



More than Medicine – The Veterinarian's Role in Daily Rounds (Part 2)

Video Transcript

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Dr. Stephanie Jacks: My name is Stephanie Jacks, and I am a shelter veterinarian in Jacksonville, Florida. I have been a shelter vet there for three years, and I'm going to talk also about how to do daily rounds. Dr. DiGangi kind of told you the who, what, when, where and why we do rounds, and I'm going to kind of tell you how and give you some tips of how we get it done. So as I said, I live in Jacksonville, Florida. As some of you may know, it was just the site of the Florida/Georgia game. Because I went to both schools, I can say this: Go Dogs.

So a little bit about us. This last year we took in about 20,000 animals when I first started. We were probably over 25,000 animals, and I think this decrease has been due to a lot of spay/neuter projects that we do, our Feral Freedom program that we work with, First Customer Homeless Pets. On average now, we usually take in about 62 new animals a day. High days are over 100. Our average daily population is around 237, and that can be over 300 in some of our higher intake weeks. This new shelter that we are at now, we moved in 2009, it's over 42,000 square feet. That's a lot of space to cover during rounds. We have 264 dog kennels, and those are split up into stray holding, isolation, and adoption kennels. We

also have 144 cat cages which we actually don't use most of those due to the Feral Freedom program.

When this shelter was designed, we were supposed to hold feral cats for two days, but now that we do our T and R program, most of those cats are going straight out the door the day they come in. First Customer Homeless Pets picks them up twice a day, at lunchtime and at the end of the day, which helps us out tremendously. So of those 88 stray holding, we really only use maybe 48 of those. So our groups that we use for daily rounds, we kind of split them up to make them more practical and give us more time. We have the animal inventory going about three times a day. Our vet tech comes in before the shelter opens and does a thorough inventory of all the animals in the shelter verifying that the right animal is in the right cage, and then we do another inventory around lunchtime and another one at the end of the day just to keep on top of the population.

We also have an adoption team, and their job is to go through and give a pathway to every animal. The different pathways are the move to adoptions. The PPP is our Pet Placement Partners. Those are for our rescues and transfers to like the Humane Society. FF is our Feral Freedom. Most of those, as I say, go from intake directly to the room where the First Customer Homeless Pets people pick them up, but occasionally we have a cat that gets put into a cage and we designate it as a feral cat, and it ends up going out at a later date.

We also have foster animals, and our NFA status, which is unfortunately not for adopt. Then we have our population medical teams, and like what Dr. DiGangi kind of went over, our job is to look at if there is any medical care that's needed on each animal, look at these pathways that have already been designated and determine if they are correct or if they need to be changed, put in notes for the animals about behavior or other issues that we have noticed during our walks, making any corrections to dates, stray hold dates, or anything else on the kennel cart or whatever that we have seen, and then do tracking and put on holds if we notice that an animal has an identification that was missed at intake.

So our population and medical teams consist of two groups. We have our daily group which is one veterinarian and one vet tech. The one vet tech is a consistent person. We have in the past had that be a rotating position, and we found that just having a consistent vet tech, they know what's going on. They are walking rounds with the vets. They kind of understand what we're looking for. And in a pinch when we get kind of busy they could do daily rounds for us if we're unable to break away. Weekly, and this is something we just started this month, we have all of the managers and supervisors walk the runs at one time. And as I said, that just started this last month, and that's been going well to kind of have everybody else see what's going on in the shelter on a daily basis. So our biggest problem is finding time. Our main job is to do surgery to get

these animals sterilized so we can get them to adoptions or to rescue groups. We are in surgery five or six hours a day, and then there is only a couple more hours left while we have staff members there to kind of get this accomplished. So we have gone from do we do them in the morning or do we do them in the afternoon? The morning is taken up by surgeries, so it does kind of take a vet away from doing surgery in the morning. But it also gives that staff member time to complete all the duties during the day. If we do them in the afternoon, sometimes we get kind of busy. It's a little harder to find that time, and the staff member doesn't have the ample time to do it, but we're not interrupting surgery. We have a planned route through the shelter. We start in our adoption facility and work our way to isolation, not just for control of disease spread through the shelter, but also so we know what animals we have in adoptions so when we're walking through and looking at the different pathways, we might change some animal's pathway after seeing what is being held up in adoptions.

We have a lot of heartworm dogs being from the south. If there is only a couple of dogs in adoptions with heartworms, we might move more of those forward versus trying to get them out to rescues. This slide is just some of the tools. The main tool that we have is the people that are doing it, making sure they are trained and understand the goals that we're trying to accomplish. We have Wi-Fi in our facilities so we can take a laptop through. We also have gone through with the sheets like Dr. DiGangi

showed, and I will show you a couple of other different sheets that we have used in the past and talk about the pros and cons to why we use them and why the staff doesn't like them or not. And having current kennel cards on the cages like Dr. DiGangi said, knowing who that animal is. You have a black dog in a cage. Who is it? Why did it come in? What does it need? How long has it been here? That's all on our kennel cards. And that also goes from having a current inventory that is correct making sure that that black dog is the right black dog and not the one next door. And giving authority or power to the daily round staff so they can make any changes or corrections to these animals as they need to.

So this is one of our reports. We use Chameleon as our database program. I don't know. There are other programs out there. I'm sure that you guys can have these modified. On these things we see which cage the animal is in, it's ID number, when it came in, when it's due out, sex, and other descriptions of it. If there is any holds that are on there, what we have designated the status as. And we have a little space that we can write in, actions that need to be done. The obvious thing with this is that having enough space to write in everything, and it also uses a lot of paper. It's probably about 14 to 15 pages when you print out the whole shelter. The staff likes it. It's actually a thing that we all like because it gives you the most current information. We also have made a check off sheet, and I think those are in the packet. This we have where we can put in the kennel ID and just kind of check-box the most required actions that

we have at our shelter and then when things are due by. The staff kind of doesn't like having to do all the writing. They prefer using the Chameleon inventory sheets. And then my favorite is taking the laptop around because we can see all the information that we need. Who is this animal, what needs to be done to it, we can make comments, we can go into the medical screen, sign them up immediately for medications, see if they have already been signed up for medications. The staff finds it kind of cumbersome to push a laptop around on a cart, but sometimes that's just what you do. The other thing I find that makes it easier is having the protocols of what to do so you're not having to re-describe everything each time an animal has a microchip. If they are held for this many days, we have to send out a letter. You have to call these databases. Find out who the owners are. If it's injured or sick, what needs to be done next. If it has a respiratory disease, take it straight to isolation. Get a work-up. If it has vomiting and diarrhea, test it for parvo first before even handling the animal. All animals under six months are able to be fast-tracked to the shelter. We don't have a holding period for them. So we can get them straight to surgery, like the next day. And then what are our work-ups for adoptions. All right. Any questions?