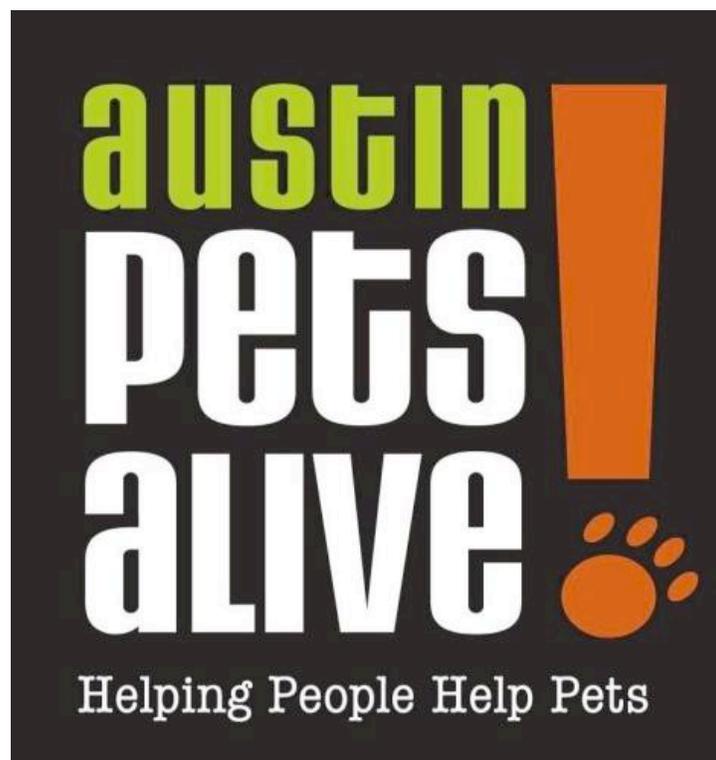


## **Maddie's Neonatal Kitten Nursery Apprenticeship**

The No-Kill Training Academy at Austin Pets Alive!



# Neonatal Program Policies, Procedures, and Protocols





## THE MISSION OF THE NEONATAL PROGRAM

**The mission of the Neonatal Program is to grow with the needs of the organization and the community to be able to accept all kittens that local shelters and rescue groups cannot keep; to provide the best possible care for these kittens to achieve the highest possible survival rate to get them adopted into permanent homes; and in so doing, to help maintain Austin's No-Kill Status.**

The Austin Pets Alive! Neonatal Program was developed in 2009 to rescue orphaned kittens from shelters that do not have the human, physical, or financial resources to care for them and that would otherwise euthanize the kittens. Our program feeds and cares for the kittens until they are healthy and old enough to be spayed or neutered and enter the cat program for adoption. In addition to feeding and housing the kittens, the neonatal team, with the help of our medical team, also takes care of any medical needs that they have. The program also accepts pregnant cats and their kittens when they're born, and nursing cats with their litters. Due to the fragile nature of neonates, the special needs of mother cats and their litters, and the large number of animals taken in, the Neonatal Program has developed procedures and protocols specific to the needs of these animals in accordance with veterinary practices, and has created an organizational structure to accomplish this goal.

## POLICIES, PROCEDURES, AND PROTOCOLS

The following procedures and protocols have been created to provide the best possible care for our kittens and to provide a positive and effective working environment for our staff and volunteers. These procedures and protocols follow accepted veterinary practices and take into consideration the needs of a shelter environment.

The lives of animals in a shelter environment can be vastly different from what most pet owners are used to at home. The APA! Neonatal Program operates under veterinary supervision with the best interests of its kittens in mind at all time. Adherence to all procedures is strictly enforced.

The lives of animals in a shelter environment can be vastly different from what most pet owners are used to at home. The APA! Neonatal Program operates under veterinary supervision with the best interests of its kittens in mind at all time. Adherence to all procedures is strictly enforced.

|                   |  |
|-------------------|--|
| <b>Section 1</b>  | <b>FAQs: Where to Find the Information You Need</b>  |
| <b>Section 2</b>  | <b>Communication</b><br>Bottle Baby Yahoo Group, Team Roster, Organizational Chart                                   |
| <b>Section 3</b>  | <b>Nursery Staff and Volunteer Responsibilities</b><br>Organization Chart, Job Descriptions, Participation Agreement |
| <b>Section 4</b>  | <b>Intake Procedures</b>   |
| <b>Section 5</b>  | <b>Keeping Kittens Warm</b>  |
| <b>Section 6</b>  | <b>Bottle Babies</b><br>Feeding; Stimulation; Tube-Feeding; Suckling; General Care                                   |
| <b>Section 7</b>  | <b>Gruel Babies</b><br>Weaning; Feeding; General Care  |
| <b>Section 8</b>  | <b>Pregnant &amp; Nursing Cats</b>   |
| <b>Section 9</b>  | <b>Ringworm, Fleas, and Parasites</b>  |
| <b>Section 10</b> | <b>Health &amp; Medical</b><br>Symptoms & Illnesses; Medications; Calicivirus; Panleukopenia; Vaccinations           |
| <b>Section 11</b> | <b>Fading Kitten Syndrome</b>  |
| <b>Section 12</b> | <b>Deceased Kittens</b>  |
| <b>Section 13</b> | <b>Bite Protocol</b>   |
| <b>Section 14</b> | <b>Sanitation Protocols</b>  |
| <b>Section 15</b> | <b>Dishwashing &amp; Laundry</b>   |
| <b>Section 16</b> | <b>Stages of Kitten Development</b>  |

## 1. FAQs: WHERE TO FIND THE INFORMATION YOU NEED

- **How do I communicate with the team or with team leadership? (Section 2)**  
Most of your questions can be answered by the Nursery Manager, Assistant Manager, or Volunteer Liaison. If you are unsure who to contact, check the team roster or the “Go-To” chart posted in the nursery.
- **What do I do if I am unhappy or confused about nursery operations? (Section 2)**  
Contact the Nursery Manager, Assistant Manager, or Volunteer Liaison for guidance; see the “Go-To” chart or the team roster for contact information.
- **Who do I contact in an emergency? (Section 2)**  
If you have a medical emergency with a kitten in the nursery, contact the Nursery Manager or Assistant Manager right away. If neither of them are in the nursery and cannot be reached by phone, contact the clinic right away.  
*If an emergency concerns your immediate personal health or safety, call 911 before attempting to call anyone from APA! or the Bottle Baby Team, especially if it is outside normal business hours.*
- **I’m on the team—now what? (Section 3)**  
All scheduling issues are addressed with *[email address]*. To maintain a schedule of feeders in the nursery, all volunteer feeders must commit to a minimum of one 3-hour shift per week. All missed shifts must be made up.
- **Can I bring my pets or foster animals to the nursery with me? (Section 3)**  
Due to the possibility of spreading disease to cats and kittens residing in the nursery, you cannot bring any personal pets or foster animals into the nursery at any time. If you believe it is necessary to have a foster animal with you for some reason, you must get prior approval from the Nursery Manager.
- **Why is it so important to keep kittens warm? (Section 5)**  
A very young kitten cannot regulate its body temperature. If a kitten becomes chilled to the point that its body temperature drops, this can cause the kitten to fade. If steps are not taken to prevent this, the kitten can die.
- **Why do we dilute the KMR in ratios of 8:1, then 4:1, then 2:1? (Section 6)**  
This helps the kitten avoid diarrhea or other digestive problems as it is introduced to a new environment and a new diet.
- **How much should a kitten eat? (Section 6, Section 7)**  
The general rule is for kittens to consume 5% of their body weight at each feeding. To verify that a kitten has consumed enough, compare its weight before feeding with its weight after feeding (but before stimulation). There are feeding charts posted in the nursery to help you with these calculations.
- **How do I force-feed? (Section 6, Section 7)**  
Force-feed a kitten with either formula or gruel using a syringe—a small one for bottle babies and a larger one for gruel babies. Some kittens take to this easily, while others do not; exercise patience. Always be careful not to let the kitten aspirate (get food or liquid into its lungs). If the kitten is mouth breathing, do not force-feed, as this can lead

to choking. Alert the Nursery Manager or Assistant Manager right away if a kitten chokes or aspirates.

- **What do I do if a kitten won't eat or gain weight? (Section 6, Section 7, Section 8)**

If the kitten is healthy, it may be having a hard time adjusting to life without its mother. Be patient—syringe feeding may be required to supplement what the kitten eats on its own, or may be required completely if the kitten is not eating at all. If the kitten has a URI, diarrhea, or other illness, it may not be able to swallow or may be too weak to eat properly on its own. Be sure to note eating habits on the kitten's chart and on the Feeder Board.

- **How do I know when a kitten is ready to eat gruel rather than KMR? (Section 7)**

If a kitten has teeth, including incisors, it can usually move on to gruel. Nursery management will determine when a litter is ready to be weaned. All kittens in a litter should be eating the same food, whether it's KMR or gruel and kibble.

- **Who do I tell if I see fleas or other parasites? (Section 9)**

All animals have fleas and frequently have parasites. While these are normal and almost unnoticeable in older animals, they can cause serious illness in very young kittens. Bring these conditions to the attention of nursery management.

- **Will my pets at home be safe from contagion that is in the nursery? (Section 9, Section 10)**

If your pets are current on all their vaccinations and you adhere to sanitation protocols, your pets should be safe from contracting illnesses you come into contact with in the nursery. Be advised that your pets could contract an illness if their own health is compromised in some way, if they are not vaccinated, or if you do not follow all sanitation protocols.

- **Are the kittens in the nursery healthy? (Section 10)**

Many of the kittens we rescue are sick, and some of them are injured. Most of these kittens were found out in the elements where they were exposed to every type of parasite and contagion imaginable. They are also exposed to predators and other means of injury that are not common to housecats. They are evaluated at intake and treated for any known illnesses or injuries at that time.

- **What do I do if a kitten vomits or has diarrhea? (Section 10)**

If the kitten has diarrhea and is already being treated for it, watch for any changes that signal a problem; alert the Nursery Manager or Assistant Manager. If the kitten is not already being treated for diarrhea, note it on the kitten's chart and on the Feeder Board. If a kitten vomits, always note it on the kitten's chart and on the Feeder Board. If the kitten is soiled, clean it gently with warm wipes and dry the kitten well. If the kitten's bedding is damp, wet, or soiled, clean the crate and replace the bedding.

- **What do I do if I am bitten? (Section 13)**

Cat bites can be serious. If a cat or kitten in the nursery is feral or has shown signs of aggressive behavior, there should be a note on the Feeder Board and on the crate so that feeders use caution when tending to these cats. **It should be noted that ALL ANIMALS CAN BITE, and while there have been few instances of biting in the nursery, as a feeder and as someone charged with the care of cats and kittens,**

**you should be aware that the possibility is ever-present.** If you are bitten, the procedure to follow is posted throughout the nursery and in the operations manual, and it should be followed precisely.

## 2. COMMUNICATION

### **Bottle Baby Yahoo Group**

The Neonatal Program communicates as a group using a Yahoo group: APA! Bottle Baby Program, [website]. The Yahoo group allows us to email messages that the entire group can see and to engage in group discussion. Messages are made and sent through your personal email to [email address]. You must receive and accept an invitation from the group before you can send or receive messages.

- The neonatal team does not communicate using Volunteer Squared (Vol2).
- Only active feeders and bottle baby leaders are members of the Yahoo group.
- Messages sent to/from this email address are public and go to everyone in the group. If you wish to have a private communication with someone, you must use that person's private email address.
- When you receive a group email and wish to reply, consider first if you want to "reply all" to the group or "reply" just to the sender.
- Emails about fading and/or deceased kittens should be directed to nursery management and should never be sent through the Yahoo group. Consult the "Go-To" chart for the email address you need.
- Problems with management, staff, or volunteers can be taken to the Volunteer Liaison either through [email address] or through their personal email. Messages that create dissension in the nursery will not be tolerated and can be grounds for removal from the group and/or termination from the program.
- Be thoughtful when emailing the group. There are more than 100 people in this group and their feelings and privacy should always be considered.

### **Volunteer Liaison**

The Volunteer Liaison is here to maintain open lines of communication between the volunteers and program management and can be contacted at [email address] or directly. If you wish to communicate confidentially, contact the Volunteer Liaison directly. Staff and interns are welcome to contact the Volunteer Liaison with any concerns, with the understanding that the VL may not be able to resolve the problem. Staff and interns are welcome to meet with the Nursery Manager or Assistant Manager with any problems.

