in the top with a needle cap to convert into holiday decorations for hanging, and thread with ribbons colored to complement their pet.
- Memorialize the cat with a lock of fur or a whisker collection
 - Consider collecting fur clippings. Remember to get a clipping of each color of the fur. They can be stored in cleaned vaccine vials or craft store containers, and decorated with charms.
 - Tie with a ribbon and send home in a small organza bag.
 - Share with the caregiver that there are professional services that can create jewelry from whiskers, ashes, or pawprints.
- Make a donation in their cat's name. Consider:
 - A veterinary medical research organization (e.g., local veterinary college, veterinary medical foundation, Winn Feline Foundation/EveryCat, or other organizations).
 - A local shelter or animal rescue organization.
 - Your own practice's Good Samaritan fund for helping stray animals or those in need.





Final Arrangements *continued*

Memorializing the Cat *continued*

- Remember their cat with a memorial page in an annual clinic calendar or social media post (with permission).
- Consider putting up a bulletin board as a commemorative wall in your staff lounge to honor the special patients you have lost.
- Hold an annual memorial service for all the deceased pets from the last year.

Bereavement Support

- Be aware of your emotions as well, and make sure you remain respectful, honest, nonjudgmental, and open to a caregiver's wishes and different styles of grief.
- Call caregivers the day after the euthanasia to acknowledge their loss. Lend a listening ear of support and answer questions. Normalize grief surrounding pet-loss and ask open-ended questions.
- Provide caregivers with resources for grief counseling when appropriate, such as Lap of Love's Pet Loss and Bereavement Resource Line ([855] 352-LOVE [5683]), or www.lapoflove.com/community/Pet-Loss-Support/Pet-Loss-Support-Hotline. The AVMA also provides a list of Pet Loss Support Grief Counseling Hotlines (available at: www.avma.org/sites/default/files/resources/hotlines.pdf). Please see the Client Resources section of this Toolkit for additional information.
- Support for the veterinary team is a crucial part of the process. Please see the FAQ section of this Toolkit for additional information on bereavement support for the veterinary team.
- Refer to a veterinary social worker if one is available in your practice.
- Locate local Pet Loss Support groups to refer to clients. There are several hybrid online/local support groups available on multiple platforms.
- Offer a bereavement support group for clients, or create one for your practice on social media. The AVMA created guidelines for pet loss support services (available at: www.avma.org/resources-tools/avma-policies/avma-guidelines-pet-loss-support-services).
- Send a condolence gift. Some examples are flowers, potted plants, a candle, a cookie bouquet, etc.



Following-up

Sometimes, clients are too saddened after euthanasia to come back for care at your office. After some time has passed, re-establishing this link can bring them back into the practice, remind them to seek care for other pets at home, or care for a new pet they have may have adopted since.

- Sending a one-year anniversary card can be a gentle reminder and a positive way to re-establish a connection with a client. Prepare a card with the client's name and the cat's name, and have each practice member sign or stamp them. These could also be pre-printed with staff signatures. Please see the Client Resources section of this Toolkit for pre-made cards that you can edit and print on your own.





FAQs

The decision to euthanize a cat can be extremely difficult for the caregiver and the veterinary team.

Difficult Circumstances in Euthanasia:

What do you do when the owner is uncertain if it is time to euthanize their cat?

The undecided cat owner is one of the biggest challenges we face during end of life discussions. They may feel guilt about considering euthanasia for their cat too soon, yet they also don't want their cat to suffer unnecessarily by prolonging the decision. This is the ideal time to go over quality of life discussions, quality of life scales, and what makes their cat unique, as well as ask if they are seeing that uniqueness anymore. Having a compassionate discussion and coming together with a decision that removes regret will help.

How can we deal with convenience euthanasia where the veterinarian feels the cat can be rescued and rehomed?

It is not in the best interest of the patient and the veterinary profession to perpetuate an image of itself as willing to kill a companion animal 'on demand.' The veterinarian should respond to these situations by reminding the client that their cat is a valuable member of the family, deserving respect, love, and medical care. It is important to remember that the veterinarian must remain the patient advocate when a healthy, well-behaved cat is presented for 'on-demand' (convenience) euthanasia. If all reasonable alternatives have been presented and discussed with the client, the veterinarian is encouraged to follow their own moral and ethical code in determining the course of action. Developing a relationship with a no-kill animal shelter may help to offer support and foster solutions in these circumstances.

