The effect of the Asilomar definitions is not to draw lines between animals who can and can’t be saved, but to put shelters on the same footing as their community: shelters that save all healthy and treatable dogs and cats in their care are meeting the standard of care typically provided in their own community. Shelters that go beyond this to save a portion of the “unhealthy & untreatable” are exceeding their community’s standard of care and thus setting an example of humane treatment. These shelters aren’t following their community – they’re leading them.

Healthy

Definition:

The term “healthy” means and includes all dogs and cats eight weeks of age or older that, at or subsequent to the time the animal is taken into possession, have manifested no sign of a behavioral or temperamental characteristic that could pose a health or safety risk or otherwise make the animal unsuitable for placement as a pet, and have manifested no sign of disease, injury, or congenital or hereditary condition that adversely affects the health of the animal or that is likely to adversely affect the animal’s health in the future.

Explanation:

Dogs and cats who meet the definition of “healthy” are reasonably healthy, reasonably well-adjusted pets over the age of eight weeks. These animals do not need medical, behavioral or foster care and are ready to be made available to the public for adoption. A dog or cat does not have to be cute and cuddly or easy to place to meet this definition: “healthy” is not the same as “easy to adopt.” The animal may be blind, deaf, old, or missing a limb, or she may be a pit bull that local laws or policies say can’t be adopted out, but as long as the animal is reasonably healthy and reasonably well-adjusted, she meets the definition.

Note that the definition of “healthy” says the animal must not show any sign of disease, injury, etc. either “at or subsequent to the time the animal is taken into possession.” Consequently, if at any time during an animal’s stay in the shelter he or she becomes ill or injured, is under eight weeks old, or develops a behavior problem or other specified condition, that animal does not meet the definition of “healthy.” For example, a friendly dog who appears healthy and well-adjusted when she arrives at the shelter, but later develops a serious case of kennel cough, does not meet the “healthy” definition. By the same token, an animal who arrives at the shelter with a serious case of kennel cough will not meet the definition, even if she is completely cured while under the shelter’s care.
**Treatable**

**Definition**

The term “treatable” means and includes all dogs and cats who are “rehabilitatable” and all dogs and cats who are “manageable.”

The term “rehabilitatable” means and includes all dogs and cats who are not “healthy,” but who are likely to become “healthy,” if given medical, foster, behavioral, or other care equivalent to the care typically provided to pets by reasonable and caring pet owners/guardians in the community.

The term “manageable” means and includes all dogs and cats who are not “healthy” and who are not likely to become “healthy,” regardless of the care provided; but who would likely maintain a satisfactory quality of life, if given medical, foster, behavioral, or other care, including long-term care, equivalent to the care typically provided to pets by reasonable and caring pet owners/guardians in the community; provided, however, that the term “manageable” does not include any dog or cat who is determined to pose a significant risk to human health or safety or to the health or safety of other animals.

**Explanation**

The definition of “treatable” is divided into two parts: “rehabilitatable” and “manageable.”

“Treatable-Rehabilitatable” includes sick, injured, and underage dogs and cats, as well as dogs and cats with behavior problems. “Rehabilitatable” animals are animals that could become reasonably healthy, well-adjusted pets, if given “the care typically provided to pets by reasonable and caring pet owners/guardians in the community.” Because this is a community-based standard, some animals who meet the definition of “treatable-rehabilitatable” in one community might not meet the definition in another. For instance, shelters in communities where pet guardians typically provide pets with very high levels of care would categorize more animals as “treatable-rehabilitatable” than would shelters in communities with lower levels of care. The community-based definition helps to ensure, however, that shelters do not fall below standards in their community for determining which animals are treatable.