### **Team meetings**

Team meetings are not typically scheduled during the season unless there is something of immediate importance to the team. If there is a team meeting, everyone should attend, except for those scheduled to feed during the meeting time; feeders in the nursery will be updated after the meeting.

### **Group messages**

Program management strives to be respectful of everyone at all times and only sends emails if they are important.

- The subject line of all emails to the group will identify the purpose of the message.
- **Weekly Update** emails are required reading by nursery staff and volunteers and everyone is responsible for the information in them. These emails contain helpful tips and reminders, changes to procedures or protocols, and other important information.
- Pleas for shift coverage are sent when the nursery is short-handed. If you are available to take an extra shift, please "reply all." If you are not available to take an extra shift, then do not reply.
- Pleas for supplies are sent when the nursery needs something.
- Pleas for fosters are sent to the group as needed. If you are available to foster, reply directly to the foster plea. If you are not available to foster, you do not need to reply.
- Other emails sent by management with important announcements should be read by everyone and acted upon accordingly.

## Nursery Roster as of February 2016

Please be respectful of everyone's personal information and their time away from the nursery. If your matter is not urgent, email the person first before calling.

If your matter needs immediate attention but is not critical, send a text message before calling. In an emergency, call the appropriate person for help.

**Never** give out contact information to anyone other than BB team members!

|                           |        |          |         |
|---------------------------|--------|----------|---------|
| Neonatal Program Manager  | [Name] | [Number] | [Email] |
| Assistant Manager         | [Name] | [Number] | [Email] |
| Volunteer Liaison         | [Name] | [Number] | [Email] |
| Training Coordinator      | [Name] | [Number] | [Email] |
| Rescue Manager            | [Name] | [Number] | [Email] |
| Neonatal Foster Manager   | [Name] | [Number] | [Email] |
| Assistant Foster Manager  | [Name] | [Number] | [Email] |
| Foster Mentor Coordinator | [Name] | [Number] | [Email] |

### **Authorized to administer medications, injections, and subcutaneous fluids and authorized to tube-feed:**

[Manager Name] [Number]

[Assistant Manager Name] [Number]

Interns

Med Techs

### **Contact in case of emergency:**

[Manager Name] [Number]

[Assistant Manager Name] [Number]

Clinic: [Number] – **Only call if both Manager and Assistant Manager cannot be reached**

### 3. NURSERY STAFF AND VOLUNTEER RESPONSIBILITIES

The Neonatal Program includes the nursery where kittens reside until they transfer to foster homes, as well as the Foster Team. Below is the Neonatal Program organizational chart, job descriptions for all nursery positions, and the Neonatal Program Participation Agreement. Foster Team procedures are in a separate manual.

Along with the Neonatal Program Manager, the Training Coordinator coordinates training for all volunteer feeders; the Nursery Manager and Assistant Manager train all other positions. All feeders, Med Techs, and interns must sign the Neonatal Program Participation Agreement.

## Job Description: Neonatal Program Manager

**Purpose:** To oversee all administrative and operational functions of the Neonatal Program, which provides basic care and medical attention for orphan kittens, pregnant and nursing cats, and their litters. This includes cats and kittens, both in-house and in foster care, that are rescued each year from a five-county region, which primarily includes Travis County and the Austin Animal Center (AAC). The Neonatal Program Manager works to achieve the highest possible survival rate until animals are adoptable and can be transferred to the Cat Program, thereby assuring APA! helps the city of Austin maintain a No-Kill referendum.

Kittens range in age from newborn to six weeks old and may remain in the program longer depending on their health or other factors; mother cats remain in the program until they are healthy, no longer lactating, and can be transferred to the Cat Program. Peak season, which can last 6–7 months, sees the highest number of intakes, with as many as 40–60 kittens per week and an in-house population of 45 litters (an average litter is 2–5 kittens). Many of these kittens need medical attention, and all of them need to be fed consistently every 2–4 hours in accordance with mandated procedures. While managing the onsite and offsite populations and paying special attention to the specific needs of such young, fragile kittens, the Neonatal Program Manager must perform the following activities:

- Work with APA! leadership to establish and enforce program policies and standard operating procedures
- Work with the APA! medical team to establish and enforce protocols for the general care and medical treatment of the kittens in accordance with veterinary standards
- Provide individualized care and attention for critical kittens
- Work with the APA! medical team to establish and enforce sanitation protocols for general operations and for the containment and prevention of contagion
- Supervise a separate quarantine ward for highly infectious diseases, such as panleukopenia, as needed
- Supervise the daily operations of the nursery, which includes but is not limited to: feeding kittens; intakes and medical treatments; supply management; staff management, including paid and volunteer staff and interns; ensuring all kittens and cats entering the program have been tested for FeLV and/or FIV; disposal of deceased kittens; and maintaining physical space
- Work with APA! leadership to create an operating budget, and operate within that budget; solicit financial and in-kind donations on an ongoing basis
- Build a team of feeders, primarily volunteers, to be in the nursery 21 hours per day during peak season to provide adequate care; monitor team morale
- Create and supervise teams within the program, such as Foster, Fundraising, Volunteer Recruitment and Training, and Rescue Manager
- Perform all administrative and reporting duties, including but not limited to: Pet Point entries for each kitten and cat; medical and feeding charts for each kitten and cat; End-of-Day (EOD) Reports; and weekly accountability of all kittens and cats in program
- Work with PASS Manager to accept cats and kittens from the public
- Coordinate with local shelters and Rescue Program Manager to accept and transport all kittens and cats to the program; must give final approval for all kittens accepted or declined
- Work with Neonatal Foster Manager to stay informed of whereabouts of all kittens in foster; maintain all administrative records for kittens and cats in foster; mentor fosters and Foster Team members
- Respond to written and phone inquiries from other shelters and rescue groups, locally and across the nation, about starting and maintaining neonatal programs

- Speak at the American Pets Alive! Conference and other such conferences to engender interest in and support for neonatal programs
- Respond to inquiries from the general public about caring for neonates

## Job Description: Neonatal Program Assistant Manager

**Purpose:** To assist the Neonatal Program Manager in the daily functions of the ward to assure that the kittens' basic and medical needs are met; to assist with general operations of the ward so that there is no interruption of the daily operational flow in terms of procedures, staffing, and supplies.

With an expectation of more than 1,000 kittens and pregnant and nursing cats to care for in the program, and potentially 50–100 kittens residing in the nursery during peak season (May–August), the Neonatal Program Manager must be able to maintain a detailed record of both the offsite and onsite populations and must report this information to APA!, as well as oversee all administrative and operational functions of the ward itself, which is staffed for 20 hours each day, 6am to 2am. In order for the Neonatal Program Manager to establish and maintain a high standard of efficiency and the highest possible live outcome for the program, the Assistant Manager is needed onsite to:

- Schedule volunteer and paid feeders
- Help supervise nursery staff
- Maintain sanitation according to established protocols in the nursery
- Perform intake testing and evaluations
- Dispense oral medications and injections, and perform other medical treatments as needed
- Perform tube-feeding
- Monitor any cats/kittens with a critical status
- Assist with supply management
- Monitor daily/weekly nursery population
- Decontaminate nursery rooms as needed
- Prepare EOD Reports and other reports as necessary
- Interact closely with other APA! directors/managers/teams
- Attend all staff meetings
- Act as a back-up feeder as needed

The Assistant Manager will report directly to the Program Manager and will provide a daily EOD Report to the Neonatal Program Manager regarding kittens with a critical status, supply needs, scheduling issues, and any other matters requiring immediate attention.

## Job Description: Neonatal Program Med Tech

**Purpose:** To feed and provide basic care and medical treatment for orphan kittens ranging in age from birth to six-weeks old that are rescued by APA! and brought into the Neonatal Program to be raised to the age of adoption; to feed and provide basic care and medical treatment for pregnant cats and nursing cats and their litters.

The Med Tech will learn highly specialized skills for the care of neonatal kittens and will be exposed to animal care in a shelter environment and in a non-profit setting.

Med Techs are responsible for the following duties, and others as assigned:

- Strictly adhere to all established policies, procedures, and protocols
- Follow the strict sanitation regimens set the by APA! Vet Team
- Care for and feed kittens as outlined in the Neonatal Program Protocol Handbook
- Sign the Neonatal Program Participation Agreement
- Work calmly and efficiently when the nursery is at full capacity
- Work under the direct supervision of the Program Manager and Assistant Manager

Med Techs will learn the following skills:

- How to properly feed and care for bottle babies, gruel babies, and nursing moms
- How to administer medications, including oral and subcutaneous meds
- How to recognize symptoms of illness and prescribe proper medication
- How to draw blood used to test for FeLV
- How to tube-feed and when it is necessary to do so

## Job Description: Neonatal Program Intern

**Purpose:** To feed and provide basic care and medical treatment for orphan kittens ranging in age from birth to six-weeks old that are rescued by APA! and brought into the Neonatal Program to be raised to the age of adoption; to feed and provide basic care and medical treatments for pregnant cats and nursing cats with their litters.

This is an unpaid position in which the intern will learn highly specialized skills in an aspect of animal care that is not readily available in typical educational settings. The intern will be exposed to animal care in a shelter environment and in a non-profit setting. Upon completion of the internship, the intern will be awarded a Certificate in Neonatal Care, signed by the Neonatal Program Manager, that outlines the skills they've gained and the time they've committed to the program.

Interns are responsible for the following duties, and others as assigned:

- Commit to a minimum of two months and 15 hours a week with the program
- Strictly adhere to all established policies, procedures, and protocols
- Follow the strict sanitation regimens set by APA! Vet Team
- Care for and feed kittens as outlined in the Neonatal Program Protocol Handbook
- Sign the Neonatal Program Participation Agreement
- Work calmly and efficiently when the nursery is at full capacity
- Work under the direct supervision of the Program Manager and Assistant Manager

Interns will learn the following skills:

- How to properly feed and care for bottle babies, gruel babies, and nursing moms
- How to administer medications, including oral and subcutaneous meds
- How to recognize symptoms of illness and prescribe proper medication
- How to draw blood used to test for FeLV
- How to tube feed and when it is necessary to do so
- Other tasks as necessary

## Guidelines for Volunteer Feeders

- Volunteers must commit to one 3-hour shift each week; the shift can be the day and time of the volunteer's choosing but must be consistent each week.
- Volunteers must attend training, which consists of a 2-hour introduction to policies and procedures followed by two full shifts shadowing an experienced feeder in the nursery for hands-on training with kittens.
- All trainees must complete training and be prepared to begin their weekly shift in 30 days or less, or they must repeat all training.
- No one under 13 years of age is allowed in the nursery; volunteers aged 16–17 must be accompanied by a fully trained parent or guardian.
- There is no community service credit of any kind awarded in our program.
- It is not a requirement, but we do request that volunteers commit to a minimum of 3 months of volunteering after completing training.
- Trainees must attend the APA! general orientation prior to attending neonatal training and must establish a Volunteer Squared (Vol22) profile.

After a volunteer feeder has completed training and has been approved to feed solo, they will be invited to join our Yahoo group and will receive instructions for scheduling their shifts to begin feeding and receiving group messages. All volunteer feeders must sign the Neonatal Program Participation Agreement.

### Weekly shift

Due to the large number of kittens that come and go in the nursery, and the large number of kittens that reside in the nursery during peak season, the nursery must maintain a tightly controlled schedule. If the nursery schedule is not adequately filled at all times, then kittens will have to be declined and they will be euthanized. Volunteers can schedule more than one weekly shift if they want to and are encouraged to respond when pleas for additional help are sent to the group.

- Each day starts at 6am and ends at 3am. Paid feeders supplement volunteers from 6–10am and 10pm–3 am daily.
- During peak season, it can take up to three feeders per room to care for the kittens in a timely manner.
- Send all shift requests to *[email]*; you will receive a confirmation email in reply.
- Volunteers select the day/time of their shifts. For example, if a volunteer requests a shift on Mondays from 8–11am, then that shift will be added to the calendar for that volunteer on a recurring basis.
- All feeders must give sufficient notice if they're changing or cancelling a shift.
  - If it is 24 hours or more in advance, *[email]* should be notified as soon as possible so a substitute can be found. Volunteers must make up all missed shifts.
  - If it is less than 24 hours in advance, volunteers should text or call both the Nursery Manager and Assistant Manager **and** send a plea to the group for coverage.

### Failure to appear for a scheduled shift

Failure to appear for a shift without notice can be grounds for immediate termination for volunteer or paid feeders.