Ethical decision making is subjective and personal which can cause stress for the veterinary team. A veterinary working group has created a tool called the Veterinary Ethics Tool (VET) to assist in ethical decision making. More information can be found under Further Reading section of this Toolkit.

What can you do when the loss the family is going through is a cat that belonged to a deceased family member?

When the cat's primary family member is deceased, the loss of the cat may take an extra toll on the family. It is a living link to that lost family member and holds a valuable emotional place with the family. Honoring the bond that the cat had with the deceased person is vital but also the bond that holds with the remaining family. They may request more mementos than usual or even more time to say goodbye. Acknowledging this is the first step, and giving them the ability to memorialize the cat how they wish is imperative.



FAQs continued

Difficult Circumstances in Euthanasia continued:

Should other animals in the home be present for the euthanasia or see the deceased cat one last time?

A study by the American Society for the Prevention of Cruelty to Animals did show that many cats exhibited decreased appetite, prolonged periods of sleep, and increased vocalization after the death of a companion. Allowing housemates to see and smell the body may be beneficial in helping them with closure. It is also important to understand that each animal is different in how they view a housemate that has passed. Some cats may hiss at the deceased pet, act indifferent, or they may sulk for days. It is important the caregivers understand that the surviving animals may not exhibit the same level of grief that they are exhibiting, and that is okay.

What can we do if all family members are not able to be present?

Oftentimes, there will be a family member that would like to be present but cannot. Using technology can help tremendously. Using Facetime, Skype, or other video platforms can make the family member feel included. Also, offering to hold the cat's body at your practice or making special arrangements with the crematory so they can view the body upon their return, can also help with their grief.

What can we do if the loss is after an emergency and there is not a lot of time for closure?

It has been said that people will undergo more grief if they never said 'I love you' before a loss. This sudden loss is unexpected, and the family will not have had time to process or begin to prepare emotionally. This is the case in emergency euthanasia or death. Encouraging the owner to focus on memorializing their cat can help them through this additional grief. Go over all the ways they showed their cat that they loved them before they passed, how well they cared for them, and reminisce about all the stories they shared with you. Encourage the story sharing by asking open ending questions. Allowing them to view the body at your practice or at the crematory can be helpful with closure for some families.

What do I tell a caregiver if they decide to euthanize the cat for a behavioral issue that I believe can be treated or overcome?

Behavioral issues can be a huge struggle for a family to manage. It is vital to try and understand what they are going through in the home. That will first give you a good path on how best to approach the case. If their emotional budget is tapped out and their bond is broken, there are probably no treatment options that you can offer to repair that, and euthanasia may still be elected. What you also may find is that the family thinks you are judging them and never return. The best approach is to empathize with the issue and the struggles they face at home, relay that you support their decision to euthanize if they still want to, and then discuss the treatment options. For example: "I know how difficult this behavior is to manage and live within your home. I support your decision to euthanize today. I do just want to offer one suggestion so that no one has any regrets for not considering all options. Many cats have had successful results with XYZ treatment, and I just wanted to let you know about it before we make a final decision." By letting the family know that you will support their decision to euthanize, their guard may be lowered, and they may be more open to hearing about the other option. Showing support for their decision also removes the feeling of guilt they may have if you do not.

continued on next page



FAQs continued

Difficult Circumstances in Euthanasia continued:

How do I explain to caregivers who don't believe in euthanasia (and/or want their cat to die at home) how that decision will impact their cat's quality of life?

We are fortunate as veterinarians to be able to provide a peaceful death for our patients so they do not have to suffer to the very end. Many caregivers feel that letting a pet die at home will be a more peaceful end to their life than having them euthanized. It is very important that we assist these clients to understand that helping these cats through a good death is just as important as what they did to ensure a wonderful life. Explain that a natural death is not always a peaceful process and there exists a possibility that their cat can experience tremendous suffering and a diminished quality of life without euthanasia.

If an owner is still committed to have their cat pass on their own, the veterinarian can help the owner find an end-of-life practitioner that can help arrange for a veterinarian-assisted natural death. Education about comfort care can be provided, as well as prescription medications focusing on the pet's comfort.

Last-Minute Appointments:

Many clients call to schedule euthanasia last minute – how can we handle these?

About half of euthanasia appointments are made within 24 hours of needing the service. This may not allow for your practice to prepare or have the most ideal appointment times. Be as flexible as possible and do not judge the caregiver for "waiting until the last minute" – it is the hardest decision for a caregiver to make, and one that often comes last minute. It is important to have an established protocol for last-minute appointments. Having your procedures, including the euthanasia experience, well-planned can make these urgent appointments easier.