“Treatable-Manageable” differs from “rehabilitatable” in that “manageable” animals are not expected to become reasonably healthy, well-adjusted pets, even if they are given care that meets the standard in their community. These animals are, however, expected to have a satisfactory quality of life if given such care. For instance, a diabetic cat may never be cured, but she is likely to have a satisfactory quality of life if given insulin shots. She cannot be categorized as “treatable-rehabilitatable” because she will always be diabetic. However, assuming insulin shots are typically provided to diabetic cats by caring pet guardians in her community, the cat would be classified as “treatable-manageable.”*
Feral cats may fall into the "treatable-manageable" category if they are provided care that meets the community standard. With greater collaboration between shelters and feral cat colony caregivers and with the rise of feral cat groups operating successful trap, neuter, and return programs, increasing numbers of shelters are returning ferals to their original habitats to be overseen by responsible colony caregivers. One shelter in Wisconsin actually finds homes for altered ferals as barn cats.

The definitions of both “treatable-rehabilitatable” and “treatable-manageable” refer to the standard of care “typically provided by reasonable and caring pet owners/guardians in the community.” This standard of care is not the same as the most advanced care that might be provided by veterinary or behavior science. No doubt there are animals who could be saved by the latest advances in these sciences, but if such care is not “typically provided” by pet guardians in the community, these animals do not fall within the “treatable” definition. In other words, “treatable,” as defined in the Asilomar Accords, is not the same thing as “savable.” For more on how to go about determining the “care typically provided by reasonable and caring pet owners/guardians in the community,” see “Creating a Pet Evaluation Matrix for the Asilomar Definitions.”

Note also that there is nothing in the definition of “treatable” that says a shelter has to be able to provide treatment in order for an animal to be categorized as “treatable.” In other words, whether an animal meets the “treatable” definition does not depend on whether a shelter actually has the resources to treat the animal. A dog with kennel cough meets the definition as long as reasonable and caring pet guardians in the community would typically treat their own dogs for the disease. The fact that a shelter may not have a medical clinic or veterinarian, is overcrowded, or can’t afford to provide treatment is not a factor in determining whether the animal meets the definition.

*The definition of “manageable” excludes animals that pose a significant risk to the health or safety of people or other animals. These animals would be categorized as “Unhealthy & Untreatable.”

**Unhealthy & Untreatable**

**Definition**

The term “Unhealthy & Untreatable” means and includes dogs and cats who, at or subsequent to the time they are taken into possession,

1. have a behavioral or temperamental characteristic that poses a health or safety risk or otherwise makes the animal unsuitable for placement as a pet, and are not likely to become “healthy” or “treatable” even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community; or
2. are suffering from a disease, injury, or congenital or hereditary condition that adversely affects the animal’s health or is likely to adversely affect the animal’s health in the future, and are not likely to become “healthy” or “treatable” even if
provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community; or

(3) are under the age of eight weeks and are not likely to become “healthy” or “treatable,” even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community.

Explanation

The definition of “unhealthy & untreatable” covers dogs and cats who do not fall into either of the categories “healthy” or “treatable.” “Unhealthy & Untreatable” includes animals who are not likely to become healthy, well-adjusted companion animals, or animals who are not likely to have a satisfactory quality of life, even if they are given care typical of that provided by reasonable and caring pet guardians in the community.

Note that just because an animal is categorized as “unhealthy & untreatable” does not mean the animal can’t be saved. Nothing in the Asilomar Accords definitions prevents shelters from providing care beyond that typically provided by pet guardians in their communities. Animals categorized as “unhealthy & untreatable” due to serious behavior issues like dog to human aggression, for instance, may be placed in sanctuaries or other appropriate long-term care facilities, if available. Similarly, extensive medical intervention, foster care, and other treatment may be provided to rehabilitate seriously sick and injured animals so they too can be placed in loving homes. Many shelters can and do provide care that exceeds community standards and are thus at the forefront of humane change in their communities.

Some feral cats will fall into the “unhealthy & untreatable” category. Ferals, however, are one of the best illustrations of the fact that “unhealthy & untreatable” does not mean unsavable.

The effect of the Asilomar definitions is thus not to draw lines between animals who can and can’t be saved, but to put shelters on the same footing as their community: shelters that save all healthy and treatable dogs and cats in their care are meeting the standard of care typically provided in their own community. Shelters that go beyond this to save a portion of the “unhealthy & untreatable” are exceeding their community’s standard of care and thus setting an example of humane treatment. These shelters aren’t following their community: they’re leading it.