- If a volunteer feeder cancels a shift without scheduling a make-up shift three times in a row, the feeder will be asked to schedule a different time for their recurring shift. Refusal to do so can result in removal from the program.
- If the one-shift-per-week commitment is not fulfilled, the volunteer may be terminated from the program.

### General duties

Each shift is three hours long. Feeders will learn how to prioritize their time as they gain more experience in the nursery. Volunteer feeders are required to do at least one housekeeping chore before signing out so the nursery stays clean, stocked, and operational. If feeders would like to come to the nursery to help with housekeeping but not to feed, they need approval from the Nursery Manager or Assistant Manager to ensure there are enough feeders scheduled to take care of the kittens.

- Sign in upon arrival. Personal belongings should be left outside of the feeding rooms. Cell phones are allowed, but personal phone calls, texting, and emails should be limited during shifts.
- Ask the Nursery Manager or Assistant Manager which room to enter—other feeders are not aware of the nursery's priorities.
- Quickly check for supplies with the feeder who is still in the room. If there is no feeder in the room, quickly grab supplies before starting, being mindful of washing your hands before touching things. Only take fresh supplies from the kitchen or supply room; do not take supplies from other nursery rooms.
- If there are no clean dishes, check the dishwasher.
- If there is no clean laundry, check the washer and dryer.
- Check that there is enough KMR and gruel made to get through your shift. If not, make what you need so that you don't run out in the middle of feeding a litter.
- Wash your hands before beginning to feed and before handling cleaning supplies.
- Check the Feeder Board and start feeding kittens.
- At the end of a shift, all volunteer feeders must do at least one housekeeping chore, usually dishes or laundry. If those two chores are not needed, check with the Nursery Manager or Assistant Manager.
- Upon leaving, sign out and indicate which room you were in and what chore you did.

### Paid feeders

- All scheduling is done through the Nursery Manager.
- Paid feeders have the same basic duties and responsibilities as volunteer feeders. Paid feeders are required to feed kittens until the end of their shifts and are not required to perform a chore before leaving. Paid feeders should, however, clean up after themselves and leave the feeding areas clean and sanitized before leaving.
- Paid feeders use the same feeding and sanitation protocols as volunteer feeders; the only difference is that they feed in different rooms.
- Paid feeders have the same channels of communication as volunteer feeders and operate with the same chain-of-command.
- Paid Feeders work under the same rules and expectations as volunteer feeders and are subject to the same grounds for termination.

### Panleuk feeders

- Panleuk feeders are trained by the Nursery Manager or Panleuk Coordinator on Parvo entrance and exit procedures.

- Panleuk feeders must be experienced feeders who understand that kitten mortality is higher in the Panleuk Ward than in the nursery.
- Panleuk feeders must understand the serious and highly transmissible nature of panleukopenia
- The Panleuk Coordinator manages a feeding schedule on an as-needed basis when there are kittens in the Panleuk Ward and coordinates with the BB Foster Manager to place kittens with a panleuk foster when possible.
- The Panleuk Coordinator will monitor supplies needed in Panleuk Ward.

## Job Description: Neonatal Program Feeder

**Purpose:** To feed and provide basic care and medical treatment for orphan kittens ranging in age from birth to six-weeks old that are rescued by APA! and brought into the Neonatal Program to be raised to the age of adoption; to feed and provide basic care and medical treatments for pregnant cats and nursing cats with their litters.

All feeders must follow established policies and procedures at all times and must be able to work calmly and efficiently when the nursery is at full capacity. Feeders are responsible for the following duties, and others as assigned:

- Volunteers fulfill a minimum of one 3-hour shift per week on a recurring basis
- Feed kittens and cats according to feeding procedures and sanitation protocols
- Make accurate notes on kittens' Daily Care Sheets and Feeder Board
- Alert nursery management of any health issues needing attention
- Clean kittens' crates (including but not limited to litter boxes) as needed and according to protocols
- Move supplies and food from storage to nursery as needed and in accordance with protocols
- Maintain sanitation in the nursery according to protocols
- Wash dishes and laundry as needed and according to protocols
- Empty trash and recycling containers as needed
- Decontaminate rooms on an as-needed basis if not needed for feeding

Feeders must be able to:

- Lift and carry 20 pounds
- Use food and supplies responsibly
- Bend and stoop to tend to kittens in bottom crates
- Climb a stepladder to reach kittens in upper crates
- Be emotionally able to care for fading kittens and those that pass
- Work well with others
- Follow the established chain-of-command to solve problems if/when they arise

Feeders work under the supervision of the Neonatal Program Manager and Assistant Manager. All feeders must sign a Neonatal Program Participant Agreement in order to work in the nursery.

Volunteer feeders must attend the APA! general orientation and submit the APA! Volunteer Application prior to attending the Neonatal Program training. Neonatal Program training must be completed before feeders can feed solo in the nursery.

Paid feeders complete training as prescribed by the Neonatal Program Manager. Duties may differ slightly from this job description; the Neonatal Program Manager will outline all duties.

## Job Description: Neonatal Program Feeder

Caring for neonatal kittens is a delicate task, as they are extremely vulnerable and can easily contract disease and quickly decline in a nursery setting. As such, APA! has strict requirements to ensure that the care these fragile creatures receive is of the highest possible standards. The APA! Neonatal Program could not exist without the dedication of its volunteers and staff, and all nursery feeders must follow the requirements listed below to ensure that the Neonatal Program successfully fulfills its mission to save as many kittens as possible each season.

By signing below, I acknowledge that I have read the related Neonatal Program Job Description and understand reasons for termination. If I do not comply with protocols, I will be given a written warning; after my first warning, the Neonatal Program Manager has the right to remove me from the program. If I miss a scheduled shift without proper notification, I can be automatically removed from the program. If terminated, I will be removed from all Neonatal Program communication groups and will not be allowed to enter the nursery.

### **Actions that can result in Neonatal Program termination**

- Failure to follow job description during shift
- Failure to follow proper sanitation and feeding protocols set by the Neonatal Program Manager
- Administering medications to kittens without authorization from Program Manager
- Untruthful charting and reporting information about kittens
- Failure to attend a scheduled shift without prior proper notification
- Missing three scheduled shifts in a row, or failure to complete a make-up shift for a cancelled/missed shift
- Negativity directed toward another APA! volunteer or staff member
- Conveying private information about kittens/protocols to the public and/or press
- Representing the Neonatal Program or APA! as a whole in a negative way
- Failure to feed any kittens in the nursery needing to be fed, regardless of conditions such as ringworm, illness, etc.

### **I understand that:**

- No one from the public is allowed inside the neonatal ward.
- Family and/or friends are not allowed inside the neonatal ward without prior permission from the Neonatal Program Manager.
- Photos and/or videos are not allowed in nursery without permission of program manager.
- If I do not follow proper protocols, then I risk exposing myself to zoonotic conditions (such as ringworm) and exposing my pets to contagion.
- Any complaints suggestions must be submitted through established communication channels.
- No animals will enter or leave the nursery without permission from APA! staff.

Volunteer Name (please print): \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Training – Volunteer Feeders

The Training Coordinator works with the Nursery Manager to develop and implement a consistent and thorough training program to ensure volunteer feeders are reliable and committed to the mission of the program, and that they fully understand the policies, procedures, and protocols of the Neonatal Program.

The training team consists of:

- Training Coordinator
  - Develops training materials for new feeders and updates materials annually; schedules all training classes and coordinates with other classroom trainers; monitors shadow schedule; coordinates roster of trainers to lead shadows
  - Develops and manages annual Workshop for Returning Feeders
  - Develops and manages annual Workshop for Trainers; trains experienced feeders as they are added to training roster
  - Maintains instructional signage in nursery
  - Sends Weekly Update email to group to enhance and maintain skills and knowledge base of feeders
  - Work with management to ease trainees who are not a good fit for the nursery into other volunteer positions at APA!
  - Work with management and APA! Volunteer Coordinator to recruit trainees
  - Work with APA! Volunteer Coordinator to ensure Neonatal Program is accurately represented at general orientations
  - Maintain Neonatal Program volunteers' Volunteer Squared profiles
- Scheduler for shadows
  - Maintains training calendar for shadows and communicates with trainees until they graduate to solo feeders
- Experienced feeders train shadows in nursery

## Job Description: Neonatal Program Training Coordinator

**Purpose:** To recruit and train neonatal feeders by creating a consistent and thorough training format; lead a team of trainers to ensure new feeders are learning all team policies and procedures and how to properly care for neonates; to ensure the neonatal team is informed of any changes in procedures and to offer additional training as needed to improve feeders' skills.

The Training Coordinator will perform the following activities:

- Update training materials as needed
- Prepare and lead annual Workshop for Returning Feeders
- Prepare and lead annual Workshop for Experienced Feeders/Trainers
- Recruit and train volunteers to be trainers in the classroom and in the nursery (shadows)
- Coordinate with management and trainers to establish training dates
- Post training dates on Facebook, on APA! website, and through other channels as approved
- Ensure conference room is reserved and slide projector is available for class times
- Work with training coordinators who: provide training/program information to potential trainees; maintain class registration and training spreadsheet; and maintain schedule to track trainees' shadow shifts through completion of training
- Represent the Neonatal Program at APA! general orientations for recruitment purposes
- Post pleas for recruits on Facebook, on APA! blogs, and through other media as approved
- Work closely with program management to identify feeders needing help and other training issues needing attention
- Maintain training spreadsheet
- Send weekly update to team with helpful tips and information
- Update and post instructional signage in nursery
- Maintain Volunteer Squared profiles for Neonatal Program volunteers
- Attend all team meetings

## Job Description: Neonatal Program Rescue Coordinator

**Purpose:** To continually coordinate with Austin Animal Center (AAC)—and other shelters that APA! pulls kittens and pregnant and nursing cats and their litters from—and the Neonatal Program Manager and Neonatal Foster Manager to know when kittens can be accepted or must be declined. This is a volunteer position.

The Rescue Coordinator must:

- Commit a minimum of 20 hours per week
- Stay informed about available crate space in the nursery
- Stay informed about available foster capacity
- Arrange immediate transport for litters to be accepted
- Attend periodic meetings with program management
- Work under the direct supervision of the program manager
- Arrange with program manager for a substitute if unavailable
- Be able to work calmly and efficiently during peak season

## Job Description: Neonatal Program Volunteer Liaison

**Purpose:** To build and maintain esprit de corps in the Neonatal Program through ongoing team building and morale-boosting activities in order to foster a positive working environment for all team members, with a focus on volunteers so that the team can retain quality participants, including but not limited to feeders.

The Neonatal Program consists of a large group of disparate people who have joined the team for various personal reasons. The goal of the team is to help APA! and the city of Austin maintain a No-Kill referendum. The goals and expectations of the individuals, however, can be multifaceted, as are their personalities and talents. During peak season, the work of this team is intensely demanding, fast-paced, and emotionally charged; 2–6 people are required to work together comfortably during each shift, in addition to working effectively with other groups within the program (transport, fosters, etc.) and within APA!.

The Volunteer Liaison works closely with program leadership to improve the team dynamic by cultivating a pleasant and productive atmosphere through the following activities:

- Attending team meetings
- Creating/providing open communication within the team and with team leadership
- Help volunteers bond with one another through social interaction
- Being someone volunteers can approach with questions and concerns
- Mediating problems between volunteers and team leadership
- Liaising with team leadership and with APA! leadership as necessary
- Focusing on shared success of the team
- Ensuring volunteers know the donation of their time and energy is appreciated; helping volunteers feel valued and respected
- Team building exercises and events
- Helping to maintain accurate reporting in Volunteer Squared
- Participating in the creation and analysis of team surveys to better judge team morale and areas needing attention in team communication
- Working with team leadership to maintain job descriptions and procedure manuals so that they are current and available to team members as needed

The Volunteer Liaison will inform program management of planned and/or completed team activities and of any issues concerning morale that arise in the Neonatal Ward; issues needing immediate attention will be reported to the Neonatal Program Manager as they arise.

## 4. INTAKE PROCEDURES

As a matter of policy and under our contract with the City of Austin, APA! does not take animals directly from the public. When exceptions are made, kittens enter our program through PASS (Positive Alternatives to Shelter Surrender). Our kittens come primarily from the city shelter, Austin Animal Center (AAC). If AAC receives kittens or nursing and pregnant cats they cannot keep, they call APA!. If we are at or over capacity in the nursery, we must decline, in which case the kittens will be euthanized. We strive to accept all kittens. Ideally, all kittens go to foster homes at intake or within 7-10 days.