Expressing Condolences:

Is it okay to cry during euthanasia?

It is perfectly fine to cry during euthanasia and show families that you have empathy for their loss. Expressing condolences is not only appropriate but encouraged. But make them heartfelt and more than just "I'm so sorry for your loss." Instead, something more sincere like, "How lucky (Mingo) was to be loved so much. I am sure her loss will be hard – I am here if you need anything."

Should we call a family the next day?

Calling the families to check in on them is a wonderful sign of compassion, and you may be able to help them with their grief. Do not avoid this call for fear of opening wounds. Most likely, you will get a voicemail and can say, "This is Mary from Pet Vet Animal Hospital just calling to say I am thinking about you today. Please know that we are here for you if you need anything."

continued on next page



FAQs continued

Protecting the Caregiver's Mental Health:

How can I support the caregiver during the decision?

Being non-judgmental is important during the end of life process. The impact of losing a pet on individuals or families must not be underestimated. Be supportive, compassionate, and proactive if the caregiver needs assistance with their grief. A caregiver may even begin to experience anticipatory grief once the difficult decision is made. It is important to recognize this is a normal process that comes with emotional changes associated with death, and to proactively support the families through this process. Having information for pet loss resources, such as the Client Resources section of this Toolkit, and actively providing them to all families is recommended. Many may be too embarrassed to ask for resources themselves but can benefit greatly from them.

How best can I answer questions the caregiver may have about the euthanasia appointment?

Being compassionate, as well as confident, when explaining the process should ease the mind of the family. Make sure the answers are delivered by the best person. For example, if a family has detailed questions about sedation, then you may suggest a phone call with the veterinarian. If they want specific details about where the cat's ashes will be scattered, then the front office team member should be able to answer that question. What you need to avoid is misinformation or confusion. It is best for all members of the practice team to be knowledgeable about the entire process.

Should children be present for euthanasia?

Children can learn valuable lessons about compassion, commitment, and responsibility when they are involved in the decision to euthanize their cat. Being honest with children about how sick the cat is will also be much easier on the parents and children after the cat has been euthanized. Having children present is a decision that is best determined by the parents. It is extremely important that the children are prepared ahead of time on what to expect if they are present. Avoid the use of phrases such as "putting their cat to sleep" as this can help minimize anxiety and stress about bedtime, especially in younger children. Showing sadness and grief in front of children also teaches them that it is okay to cry. Encourage the sharing of positive, happy memories about their cat.

How can I avoid the caregiver associating the veterinarian and practice with their cat's death and not wanting to come back?

The best thing you can do is to provide a smooth, calming, and compassionate experience that honors the life of the cat, and ensure that the cat is not able to feel any pain. Understand that everyone deals with loss in their own unique way. If you follow the tips in this Toolkit regarding the euthanasia process, environment, and final arrangements, you can apply best practices to your own processes. Do not forget that outreach to the family can help them feel support from the practice by demonstrating compassion and respecting the human-animal bond.

How can I help families not feel guilty about getting a new pet?

Many families will get a new pet before the first one has passed or soon after. There should never be any guilt placed upon that owner from anyone on the team. Getting a new pet is not about replacing the other pet but about filling the deep hole that the first one dug and providing another pet with a good home to live in.

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FAQs continued

Protecting the Veterinary Professional's Mental Health continued:

I perform many euthanasias and am exhausted, both mentally and emotionally. What can I do?

As veterinarians, we want to cure, treat, save, and protect pets from suffering. Euthanasia is not normally on the list of things we 'want' to do, but it is a necessary service we do provide. Performing euthanasia can be taxing on the soul and cause emotional distress. This usually comes from the euthanasias that we feel are not warranted or where there is a chance for a cure or treatment for the cat. It is important to remember that not everyone has the same monetary, physical, emotional, or practical capacities to manage a sick or older cat. What we would do as a veterinary professional is not always what the general public would do. When faced with euthanasias that you struggle with, try to avoid judgment as it only adds an emotional tax that is not needed. Instead of focusing on why we have to euthanize, focus on how we can do it well. This Toolkit will provide you with some tips on best practices to perform euthanasia. If you are able to relieve a cat's anxiety or suffering during euthanasia, that may relieve you of some of the mental exhaustion that could accompany it.

Are there resources available for veterinarians?

There are several organizations that are committed to offering mental health tools and resources to veterinary professionals.