### **When AAC (or another shelter) receives kittens**

- The Rescue Manager is alerted that there are kittens needing transport to APA!.
- The Rescue Manager confirms that we can accept the kittens and then sends out a plea for transport.
- Upon arrival in the nursery:
  - Kittens are tested for FeLV and their overall health is evaluated. FeLV-positive kittens are isolated and fosters are found for them.
  - Flea treatment and dewormer are given.
  - Necessary medications and/or medical treatments are started.
  - Kittens are bathed if necessary.
- If a foster is available to take the kittens, they are passed directly to the foster. If not, the kittens are sent to the nursery.
- Kittens are named by transporter, foster, or feeders on duty.
  - Litters in our program are identified by an alphabetical numbering system. The first litter of the year is A1, and each kitten in the litter is given a name beginning with the letter "A." This continues through the end of the alphabet, and then we start over with A2, etc.
  - The number of the litter is attached to each kitten's name (ex: a kitten from the A1 litter will be named Adam 1; a kitten from the B2 litter, Bob 2) as additional identification for administrative purposes.
- Kittens are placed into a crate and a file with their medical charts and each kitten's feeding chart is started. Accurate recordkeeping is essential.
- There are other administrative tasks associated with the intake of a kitten that are done by management or the Data Administrator.

Kittens are housed in three different areas in the nursery, which are designated Room A, Room B, and Room C. There is also an overflow/intake room that can be used when the nursery is at peak capacity. The nursery has a total capacity of 45 litters.

### **Nursery room rotation—"all in—all out"**

- When one room is filled, then the next room will be used, and then the next.
- Once a room has reached capacity, new litters are not put into that room until all of its litters have left the nursery and the room has been decontaminated. This is referred to as "all in—all out" and is done to prevent and control contagion.
- When possible, management will decontaminate the room. When management is not available, a plea will be sent for volunteers, or feeders can be tasked to decontaminate during their shifts if the nursery is caught up.
- Empty cages should be cleaned, sanitized, and made ready for incoming litters. Crates are not reused once they've been vacated by a litter.

### **When kittens arrive in the nursery**

- If the kittens arrive in a pet carrier, sanitize the carrier and place it in the storage room—do not put a carrier in the storage room until it has been sanitized.
- Sanitize the pet carrier by first scrubbing with 409 cleanser (the only cleanser approved for use in the nursery), then spray completely with either diluted bleach or disinfectant (currently, the nursery uses Trifectant) and allow to soak for 10 minutes. Wipe clean thoroughly. Wear gloves when sanitizing carriers.
- Dispose of any bedding that came with the kittens as soon as they are taken out of the carrier. We do not know what it may have been exposed to and it is not to be mixed with any nursery laundry. Do not leave used bedding out in the nursery.
- Small bottle babies that arrive in clean cardboard carriers are left in the carrier with clean bedding and a heat source, and the carrier is then placed in a crate. If the cardboard carrier is soiled, dispose of it. Dispose of any bedding that came with the kittens and give them clean nursery bedding. Small kittens are kept in the carrier as a precaution—they can crawl away from their heat source if they are in too large of a space or can slip through the bars on the crate door.
- If older kittens arrive in a cardboard carrier, break it down and dispose of it in the recycle bin; if it is soiled, dispose with the trash. Do not leave these carriers sitting out in the nursery—they may carry contagion that can spread to the kittens.
- If the kittens are older, they can be placed in the crate without the extra precaution of a carrier. Place a heated snuggle disc and clean bedding with them. Larger crates may need additional heat sources; ask if you're uncertain.
- If the kittens are at least 4-weeks old and are either eating on their own or are ready to transition to gruel, place a litter box and some food in the crate with them. Please see Section 5 for feeding instructions. They may also want toys.

### **Paperwork and recordkeeping**

- Put the litter's file, and anything else that belongs to the litter (smock, lap pad, etc.), in the chart holder that accompanies the crate.
- Start a file for each litter. Start a Daily Care Sheet for each kitten in the litter, making sure to write the A# on the chart.
- The Nursery Manager will attach a med chart to the file when necessary.
- Add the litter to the Feeder Board.
- Identify each kitten. If two kittens look alike, put a colored Sharpie dot in one of its ears. Be sure to note this on the kitten's chart.
- Weigh each kitten and record the weight.
- Feed the kittens as soon as possible; they probably have not eaten in a while. See either Section 3 or Section 5 for feeding and care instructions.
- Update the Feeder Board.
- Accurate and timely recordkeeping is essential. Follow all recordkeeping steps, even if they seem redundant.

## 5. KEEPING KITTENS WARM

A kitten's body temperature ranges from about 102°–104°F. Kittens under three weeks of age cannot regulate their own body temperatures—they have littermates and a mother to help them. It is crucial to keep the kittens' crates warm, dry, and draft-free. If a kitten feels cool or cold, warm it immediately; never try to warm a kitten with your own body heat, as your body temperature is lower than that of a kitten and the kitten's body temperature could continue to fall. If its body temperature falls too low, a kitten can fade and may not survive.

- Place a heated snuggle disc in a snuggle cover, or cover it with a single layer of towel or blanket in the kittens' crate. Do not place the warmed disc directly on the metal crate—the metal will quickly draw the heat out of the disc.
- Snuggle discs are heated for 4–5 minutes in the microwave, based on microwave wattage, and will stay warm for hours. Heat them only when they are cool, as too much heating can deteriorate them.
- Snuggle discs should be freshly heated at each feeding.
- If a snuggle disc is not available, use a heating pad on a low setting. Be certain it is not a type of thermostat that automatically shuts off, or the kittens will lose their heat source.
- Be sure the crate is not in a draft and that air vents or fans are not blowing on the kittens. Cover the front of the crate with a cloth if necessary.
- There should be a small space in the crate where the kittens can go if they get too hot; the back of the crate is probably best. Take care, however, that the kittens cannot get too far away and that nothing obstructs their path to the heat.
- Check the bedding at each feeding to be sure it is dry; change if it is wet. or damp bedding can chill the kittens despite the heat source in the crate.
- If kittens are soiled, clean them gently, taking care to dry them with a towel thoroughly before returning them to their crate.
- If a kitten feels cold, determine if it is fading. If so, immediately begin the fading kitten protocol; see Section 8.
- If a kitten feels cold but is determined not to be fading, warm it immediately by wrapping the kitten in a towel, and then place the towel in a bin with a heating pad set on low.
- Never place a kitten directly on an uncovered snuggle disc or heating pad.
- If a kitten becomes chilled during feeding, warm it before continuing. Kittens might stop eating if they are cold.
- Food should be warm so that the kitten does not become chilled.

**Your body heat is lower than the kitten's, so never try to warm a kitten with your own body heat—it will not work, and the kitten's body temperature will plummet.**

## Alternative Heat Sources

### Rice socks

A sock filled with rice that is warmed in the microwave can be used to keep babies warm, but it will only stay warm for up to an hour. Rice socks can easily get overheated and must be checked carefully before they are placed in a carrier so they do not burn the kittens.

- **This is not an approved means of keeping kittens warm in the nursery;** this heat source is used only during transport or other temporary situations.
- Once a rice sock is used, throw it away, as it cannot be effectively sanitized.
- Rice socks are kept in the nursery so that fosters will have something to take with them when they pick up kittens.

### Heating pads

- There are heating pads in the nursery to be used for fading kittens, when a snuggle disc is not available, or when an additional heat source is needed.
- Heating pads are not preferred for use in crates. If a heating pad is being used in a crate, make sure it is not one with an automatic shut-off thermostat; these heating pads will turn off and the kittens can suffer a serious loss of body temperature, which can lead to fading.
- After using a heating pad, always sanitize it and return it to its proper place after use—**do not leave used, unsanitized heating pads out in the nursery.**

**Note:** Snuggle discs and heating pads are the property of the nursery and should never be taken out of the nursery by volunteers, staff, or fosters. If someone comes to the nursery and asks to borrow one, politely refuse and refer the person to nursery management.

If someone needs to keep kittens warm during transport, they can take a rice sock (which does not need to be returned to the nursery) if there is one available. Once they get home, fosters must provide their own heat sources for the kittens in their care.

## 6. BOTTLE BABIES

Orphan kittens need to be bottle-fed until they are ready to be weaned and can eat on their own. It is imperative that all kittens are consuming enough food at each feeding to insure proper nutrition, hydration, and weight gain. Ideally, kittens are fed every 2–3 hours; they can make it about four hours overnight as long as they have been eating regularly throughout the day and have been gaining weight steadily. The only milk that is approved for use in the APA! nursery is Kitten Milk Replacement (KMR). We use a powder KMR mix that we make as needed. Open bags of KMR should be kept in the refrigerator before and after mixing.

Cow's milk and other types of milk replacements are not nutritious enough for our kittens and their use can lead to slow starvation or other detriment to the kittens. They also cause diarrhea, which is extremely dangerous for young kittens. Once a certain type of milk has been started for a group of kittens, it must be continued until they are weaned. Changing formula brands can cause major GI illness.

### Mixing KMR

- KMR is mixed in graduating ratios of water to KMR to ease the kitten's transition from its mother to bottle-feeding. This is done to prevent diarrhea, which commonly occurs whenever there is a change to a kitten's diet.
  - First four feedings are at a ratio of 8:1, water to KMR.
  - Second four feedings are at a ratio of 4:1, water to KMR.
  - Remaining feedings are at a ratio of 2:1, water to KMR.
- KMR clumps badly and clumps can clog a bottle's nipple and prevent the kitten from getting its food. Mix the KMR thoroughly with warm water; strain if necessary. If you strain the KMR, be sure to break up the clumps and stir the powder back into the KMR mixture so the nutritional value is not depleted.
- After mixing, store KMR in a covered container in the refrigerator. Label the container with the ratio of water to KMR and the date and time it was mixed. Try not to mix more KMR than can be used in a day's time; it will spoil and should be thrown out after 48 hours.
- Do not leave mixed KMR out while feeding, as bacteria can grow quickly. Put it back in the refrigerator after you have filled the bottles
- Use only clean, sanitized bottles and nipples. Label all bottles with the litter number, the ratio of KMR, and the date and time the KMR was made, **not** the date and time you are filling the bottle.
- Do not refill a bottle with KMR that was mixed on a different day/time. If there are no clean bottles, thoroughly rinse the bottle and nipple before re-using it for the same litter. Remember to put a new label on the bottle—do not write over an old one.

### Bottle-feeding techniques

Kitten positioning for feeding is very important; this is where the crucial surrogate-mom bonding happens. Different people have different "styles" of bottle-feeding. Kittens are most comfortable in a position similar to the position they'd be in if they were nursing from their mother. One option is simply to place the kitten on its stomach on a towel or cloth that it can cling to. Always use a lap pad or towel for the kitten to lie on while feeding—the kitten should never come into contact with the surface of the table or the skin or clothing of the feeder.

- Open the kitten's mouth gently with the tip of your finger and slip in the nipple in. Once your kitten gets the hang of it, it will search out the nipple.

- To keep air from getting into the kitten's stomach, hold the bottle at a 45-degree angle and keep a light pull on the bottle.
- The kitten should be allowed to suckle at its own pace.
- If a kitten refuses to take the nipple or won't suckle, try rubbing its forehead or stroking its back; this replicates a mother cat's cleaning and can effectively stimulate the kitten to nurse.
- Use the correct nipple. The long, thin nipples are for young kittens up to 6–7 days old; the short, round nipples are for kittens over 6 days old. As a general rule, if the kitten's eyes are still closed, it can use the long nipple; if the kitten's eyes are open, it should use the short.
- If milk comes out of a kitten's nose, it is aspirating. Kittens are pretty good at clearing milk from their lungs on their own. Set the kitten down and allow it to begin breathing normally, which should take a few seconds. Note any aspirating incidents on the kitten's daily care chart and alert the Nursery Manager or Assistant Manager so it can be placed on antibiotics immediately.
- When a kitten has had enough formula, it will usually unlatch from the nipple on its own and its tummy will be very rounded, almost pear-shaped.