- AVMA Wellbeing Resources – www.avma.org/resources-tools/wellbeing
- AVMA Get Help and Crisis Chat Line – www.avma.org/resources-tools/wellbeing
- AVMA Work and Compassion Fatigue – www.avma.org/resources-tools/wellbeing/work-and-compassion-fatigue
- Not One More Vet – www.nomv.org
- Veterinary Social Work – vetsocialwork.utk.edu
- Veterinary Interactive Screening Program – www.visp.caresforyou.org/welcome.cfm

Euthanasia Process:

What happens if we cannot access a vein?

Venous access is the most common way euthanasia solution is delivered, but all the other routes noted in this Toolkit are very easy to achieve, and some are preferred by many veterinarians for cats. The team should be educated and prepared for the use of all routes of euthanasia administration.

What do you suggest if we have insufficient sedation/anesthesia?

Many cats with high levels of pain or those in respiratory distress will require more sedation to achieve a calm plane. If you are unable to achieve a sufficient plane of anesthesia, then you must only use the IV technique.

What do you suggest if we do not have enough euthanasia solution?

If you find yourself in a situation without enough euthanasia solution available, you should refer the cat to a practice that does. Learn and understand your local laws about borrowing solution from a local veterinary practice as it varies from state to state. More information can be found in the AVMA Guidelines for the Euthanasia of Animals (available at: www.avma.org/sites/default/files/2020-01/2020-Euthanasia-Final-1-17-20.pdf).



Client Resources

Here are just a few examples of some client resources you can utilize. You can also find some local resources or other products to assist in your support efforts.

Bereavement Support

- **Lap of Love: Pet Loss and Bereavement Resource Line**

Call 855-351-LOVE (5683) Monday - Friday. The resource line is a complimentary national hotline available to those that are anticipating or grieving the loss of their cat.

- **AVMA Compiled Pet Loss Support Grief Counseling**

- Chicago VMA - chicagovma.org; Phone: 630-325-1600
- Cornell University - vet.cornell.edu; Phone: 607-253-3932
- University of Illinois - vetmed.illinois.edu; Phone: 217-244-CARE (2273) or 877-394-CARE (2273)
- Michigan State University - cvm.msu.edu; Phone: 517-432-2696
- P&G Pet Care, Pet Loss Support Hotline - Phone: 888-332-7738
- University of Pennsylvania - vet.upenn.edu; Phone 215-898-4556
- University of Tennessee - vet.utk.edu/socialwork; Phone: 865-755-8839
- Tufts University - vet.tufts.edu/petloss; Phone: 508-839-7966
- Virginia-Maryland Regional College of Veterinary Medicine - vetmed.vt.edu; Phone: 540-231-8038
- Washington State University - vetmed.wsu.edu; Phone: 509-335-5704 or 866-266-8635

- **The Association for Pet Loss and Bereavement**

- Pet Loss and Anticipatory Bereavement Chat - aplb.org/chat-2/
- Directory of Pet Loss Support Groups - aplb.org/support/pet-loss-support-groups/

Children's Reading List

- Meng, Cece, and Jago. *Always Remember*. Illustrated, Philomel Books, 2016.
- Poll, Van Wendy. *Healing A Child's Pet Loss Grief: A Guide for Parents*. Center for Pet Loss Grief, LLC, 2016.
- Potter, Shirl, and Koss, George. *Death of a Pet: Answers to Questions for Children and Animal Lovers of All Ages*. Guideline Publications, 1991.
- Rigabar, Barbara Bareis, and Chris Sharp. *A Rainbow Bridge for Gus: A Story about the Loss of a Pet*. Barb Rigabar, 2014.
- Rylant, Cynthia. *Cat Heaven*. Illustrated, Blue Sky Press, 1997.
- Tousley, Marty. *Children and Pet Loss: A Guide for Helping*. 1st ed., Our Pals Pub, 1996.

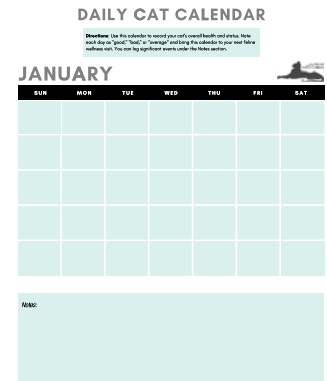


Client Resources continued

Free-to-Print Resources

Daily Cat Calendar

Clients can download and print this 12-month calendar to record their cat's ongoing health and status. They can note each day as "good," "bad," or "average" and bring this calendar to their next feline wellness visit. Notable or significant events can be recorded in the "Notes" section beneath the calendar.