When you are ready to feed your kitten, remember:

**Sanitize – Weigh – Feed – Weigh –Sanitize**

#### **Bottle-feeding kittens and bottle care**

- Identify the litter that needs to be fed. Update the Feeder Board with the time you start to feed the litter, not after feeding, making sure to use the correct color pen for that day.
  - Bottle babies are fed every 2–3 hours, and gruel kittens are fed every 4–5 hours. Prioritize feeding according to the times litters were last fed.
  - The 6am feeders will always start with bottle babies, feeding the smallest and most critical first and then moving to the oldest and independent eaters.
  - Never skip gruel kittens or moms with litters in favor of bottle babies; kittens should be fed according to when they were last fed.
- Feed only one litter at a time.
- Get the litter's feeding chart out of the file.
- There should be a bottle in the refrigerator for the litter you are about to feed. If not, fill one with the correct ratio of mixed KMR, making sure to label it correctly.
- Fill the bottle about 1/2–2/3 full. Label the bottle with the litter number, the ratio of water to KMR, and the date and time the KMR was made—**not** the date/time you are filling it.
- Return the KMR to the refrigerator. It should never be left out, as bacteria can grow.
- With the cap and nipple **off**, heat the bottle in the microwave. Start at around 12 seconds and then check the temperature on the underside of your wrist. If it is too hot, you can add cold KMR. If it isn't hot enough, heat until it is. Attach the nipple.
- Make sure you have a sanitized scale. See Section 10 for sanitizing instructions.
- Wash your hands between litters.
- If there is a smock in the litter's bin, wear that; if not, get a clean one to wear while feeding. Use a towel or clean puppy pad while feeding kittens—they should not come into contact with the table surface or the feeder's skin or clothing.
- Weigh the kitten and write down the weight. Do not "remember" the weight to record after feeding—it is too easy to forget the correct weight.
- Wrap bottle babies in a towel or blanket to create a "burrito." This helps to control the kitten's movements and also helps to keep the kitten warm while feeding.
- Offer the nipple to the kitten. Once it latches on, let it eat as much as it wants.

- Weigh the kitten. The kitten must consume a minimum of 5g per 100g of its body weight. Once the kitten is fed, record its weight and update the Daily Care Sheet.
- If the kitten is sated and has consumed an adequate amount of food, stop feeding. Overfeeding can lead to vomiting, diarrhea, and other problems.
- If the kitten did not eat enough on its own, supplement with syringe feeding.
- Stimulate the kitten (see below).
- Return the bottle baby to its crate, making sure its face and body are clean.
- Refill the bottle for the next feeder and return it to the refrigerator.
- When a bottle needs to be washed, empty any remaining KMR into the sink and rinse the bottle and nipple. Remove the nipple from the cap and soak the bottle, nipple, and cap in bleach water.
- Remove all tape from the bottle (it can come off in the dishwasher and cause clogs).
- When hand-washing, use a small brush to clean the bottle and nipple.

Some kittens will not take easily to bottle-feeding. When they are with their mother and littermates, kittens rely on scent and instinct to guide them to proper feeding. Always try to let the kitten eat on its own from a bottle first; if a kitten is not eating a sufficient amount on its own, or is not eating at all, then it must be supplemented with syringe feeding.

### **Syringe-feeding and syringe care**

- Weigh the kitten so that you know how much it needs to consume.
- Fill a clean 1cc syringe with warmed KMR.
- Push a few drops into the kitten's mouth. Wait for the kitten to swallow, and then repeat this until the kitten has consumed a sufficient amount.
- Kittens should consume a minimum of 5g per 100g of body weight. Consult posted charts for help with calculations.
- Be sure to gently clean any KMR off the kitten's fur and face. Dried KMR can cause sores and hair loss.
- When finished syringe-feeding, remove the plunger from the syringe and place both pieces in a dishpan to soak.'

It can seem like you are giving a kitten a lot of KMR, but the kitten may not be swallowing much of what you are feeding it. Be patient—syringe-feeding can take a while. The only accurate way to determine if a kitten is eating enough is to weigh the kitten, then feed it, then weigh it. Always weigh, feed, weigh.

### **Stimulation for urination and defecation**

By nature, mother cats lick the "back end" of their babies to stimulate the bowels and bladder on a regular basis.

- After each feeding, gently rub the kitten's genitalia and rectum with a baby wipe (alcohol-free, dye-free, fragrance-free) or a cotton ball or cotton pad (can dampen with warm water), using a front-to-back motion and very gentle pressure.
- Once the kitten has finished eliminating, stop rubbing. Overstimulation will irritate the area—watch for chafing.
- Kittens will almost always urinate during stimulation. They should defecate about once every 1–2 days.
- Make note of diarrhea if the kitten is not already being treated for it.
- Record the kitten's elimination on its Daily Care Sheet, noting anything abnormal.

Look at the kitten's urine and feces and make sure they look normal. Note any abnormalities on the kitten's chart and on the Feeder Board. Possible abnormalities include:

- Blood in the urine or feces
- Dark yellow or brownish yellow

- If the kitten has not defecated for 2–3 days and its belly is bloated

Once kittens begin transitioning to solid food and independent eating, they no longer require stimulating.

### **Tube-feeding**

If a kitten is sick, it can become too weak to eat on its own or may not be able to swallow. When this happens, the kitten can become malnourished and fade quickly. The kitten must be tube-fed to rebuild its strength and keep it nourished and hydrated. The decision to tube-feed is not made lightly. Tube-feeding can cause damage to the kitten's esophagus and stomach lining, and if the tube goes down the wrong way, the kitten's lungs can fill with fluid and the kitten can drown.

**Feeders are not authorized to tube-feed kittens. The Nursery Manager, Assistant Manager, or other authorized personnel will do all tube-feeding—no exceptions!** It is the feeder's responsibility to see that the kitten gets fed, however, and if a feeder encounters a kitten that needs to be tube-fed, the feeder should let the Nursery Manager know. The Nursery Manager may want the feeder to try syringe-feeding the kitten first and will let the feeder know what to do.

- If no one is available to tube-feed a kitten outside of business hours, contact the Nursery Manager and/or the Assistant Manager.
- Be sure to update the kitten's Daily Care Sheet when it is tube-fed.
- If an authorized person is not available to tube-feed a kitten, try to syringe-feed the kitten as much as possible. Be sure to update the kitten's Daily Care Sheet.
- Bottle babies must be stimulated after tube-feeding just as after bottle-feeding.
- Kittens requiring tube-feeding may need to eat smaller amounts more frequently.

### **Suckling**

It is natural for kittens to suckle on each other or on your fingers, even after they're finished eating. This is harmless unless you notice that this activity is causing irritation to other kittens' fur or skin. It is a good idea to check each kitten's genitals to ensure that the suckling activity is not causing problems such as redness, irritation, sores, swelling, penis hanging out, etc. If any issues occur, contact nursery management right away. Excessive suckling can cause scar tissue to form over a male kitten's penis, which can ultimately require surgery to correct; it can also cause hair loss and sore spots at the site of the suckling.

### **Dehydration**

Water drives all metabolic functions in kittens (and in people), so adequate hydration is essential. When a kitten is not getting enough water in its diet, or if it is vomiting or has diarrhea or another illness, it can become seriously dehydrated. Just as with people, proper hydration levels are critical to a kitten's good health.

- If you believe a kitten is dehydrated, alert nursery management.
- If a kitten is dehydrated, nursery management will administer subcutaneous fluids. Feeders are not authorized to administer subcutaneous fluids.

Feeders should not give kittens Pedialyte unless it is approved by the Nursery Manager. Pedialyte given orally to a kitten won't cause any harm, but it offers no real benefit to a truly dehydrated kitten. Pedialyte can be mixed with the kitten's KMR to add electrolytes back to the kitten's system, but is not usually necessary. Pedialyte should be thrown out if it is not used within three days. Pedialyte should be labeled with the date it is opened.

## 7. GRUEL BABIES

Gruel babies are kittens that have outgrown the bottle. At about 3½ weeks, a kitten's teeth will begin to break through the skin. Around this time, kittens may begin to bite the nipple, may seem hungry yet not want to suckle, and will have a greatly increased appetite. This usually means they are ready to be weaned and begin eating on their own. In the nursery, we want to wean the kittens as soon as they are ready, because gruel babies typically take less of our time to care for than bottle babies and they are easier to find fosters for.

When the kittens' teeth are fully developed, nursery management will make the decision for the litter to transition from the bottle to solid food. Place kittens in a bin with a shallow saucer—not a bowl—of warmed gruel and let them “discover” it. Some will take to it right away, others not so much, but they will be curious. If this is their first time to experience gruel, they are not going to know what to do with it, so be patient and allow them to get used to it. If they do not take to it right away, go ahead and syringe-feed them. At this point, put a litter box in their crate to let them start eliminating on their own. Put a small dish of gruel, a small dish of kibble, and small bowl of water in the crate with them so they can begin to eat on their own.

### **Making gruel**

- Gruel is made with canned food and water mixed together until it reaches an applesauce-like consistency; this ensures the kittens are getting enough water in their diets while giving them proper nutrition. If gruel is too watery, it will not have enough nutrition. Usually, the correct ratio is two cans of food to one can of water. Always make gruel according to directions posted in the feeding area.
- Gruel that is to be used for syringe-feeding can be blended in a blender; the ratio of food to water is the same.
- Always store gruel in a covered container in the refrigerator. Do not leave gruel out in the work area after filling bowls or plates, as bacteria can grow.
- The nursery uses donated canned cat/kitten food and Royal Canin Baby Cat kibble. These are the only approved kitten foods to be used. When other brands are used, they should be slowly mixed in with the nursery brand to get the kittens used to it and to prevent diarrhea.
- Be sure to alert nursery management if you notice the nursery is low on food.
- Changing the brand or type of food you are feeding a kitten can temporarily cause diarrhea.
- Fill a dish that is the appropriate size for the litter about 1/2–2/3 with gruel—do not overfill. Warm the gruel in the microwave; check for the correct temperature by stirring it a bit with your finger. Gruel can get hot spots in the microwave that can burn the kittens' mouths, so be sure to check it properly before giving it to the kittens.

### **Teach the kittens about gruel**

- Weaned kittens need to be fed every 4–5 hours to ensure their blood sugar stays up. They can go 6–8 hours overnight, but not during the day.
- Identify the litter needing to be fed and update the Feeder Board.
- Feed only one litter at a time. Clean a bin to put the kittens in while they eat the gruel.
- Change smocks between litters.
- Weigh the kittens as you place them in the bin, recording the weights on their Daily Care Sheets.
- Place some gruel and kibble in the bin with the litter.
- The kittens may bite the edge of the plate or walk in the food. Sometimes it takes several meals before they catch on. If a kitten doesn't seem interested in the gruel at

all, try gently opening the kitten's mouth and rubbing a little of the food on its tongue or teeth. Be patient; the weaning process takes time.

- If necessary, place a cover on top of the bin so the kittens cannot climb out. While they are eating, you can clean their crate.
- If the kittens have toys in their crate, you can put those in the bin with them while you clean.
- Clean the crate, making sure to wipe off all feces and food particles with 409. Follow cleaning with a thorough wiping of disinfectant or diluted bleach.
- Clean the litter box; if it is soiled through, dispose of it and replace with a clean box and clean litter. Use paper towels, paper cups, or other disposable material to take feces out of the litter box. Litter scoops are not used in the nursery.
- Kittens should only be given non-clumping litter at this stage of development. Kittens are very curious and will consume bits of litter, which will expand in their stomachs. Litter dust can also coat kittens' lungs.
- Clumping litter can be introduced after six weeks of age.
- Check the bedding in the crate; if it is wet or soiled, replace it with clean bedding.
- Reheat the snuggle disc, making sure to sanitize the disc before warming it.
- If the kittens have been gaining weight regularly and are eating, you can weigh them and put them back in their clean crate.
- Check to see if kittens are eating on their own. If the kittens are losing weight or are not eating enough by themselves, supplement them with syringe-feeding and return them to their crate after they have consumed the appropriate amount.
- Place gruel and kibble in the crate, along with a small bowl of water. Bowls should not be overfilled and should be an appropriate size for the litter.
- Update the Daily Care Sheets.
- Clean and sanitize the bin and put it back where it belongs so it can be used again.
- Sanitize the food preparation area, change your smock, and wash your hands before moving on to the next litter.

### **Feeding baby food to kittens**

Human baby food is sometimes fed to weaned kittens when they are learning to eat on their own, or if they are not eating due to illness. This is only done to entice the kitten to eat on its own. Baby food should not be used on a regular basis; it does not give the kitten sufficient nutrition or calories for proper health and weight gain. Almost all kittens like baby food, but it should only be used to help the kitten eat the right food by itself. Baby food should not be used because it is easier or more convenient for the feeder.

- When feeding with baby food, use only pure meat with no additives, such as garlic or onion. Chicken or turkey is preferred, though beef can be used; do not use pork.
- Once opened, baby food must be kept covered and refrigerated. Label open jars with the date and time they were opened. If spoons or other utensils that were used for a particular litter touched the baby food, identify those with the litter number.
- There are no preservatives in baby food. Baby food should be disposed of if it is not used within two days.
- Baby food does not last as long as cat food when it is left out. If you are putting baby food in the crate with a litter, be sure it is disposed of within a few hours; otherwise it can spoil or bacteria can begin to grow.

### **Dehydration**

Water drives all metabolic functions in kittens (and in people), so adequate hydration is essential. When a kitten is not getting enough water in its diet, or if it is vomiting or has diarrhea or another illness, it can become seriously dehydrated. Just as with people, proper hydration levels are critical to a kitten's good health.

- If you believe a kitten is dehydrated, alert nursery management.

- If a kitten is dehydrated, nursery management will administer subcutaneous fluids.
- Feeders should not give kittens Pedialyte unless it is approved by the Nursery Manager. Pedialyte given orally to a kitten won't cause any harm, but it offers no real benefits. Pedialyte can be mixed with the kitten's gruel to add electrolytes back to the kitten's system, but is not usually necessary. Pedialyte should be thrown out if it is not used within three days.

### **Suckling**

It is natural for kittens to suckle on each other or on your fingers, even after they're finished eating. This is harmless unless you notice that this activity is causing irritation to other kittens' fur or skin. It is a good idea to check each kitten's genitals to ensure that the suckling activity is not causing problems such as redness, irritation, sores, swelling, penis hanging out, etc. If any issues occur, contact nursery management right away. Excessive suckling can cause scar tissue to form over a male kitten's penis, which can ultimately require surgery to correct; it can also cause hair loss and sore spots at the site of the suckling.

**Kittens are never allowed to roam freely in the nursery.  
Be sure they are secure at all times.**

## 8. PREGNANT & NURSING CATS

Since pregnant and nursing cats with litters can require a great deal of care and attention, they are part of the Neonatal Program. Most pregnant and nursing cats go to foster and never come to the nursery, but we do occasionally house them here. Usually, a mother cat can take care of herself and her babies. When moms are sick or not lactating, they can require as much attention as our tiny bottle babies. When a nursing cat is not lactating, it is more difficult to find a foster for her and her litter because of the time demands on the foster. When a mother cat does not have milk or does not produce enough milk to feed her litter sufficiently, nursery feeders will bottle-feed the kittens and mom will do the rest of the work—she will love and comfort her babies, she will keep them warm, she will groom them, and she will stimulate them. When kittens are able to remain with their mother, they develop much better and are much happier.

### **If mom is not lactating**

- Some mother cats may be a little nervous when someone takes their babies away, but they usually get used to nursery activity quickly and are happy for the attention. Be gentle when approaching a mother's babies.
- If a mother cat is feral or has shown signs of aggression or extreme nervousness, this should be noted on the Feeder Board and on her crate. If you are unsure how to approach kittens with a feral mother, check with nursery management.
- Litters with a mom are cared for according to the age of the kittens.
- Update the kittens' Daily Care Sheets and update the Feeder Board.

### **If mom is lactating**

- Some mother cats may be lactating but are not making enough milk, so we must monitor their kittens for proper growth and development. Litters are cared for according to the age of the kittens when necessary.
- If the kittens are not gaining weight appropriately, supplement bottle babies with a bottle or syringe; supplement gruel babies with food in their crate or with a syringe. Update the kittens' Daily Care Sheets.

### **Always:**

- Clean the litter box and refill as needed with non-clumping litter.
- Clean the interior of the crate and replace any soiled or wet bedding. Be sure to completely clean any feces or food matter according to protocol.
- After feeding the kittens, give mom fresh food and water. If the mother cat is not eating, alert nursery management.
- Do not overfill food bowls for the mother cat; only feed as much as she will eat until the next feeding. Otherwise, the food will dry out and will have to be thrown away.
- If the kittens are not eating solid food yet, there is no need to place extra food in the crate for them; wait until they are transitioning to solid food. Otherwise, the food may not be eaten and it will have to be thrown away.

## 9. RINGWORMS, FLEAS, AND PARASITES

### Ringworm

Ringworm is a fungal infection affecting the skin, hair, and occasionally nails of animals and people. It is in the same family as athlete's foot and is not a life-threatening condition at all; in fact, it does not affect the health or well-being of animals or people. Three species of ringworm fungus most commonly affect cats and dogs. The species that affect cats and dogs can be passed between these two species, as well as passed to humans. Ringworm in an individual cat is a nuisance, but ringworm in an animal shelter can lead to almost unmanageable outbreaks, thousands of dollars in diagnostic and medical costs, spreading among adopters and staff, and an intolerable blow to shelter status in the community. It is vital to have a consistent and effective strategy in place to prevent and manage this problem.

When kittens in the nursery have ringworm, it should be noted on their crate and on the Feeder Board so that feeders know to take extra precautions. Feeders can get ringworm from nursery cats and can also pass it to their pets at home. If the following established procedures are followed, however, the risk of doing so is minimized.

#### **Risk factors**

- Animals of any age are susceptible to ringworm, but animals less than one year old and geriatric animals have the highest risk. Cats have a greater risk than dogs.
- Animals with compromised immune systems and conditions such as FIV, FeLV, pregnancy and lactation, malnutrition, cancer, and stress, or those on anti-inflammatory drugs, can have a higher risk.
- Animals with preexisting conditions that compromise grooming, and those with external parasites such as fleas, are at an increased risk.

#### **How is ringworm spread?**

Ringworm is most often spread through contact with an infected animal or a contaminated environment and therefore can be a serious problem in a shelter. Ringworm is very durable in the environment, and if left untreated, it can persist for months in carriers, furniture, carpets, dust, and so on; it can also infect animals housed in a contaminated environment. Ringworm can be spread readily through grooming implements, contaminated toys and bedding, or by humans' clothing and hands. It can be found on the hair of animals from a contaminated environment even when the animal itself is not showing any symptoms. In nature, the incubation period for ringworm is between 4 days and 4 weeks. Close contact with the infected animal or its bedding is usually required for transmission.

#### **Signs and treatment**

- Irregularly shaped areas of fur loss; the skin in these areas can appear rough and scaly, and the bald patch is often round
- Full-body dipping or spot treatment with a lyme sulfur dip is effective, but it takes time to eradicate the fungus
- When dipping kittens, make sure that they do not get chilled
- Kittens under the age of six weeks should not be dipped
- Medication is sometimes used but not on very young cats, as it has a very damaging effect on the liver

#### **Sanitation**

- If a litter has ringworm, put a note on the crate and on the Feeder Board.

- Use diluted bleach mixed at a ratio of 1:10, bleach to water, on any surface that you or the infected cats touch—bin, scale, table, pen, microwave, snuggle disc, refrigerator, your arms, etc. Leave it on for 10 minutes and then wipe with paper towels before moving to the next litter.
- Gloves may be worn with the understanding that they do not prevent the spread of ringworm. Gloves must be provided by anyone choosing to wear them; the nursery does not provide them since their use is not part of our protocol.

## Fleas

Fleas are bloodsucking parasites and, as with ringworm, a flea infestation is a nuisance in a single animal but can be devastating in a shelter. On a mature cat, fleas are not particularly serious, but young kittens do not have that much blood and they are virtually defenseless; they do not groom themselves yet, so they are not scratching. Young kittens can easily get anemia from a flea infestation, which can be life-threatening.

- Flea treatments that are meant for older cats can kill a kitten, so if you find fleas or flea dirt on kittens of any age, alert nursery management so the correct treatment can be administered.
- Over-the-counter flea treatments are not used in the nursery because they are not effective and are much more toxic than what our veterinarians use.

## Ticks

We rarely see ticks on our kittens or mother cats. If you think you see ticks, alert nursery management for further evaluation and treatment.

## Ear Mites

Ear mites are tiny parasites that live in the ear canal. If you see a dark brown discharge (which can look like dirt or coffee grounds) in a kitten's ears, it is probably ear mites.

- If you see dirt in a kitten's ears, alert nursery management so it can be evaluated and treated.
- Do not clean a kitten's ears without first checking with nursery management. A kitten's ear canal can easily be damaged by the improper use of cotton swabs.
- Ear mites can be passed from one kitten to another, and transmission usually requires direct contact.

## Roundworms, Tapeworms, and Hookworms

Worms affect a cat's digestive system and are very common in kittens. You can sometimes see worms in or around a kitten's rectum; you may see a long worm or what looks like rice protruding from its anus. Indications of worms are a large belly, diarrhea, and an inability to gain weight even when eating well. If you see signs of worms, alert nursery management. There are various medications given to the kitten, depending on the type of worm, that easily take care of the problem. Worms can be passed through the feces to other animals.

## Coccidia and Giardia

Coccidia and Giardia are very common. They are protozoa that invade a kitten's digestive system and cause diarrhea. These are highly transmissible and can be spread through feces. These parasites are easily treated with oral medications.

Parasites can cause digestive problems as well as diarrhea for the kitten. Diarrhea can be dangerous for a kitten and should be treated as soon as it shows up. Not all diarrhea is related to illness or infection—sometimes it can be a result of a change in diet—but all diarrhea should be reported to the Nursery Manager for evaluation.

## 10. HEALTH & MEDICAL

Neonates do not have fully developed immune systems and are susceptible to many illnesses and parasites, some of which they get from their mother at birth. Kittens need proper care and attention to ensure they grow up happy and healthy.

**Alert the Nursery Manager or Assistant Manager if you notice any of the following symptoms:**

- Aspiration (milk coming out of nose during feeding)
- Sneezing
- Coughing
- Eye and/or nasal discharge
- Wheezing; difficulty breathing
- Diarrhea
- Vomiting
- Straining to urinate or defecate
- Bleeding from any part of the body
- Abnormal twitches
- Walking in circles; walking into things
- Loss or decrease of appetite
- Steadily losing weight
- Change in attitude or behavior
- Lethargic or depressed
- Head slumped in food or water bowl
- Any unusual behavior

### Common Health Issues in the Neonatal Ward

#### **Upper Respiratory Infection (URI)**

The term “upper respiratory infection” is used to refer to any illness that affects a cat’s upper respiratory system; it is basically a kitty cold. URIs are common in shelter cats. Common symptoms include sneezing, runny nose and/or eyes, fever, and loss of appetite. URIs are treated with antibiotics. If kittens are having difficulty breathing, they may also need to be nebulized. Be certain to keep kittens warm until they have recovered from a URI. URIs are very contagious to other cats and kittens through direct contact and can also be airborne. Feeders should be especially diligent about sanitation protocols when tending to sick kittens and should wash their hands after handling kittens with URIs.

#### **FeLV and FIV**

Feline leukemia virus (FeLV) suppresses the immune system and can cause cancer or other serious illnesses in susceptible cats. FeLV is fatal and the life expectancy of a mature, infected cat is 2–4 years; most FeLV+ kittens do not survive to maturity. FeLV is transmitted through saliva and nasal secretions, as well as through urine, feces, and milk from infected cats. The virus can also be transferred through a bite wound, mutual grooming, shared use of litter boxes and feeding dishes, sexual contact, and from a mother cat to her kittens while in utero or during birth. FeLV+ cats and kittens are not housed in the Neonatal Ward. Young kittens testing positive for FeLV are tested again when they are a little older to confirm the results of the first test, which commonly gives a false positive as antibodies from the mother can be detected in the kitten. FeLV does not survive long outside of the cat’s body, probably less than a few hours, so carefully adhering to established protocols should limit the possibility of transmission.

Feline Immunodeficiency Virus (FIV) is a virus that can cause a multitude of health problems in cats due to reduced immune system function; it is also known as feline AIDS. FIV is contagious, but only to other cats—people cannot get AIDS from their cats. Most cats with FIV live a normal life despite the virus and can live well with other cats as long as there is no aggressive fighting. Cats living indoors in a stable social structure have little chance of passing the disease to other household cats. Transmission occurs most commonly through deep bite wounds; less commonly, it is transmitted by an infected mother cat during birth or through sexual contact. If FIV is present, it should be noted on the litter's crate and on the Feeder Board.

Mature cats and kittens six weeks and older are tested for both FeLV and FIV during intake at APA!. All kittens are tested for FeLV. Usually, if a mother cat has either of these two diseases, it is assumed the kittens will also have them, since mother cats can transmit them to their babies during birth.

FeLV and FIV+ kittens and cats are adoptable. FeLV kittens must go to FeLV fosters and can be placed in the APA! FeLV sanctuary to await adoption. FIV kittens can be placed in foster homes with other cats and kittens and in the cattery to await adoption.