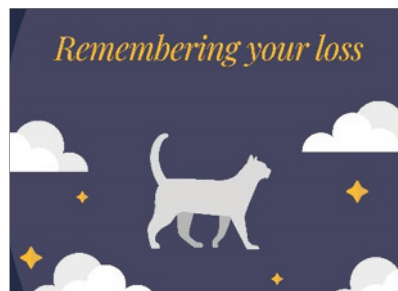
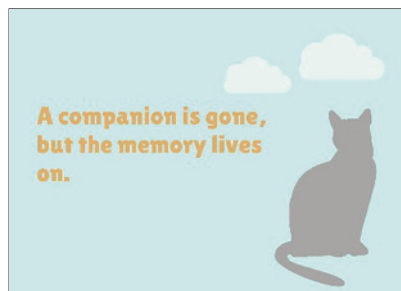
Lobby Sign

Print and display this sign in your lobby to inform other clients that a euthanasia procedure is occurring.



Customizable Sympathy & Anniversary Cards

All cards are provided as an editable PDF to personalize and use at your practice. Each card is formatted for A4-size paper sheets in landscape orientation.





Further Reading

Guidelines

AVMA Guidelines for Pet Loss Support Services – www.avma.org/resources-tools/avma-policies/avma-guidelines-pet-loss-support-services

AVMA Guidelines for the Euthanasia of Animals – www.avma.org/sites/default/files/2020-01/2020-Euthanasia-Final-1-17-20.pdf

IAAHPC Animal Hospice and Palliative Care Guidelines – www.iaahpc.org/wp-content/uploads/2020/10/IAAHPC-AHPC-GUIDELINESpdf.pdf

Other Resources

American Association of Feline Practitioners. *AAFP Position Statement: End of life issues in feline medicine (2010)*. Available at: catvets.com/public/PDFs/PositionStatements/End-of-life-issuescropped.pdf

American Association of Feline Practitioners. *AAFP Position Statement: Euthanasia in cats in a clinical setting (2014)*. Available at: catvets.com/public/PDFs/PositionStatements/Euthanasia-in-Cats-in-a-Clinical-Setting.pdf

Cooney, K. A., Chappell, J. R., Callan, R. J., et al (2012). *Veterinary Euthanasia Techniques: A Practical Guide*. Oxford: Wiley-Blackwell.

Grimm H., Bergadano A., Musk G.C., et al (2018). Drawing the line in clinical treatment of companion animals: recommendations from an ethics working party. *Vet Rec.* 2018;182(23): 664.

King, B. (2013). "When Animals Mourn." *Scientific American*, 309(1): 62-67.

Marchitelli, B., & Shearer, T. S. (2020). *Small Animal Euthanasia: Updates on Clinical Practice*. Philadelphia: Elsevier.

The Ohio State University Veterinary Medical Center. *How Do I Know When It's Time? Assessing Quality of Life for Your Companion Animal and Making End-of-Life Decisions*. Available at: [vet.osu.edu/vmc/sites/default/files/import/assets/pdf/hospital/companion Animals/HonoringtheBond/HowDoIKnowWhen.pdf](http://vet.osu.edu/vmc/sites/default/files/import/assets/pdf/hospital/companion%20Animals/HonoringtheBond/HowDoIKnowWhen.pdf)

Robertson S., Gogolski S., Pascoe P, et al. (2018). *AAFP Feline Anesthesia Guidelines*. *Journal of Feline Medicine and Surgery* 20(7): 602-634. doi:10.1177/1098612X18781391

Rollin, B. (2002). *The use and abuse of Aesculapian authority in veterinary medicine*. *Journal of the American Veterinary Medical Association*, 220(8): 1144-1149. doi.org/10.2460/javma.2002.220.1144

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

JANUARY



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

FEBRUARY



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

MARCH



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

APRIL



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

MAY



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

JUNE



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

JULY



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

AUGUST



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

SEPTEMBER



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

OCTOBER



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

NOVEMBER



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

DAILY CAT CALENDAR

Directions: Use this calendar to record your cat's overall health and status. Note each day as "good," "bad," or "average" and bring this calendar to your next feline wellness visit. You can log significant events under the Notes section.

DECEMBER



SUN	MON	TUE	WED	THU	FRI	SAT

Notes:

A fellow cat lover is
saying goodbye to their
beloved pet.

Please speak softly
and with respect.
Thank you for your
kindness during this
difficult time.















Sometimes a very special cat enters our lives, and their presence changes our hearts forever.

May your wonderful memories comfort you and bring you peace.

Warmest Regards,