### **Calicivirus**

Calicivirus, also known as "calici," is a viral infection that can occur in cats and kittens that are not vaccinated or are newly vaccinated. Calici is spread between cats through direct contact with eyes and noses, or through contact with contaminated objects that an infected cat has sneezed on or otherwise been in contact with, such as carriers, feeding dishes, and even food. Humans that have come in contact with an infected cat or kitten could potentially pass the virus through contact with other cats.

The virus can have multiple forms, the most common being an upper respiratory tract form. Other forms include the joint form, which can cause fever and swelling of the joints, and the mutant virulent form, which can cause URI signs and ulcers on the face, among other symptoms.

Due to the ease of transmission of this virus, cats and kittens with calici should be immediately quarantined in a separate area from healthy cats. Those who treat the affected cats and kittens must follow strict sanitation protocols to ensure that the virus is not spread.

### **Panleukopenia**

Panleukopenia, also known as "panleuk," is a viral infection that most commonly affects kittens and young cats. It is transmitted through direct contact with saliva, vomit, and feces. An infected mother cat can also transmit panleuk to her kittens at birth. Left untreated, it is almost always fatal. This illness can be frustrating and difficult to deal with because the virus is very durable, can survive in the environment for up to a year, and is highly transmissible. This means that other unvaccinated cats can become infected with panleukopenia simply by coming into contact with places where an infected cat has been.

Testing for panleukopenia is not routinely done during intake since the test will not show positive until the virus is shedding. The test also does not have a high accuracy rate, and if the mother cat has been vaccinated, then the kittens will test positive. Vaccinated cats and kittens will sometimes have a false positive from the Parvo test. Symptoms of panleuk include vomiting, diarrhea, loss of appetite, and lethargy. Symptoms can take 3–10 days to present once a kitten has been infected. Once kittens are suspected or confirmed of having panleuk, they are put into quarantine or placed with a specialized foster for treatment.

Due to the ease of transmission and the high number of potential fatalities from this disease, the Neonatal Program has an isolation area where panleuk kittens can be quarantined until they have completed treatment and can be confirmed as post-panleuk. There is a team of experienced feeders who are trained to work in the Parvo/Panleuk Ward with these kittens when there is not a specialized foster available. Once the infected kittens test negative for the virus and are approved to commingle with healthy cats and kittens, they can go to foster or to the cattery for adoption. Once a cat has survived panleuk, it will be immune for the rest of its life and will never be contagious again. When a nursery kitten is diagnosed with panleuk or suspected panleuk, the entire area must be decontaminated.

- To clean all crates, supplies, and everything else that was touched by or was near infected kittens, use bleach diluted with water at a ratio of 1:32, bleach to water. A stronger dilution is not more effective and can lead to skin and respiratory problems for both kittens and humans. A weaker dilution is not effective.
- First, all surfaces must be hard-scrubbed with cleanser and water. In the nursery, 409 cleanser is the only approved cleanser, as it will remove organic matter that may be infected with the virus.
- Next, all surfaces must be soaked with diluted bleach for 10 minutes. Then, all surfaces must be wiped clean again with cleanser.

This process is repeated three times. So: scrub with cleanser, soak with diluted bleach for 10 minutes, wipe with cleanser; soak with diluted bleach for 10 minutes, wipe with cleanser; soak with diluted bleach for 10 minutes. After the third soak, thoroughly wipe the area clean, spray with disinfectant, and wipe clean again.

- When scrubbing, be sure to thoroughly clean any crevices; use a toothbrush for very small or tight spaces. All organic matter must be decontaminated and removed.
- Always wear gloves and a smock when decontaminating for panleukopenia.
- If a surface or an item cannot be effectively decontaminated, dispose of it.
- Laundry must be washed with soap and a cup of bleach and should not be washed with any laundry that has not been exposed to panleuk.
- While wearing gloves and a smock, place laundry loosely in the washer; if it is packed too tightly, the laundry will not be washed and sanitized thoroughly.
- If it is determined that the laundry item cannot be effectively decontaminated, dispose of it.

**All feeders are warned that exposure to panleukopenia is always a possibility. It is critical that all sanitation protocols are followed when tending to the kittens in our care so that the possibility of transmitting disease is lessened. Feeders are strongly advised to have their personal pets vaccinated to prevent transmission of this deadly disease. The sanitation protocols established for the nursery and for the Panleuk Ward have proven quite effective, although are not guaranteed to prevent transmission. Should a feeder's personal pets contract panleukopenia, APA! is not responsible for treatment or for the cost of treatment. The panleuk vaccine is considered very effective.**

More information about panleukopenia can be found on this website:  
<http://www.veterinarypartner.com/Content.plx?P=A&S=0&C=0&A=1983>

### **Medications and medical treatments**

- Feeders are not authorized to give medications or injections.
- The Nursery Manager, Assistant Manager, or other authorized person will administer all medications and injections.
- There will be a medication chart attached to the file of any litter taking medications.

## **Nebulizing**

When kittens contract respiratory infections or any other illness that causes trouble breathing, a nebulizer is placed in their crate to administer a medicated mist they inhale, much like people using a humidifier.

- Before setting the nebulizer up for a crate, check first to be sure it has all the necessary pieces and that it works—motor, tubing to go from the motor to the fluid reservoir, and a fluid reservoir. Be sure the tubing will remain attached to both the motor and the reservoir.
- Try to plug the nebulizer in where it will not be hazardous to anyone walking in the nursery.
- Nebulizer solution is a mixture of fluid, an antibiotic and a steroid. Only use fluid from a refrigerated bag that is clearly labeled “NEB” or “NEBULIZER SOLUTION.” Do not use any fluid in the nebulizer that is not clearly marked.
- If there is no nebulizer solution in the refrigerator, ask the Nursery Manager, Assistant Manager, or Med Tech for some. Be sure new containers of neb solution are clearly marked.
- Nebulizer solution should always be refrigerated; do not leave it out.
- Fill the reservoir with nebulizer solution.
- Put a towel or blanket over the crate’s door so that the mist stays inside the crate where the kittens can breathe it. Turn on the nebulizer.
- Check the nebulizer periodically to ensure it is still working properly and that it has not run out of fluid. The fluid will run out in about 30 minutes or so.
- **Never** leave a nebulizer running unattended.
- **Never** let a nebulizer run in a crate with an empty reservoir—an empty nebulizer will continuously blow cold air on sick kittens, which can lead to hypothermia and cause the kittens to fade.
- Update the kittens’ Daily Care Sheets and the Feeder Board when kittens are nebulized.
- When the litter no longer needs to be nebulized, clean and sanitize the nebulizer and return it to its proper place.

Kittens that need to be nebulized will be easier to feed if they are nebulized first.

## **Eye infections**

Eye infections are quite common with kittens—sometimes a kitty cold can move into the kitten’s eyes, and some kittens come to the nursery with eye ailments. These are usually treated easily with medicated eye drops or ointment.

- If you notice any eye discharge and the kitten is not currently being treated for any eye issues, note this on the kitten’s chart for evaluation.
- Clean discharge matter from a kitten’s eyes with a cotton ball or piece of gauze dampened with warm water or with a diluted solution of iodine or betadine, wiping gently so as not to hurt the kitten’s delicate eye area.
- **Never** double-dip a cotton ball or gauze in the warm water or medicated solution; always use clean gauze or cotton so as not to contaminate the water or solution.
- Feeders do not treat a kitten’s eyes unless asked to do so by the Nursery Manager.

If a kitten has something more serious than simple conjunctivitis, other eye medications or treatment may be required. Shelters often see kittens whose eye infections or injuries will leave them partially or completely blind, and in some cases even require removal of the eye itself. These kittens are still highly adoptable and adjust very well to their condition.

## **Vaccinations**

Most pet owners are used to having their kittens begin vaccinations around eight weeks of age, when the immunity a kitten gets from its mother starts to wear off. Since kittens living

in a shelter do not have a mother, they have a different schedule for vaccinations so they are protected from contagions coming into the nursery.

- Kittens will be vaccinated at intake if they are four weeks of age and weigh at least one pound.
- Kittens residing in the nursery will be vaccinated once they are four weeks of age and weigh at least one pound. If one or more kitten in a litter is not ready to be vaccinated, vaccinations will be done when all kittens are ready so that the entire litter is on the same schedule.
- Kittens must have booster shots every two weeks.
- The Nursery Manager is responsible for making sure kittens receive vaccinations at the right time and will maintain vaccination records for all kittens in the Neonatal Program.

## 11. FADING KITTEN SYNDROME

Fading Kitten Syndrome is a life-threatening emergency in which a kitten, sometimes one that was previously healthy, “crashes” and begins to fade. This can occur with kittens who have a mother, as well as those who do not, so watch for mother cats pushing away a kitten and not caring for it. If not dealt with immediately, this can result in death. There is not always a clear reason for this condition. It has been linked to birth defects, environmental stress, and infectious disease. Early detection and treatment are imperative, but even with tube feeding, rehydration, and monitoring, many of these kittens will still die.

### Symptoms

- Low body temperature; the kitten feels cool or cold to the touch
- Extreme lethargy; not getting up, unable to stand, not responding when pet, can't hold its head up
- Gasping for breath; mouth breathing
- Meowing, crying out

When a kitten is fading, two things are happening: hypothermia (being too cold) and hypoglycemia (low blood sugar). You must get the kitten's body temperature up and raise its blood sugar, or it will die.

### Take immediate action

- Get the kitten warm. Immediately wrap it up in a towel like a burrito, leaving only the kitten's face exposed. Its whole body—tail, ears, and paws--should be in the towel. **Do not take the kitten out of the towel to adjust it or check on it.** Every time you take the kitten out, you will make it cold again, even if it is only for a second.
- Wrap a heating pad set on low around the towel (to avoid burns) as an extra source of heat. Secure it around the towel so it stays in place.
- The kitten's body cannot warm itself with only a towel; you have to apply extra heat. Your own body heat won't work because it is lower than what a kitten's should be.

### As soon as the kitten is warmed, you will need to work on raising its blood sugar

- Put some sugar or Karo syrup in warm water at a ratio of 1:1. Put some of this solution in a syringe and give the kitten three drops every three minutes.
- If the kitten is not swallowing, try rubbing some Karo or sugar water on its gums and tongue.
- Be sure you are administering the sugar every three minutes.
- If we have dextrose or glucose in the nursery, that can be used in place of sugar or Karo. If we have dextrose, it will be in the refrigerator.
- Whatever sugar source you use, take care not to contaminate anything by double-dipping syringes.

It may seem like you are not doing enough to help the kitten, but this is the only treatment for a fading kitten. The medical team cannot and will not do anything other than the steps above for a fading kitten. Be sure to alert the Nursery Manager and Assistant Manager that the kitten was fading and make clear notes about the episode in the kitten's chart and on the Feeder Board. If the kitten passes, follow the deceased kitten protocol and be sure to alert the Nursery Manager and/or Assistant Manager.

If the above steps are followed, we generally have success with these kittens. Keep in mind that it can sometimes take hours for them to come out of it and start acting normal again.

Know that even with love, attention, and the perfect treatment, some fading kittens still won't make it.

## 12. DECEASED KITTENS

It is never easy to lose a kitten, and it affects each person differently. Understand that we are operating against nature most of the time, and the statistics are against us. If you ask a veterinarian, he will tell you that an orphan kitten has a less than 10% chance of survival. Even against the most incredible odds—remember, most of the kittens and cats we take into our program arrive sick or injured—our survival rates have been 80% and higher since the inception of this program. We focus on the positive outcome of the work we do, but we do not pretend that we can save every kitten we rescue.

### **If a kitten passes while in your care**

- Make sure the kitten has passed. If you are not sure, check with the Nursery Manager, Assistant Manager, Med Tech, or a more experienced feeder. A very cold, hypoglycemic kitten can appear to be dead, but may not be.
- Wrap the kitten in a cloth and place it inside a Ziplock bag or other bag.
- With a **Sharpie**, write the kitten's name and A# on the outside of the bag. This is very important, as all deceased kittens must be accurately reported in APA! records and must also be reported to AAC.
- If the kitten is not properly identified, someone will have to inspect the kitten later to determine its true identity. Please be sure the kitten is correctly identified and be sure to use a **Sharpie** to write the A# and name on the bag.
- Place the kitten in the freezer.
- Remove the kitten's Daily Care Sheet from the file, write "DECEASED" on it, and put it in the nursery office.
- **If this was the only kitten in the litter**, remove its information from the Feeder Board so subsequent feeders will not be alarmed that it is missing.
- Do **not** write on the board or in the litter's file that the kitten has passed; do **not** send any messages to the group that the kitten has passed.
- Notify the Nursery Manager and/or Assistant Manager that the kitten has passed.

When you arrive for your shift and find that a kitten is gone from the nursery, please refrain from asking other feeders if the kitten has passed. This is often distressing to other feeders and is not conducive to a pleasant atmosphere in the nursery. If you are particularly interested in the fate of a kitten, ask the Nursery Manager about it directly.

## 13. BITE PROTOCOL

The following is the APA! Bite Protocol and is to be followed by all staff, volunteers, fosters, and the public:

1. Wash bite wounds with soap and water immediately.
2. Stop bleeding with pressure. If bleeding is severe, call 911.
3. Report the bite to the Nursery Manager *[email address]* or to *[Executive Director of Organization]* at *[email]* the same day the incident.
4. Did the bite break the skin?
  - a. If no, no further action is required.
  - b. If yes, is it punctured or scratched?
    - i. If scratched, keeping an eye out for redness or infection should be sufficient.
    - ii. If punctured, you will need oral antibiotics. Please see your personal physician as soon as possible to prevent sepsis, loss of function, or even death.

Bites are a very dangerous issue and must be reported to APA! management. An infected bite can cost well over \$10,000 if it is not treated immediately and can even cause loss of function. If the animal has rabies, a bite can cause death for the human, as rabies is 100% fatal.

Although APA! is not responsible for medical bills associated with bites, we can often instruct you on what to do after a bite, and we need to keep records for any bite that occurs.

If you choose not to seek medical help, APA! cannot be held liable for any consequences that result from not taking appropriate action.

## 14. SANITATION PROTOCOLS

Due to the fragile nature of our kittens, the Neonatal Program has many sanitation protocols in place to protect their health and to prevent and contain contagion. These protocols also help keep our feeders from transmitting contagion from the nursery to their personal pets, though feeders are advised to have their pets vaccinated as the possibility of transmission always exists. The Neonatal Ward operates under the supervision of the APA! clinic staff. All protocols are strictly enforced.

### Feeders

- Wash your hands at the beginning of each shift and between litters.
- Using hand sanitizer is allowed, but it is not part of nursery sanitation protocol due to its very limited effectiveness. Hand sanitizer may be used but never in place of washing hands. The nursery does not routinely provide hand sanitizer.
- If you come into direct contact with feces, urine, or vomit, wash your hands thoroughly. Scrub under your fingernails with the provided brushes and disinfectant.
- Be careful when handling kittens and anything in their crates that may be contaminated and then handling clean supplies and food.
- Change smocks between litters. One smock can be used with the same litter until it is soiled. When a smock is soiled, shake any solid matter into the trash and place it in the laundry hamper.
- If kittens have ringworm, be extra diligent about touching things. Wash your hands more frequently.
- When feeding kittens, always cover your lap with a towel or a clean puppy pad. As with smocks, towels can be used with the same litter until soiled. When a towel is soiled, shake any solid matter into the trash and place it in the laundry hamper.

### Work surfaces and feeding supplies

- 409 cleanser is the only approved cleanser for the nursery, as it will cling to and remove organic matter that other cleansers will not.
- Clean work surfaces with 409 when soiled, and then wipe down with disinfectant or diluted bleach. 409 cleans but it does not disinfect.
- Surfaces can be cleaned with Clorox wipes or with other cleaning wipes. **These are not to be used in place of disinfectant.**
- Bleach that is diluted at a 1:10 ratio, bleach to water, can be used in place of Trifectant. Diluted bleach must always be used when working with ringworm.
- All surfaces should be cleaned and disinfected between litters. This includes but is not limited to: scales, pens and markers, snuggle discs, work surfaces, and chairs.
- Once a utensil has touched the food of one litter, it should not be used to mix food for another litter. If it does, that food cannot then be shared amongst other litters. Clearly label the food for that litter and put it back in the refrigerator.
- Once a spoon or other dish has been used for one litter's food, do not use it for another litter—wipe off any solid matter in the trash, place it in the dishpan to soak, and wash before using it again.

### Carriers, cages, and collapsible crates

- Clean thoroughly with 409 cleanser.
- Spray completely with diluted bleach; let soak for 10–15 minutes, then wipe clean.
- Spray with disinfectant, wipe clean, and put away in storage room.
- Empty carriers and cages should not be left out in the nursery; always sanitize and put them away to prevent the possible spread of contagion.

**Nursery areas**

- When cleaning supplies are needed, check the storage room. If we are out of something, inform the Assistant Manager.
- Like other supplies in the nursery, cleaning supplies are not shared between rooms. Do not take brooms, mops, cleaners, disinfectants, or any other supplies from one room to another.
- If litter or food spills on the floor, sweep and/or mop until sufficiently clean.
- If liquid spills on the floor, clean it up right away to prevent injuries, as well as to keep the area clean.
- Put any trash that is recyclable in the recycle container.
- Keep trash emptied so we don't attract flies and so we can keep bad odors contained as much as possible.
- When trash cans are full, remove the full trash bag and replace it with a clean one. Take trash outside to the dumpster at the end of your shift.
- When the recycling containers are full, remove the full bag and replace it with a clean one. Take recyclable trash outside to the dumpster at the end of your shift.
- The APA! cleaning staff will take our trash out in the mornings; however, it is the duty of all feeders to take trash out as needed during the day. Do not let full trash bags sit in any area of the nursery.

## 15. DISHWASHING & LAUNDRY

### Dishwashing

- Each room has a dish bin for sanitizing dirty dishes before washing them.
- Each dish bin will be filled with bleach diluted at a ratio of 1:32, bleach to water.
- Separate syringes from plungers and bottle caps from nipples before placing them in the dish bin.
- Pour any remaining KMR out of bottles and rinse before placing them in the dish bin.
- Wipe off any gruel from dishes into the trash before placing them in the dish bin.
- Hand-wash all syringes, nipples, and bottle caps—do **not** put them in the dishwasher.
- We do not have traditional plumbing in the nursery—we have sump pumps, which require extra care. Do not wash any type of solid matter, no matter how small it is, down the sink, as this can clog the pump.
- Put away clean, dry dishes neatly where they belong so that other feeders can find them easily and quickly.

### Laundry

- Shake out all laundry into the trash before putting it into the hamper. No solid matter should be left on laundry in the hamper, as it can attract flies and spread contagion, and can also clog the washing machine filter.
- Before taking dirty laundry to the washer, check to see if the washer is available. If it is in use, do another chore.
- Shake laundry a second time over the trash before putting it into the washer.
- Put dirty laundry in a laundry bag and take it to the washer. Load the washer to capacity before starting. Items should be placed loosely in the washer and not packed in tightly. Put the laundry bag in the washer with the laundry to be washed.
- Never leave dirty laundry sitting out in the washer area.
- Put soft toys in the washer; put hard toys in the dishwasher. Hard toys can get caught in the washer and cause damage.
- Use one cup of bleach with every load of laundry.
- If rice socks are found in the laundry, throw them away—we do not reuse them.
- Always wash your hands before handling clean laundry, wet or dry.
- Always clean the lint filter in the dryer before starting.
- Fold laundry and properly store it where it belongs so others can find it easily.

**The nursery does several loads of dishes and laundry every day, which is far more than these appliances were built to do. These appliances were a gift to our team, and it is up to us to take care of them and use them correctly. The BB team does not have a budget for repairing or replacing appliances, so please be diligent about proper usage.**

## 16. STAGES OF KITTEN DEVELOPMENT

A kitten is born both deaf and blind. The kitten's ears remain in the folded position that they were in while the kitten was in the womb, and the eyes are still sealed shut. Normally, a small bit of the umbilical cord will still be attached to the midsection of the kitten. Newborn kittens are completely helpless and rely on their mother for all of their needs. In addition to nursing the kittens, the mother will also groom her kittens (this also stimulates the intestines to start functioning). Since the kittens cannot yet regulate their body temperature, they will stay close to their mother to keep them warm.

- Kittens weigh approximately 90–100g at birth and should double their birth weight in about a week.
- Within a couple days of birth, kittens will begin to hear muffled sounds.
- At about 3–5 days, the umbilical cord will dry and fall off.
- At about 7–10 days, the eyes will begin to open. Kittens are usually born with bluish eyes; they will stay blue until the kittens are about 6–7 weeks old, but true color won't settle in until the kittens are about three months old.
- If eyes seem to be pus-filled or sealed shut, alert the nursery management.
- At around two weeks old, kittens will start moving around, crawling, and standing more.
- Around 3½ weeks of age, the kitten's teeth will begin to break through the skin. The ears will also start to stand up around this time.
- Teeth should be fully in around 4 weeks of age. Once their incisors are in, kittens can eat kitten food and start using a litter box.
- Kittens will start to gain weight rapidly around 4–5 weeks. Kittens will also start to play around this time.
- By six weeks, they are beginning to regulate their body temperature.

## NEONATAL PROGRAM: 2017 GUIDELINES FOR TRAINERS

Properly caring for our neonates is an immense task. For our feeders to keep up with demand, the training we provide is an essential first step, and we have to make the best use of the limited time we have to devote to this. With your guidance and direction, our new feeders will learn the skills necessary to move into this role comfortably and effectively. This guide will ensure new feeders are consistently and thoroughly trained and will provide a meaningful experience for both the trainee and the nursery.

Before setting foot in the nursery as a feeder, trainees are invested in our team. Likewise, before trainees have contributed anything to us, we have invested a considerable amount of time and effort into qualifying and teaching them. EFs must show the trainee where everything is and carefully explain how to do each part of each task associated with feeding the kittens, all while keeping the nursery operational and observing the trainee's performance. Your excellent skills in caring for our kittens are the reason you have been invited to the training team.

Please use the following guidelines consistently with each shadow to ensure all training is uniform and comprehensive. Contact *[Managers]* any time you have questions about the training process.

**Be mindful of the example you set, both with your shadows and in front of our other feeders. You set the standard for the trainees and for your fellow volunteers.**

### The Training Process – for the Trainee

- Attend APA! general orientation, register for Volunteer Squared, and submit an APA! Volunteer Application
  - Often must wait a few weeks for orientation, as space is limited
  - Had to pay \$20 to secure a spot
  - Probably had to wait to find a parking space
- Attend 2-hour Neonatal Program class on policies and procedures
  - Probably had to be on a waitlist for training
  - Cannot miss training or be more than 15 minutes late
  - Must complete all training and begin weekly shift in 30 days or less
  - Must sign Participation Agreement before shadowing
  - A lot of information to take in—overwhelming
  - Probably had to wait to find a parking place
- Complete two full shifts (possibly three) shadowing an experienced feeder for hands-on training
  - Must select both shifts within 72 hours of introductory class
  - Cannot miss training or be more than 15 minutes late
  - Must demonstrate ability to follow all protocols and work well with others
  - May have gotten confused—TLAC or Tarrytown?
  - May have gone out of their way to take a shadow at an inconvenient time

We have a carefully developed and regimented training process. We have more trainees than we do trainers or time to train, and we need to keep the nursery on track while we are training, so **our process does not allow for any deviation**. Please keep in mind that both the process and the job itself may intimidate some trainees—it can be a delicate balancing act.

## The Training Process – for the Trainer (EF)

- You will be notified when someone has signed up to shadow you. You should **email the trainee ASAP to introduce yourself** and exchange phone numbers so the trainee knows how to reach you.
  - *Example: Welcome to the program! You will be shadowing me in the kitten nursery on this day, this date, this time (am or pm). Please send me your cell number in case we need to communicate—mine is 512-555-5555. I will be watching for you, but you can text if you get here and the door is locked. You may want to wear something old—we use diluted bleach to sanitize and clean. If you think you might be late, please be sure to call. Your training shift is a regular feeding shift for me, so if you are more than 15 minutes late, you will need to reschedule your shadow since I will have to begin feeding kittens by that time. Let me know if you have any questions in the meantime.*
- Starting this season, **you** will have a checklist to go over with the trainee at the end of the shift; they will no longer bring a handout with them. You **must** have your trainer's guide with you when you have a shadow.
- Lead the trainee through Shadow 1 or Shadow 2 according to the guidelines outlined below. Encourage questions while keeping things moving and look for "teachable moments."
- Pay attention to the time; it will take a few minutes to introduce the shadow to the nursery before you start feeding, but try to stay on track so feeding doesn't fall behind—walk and talk! It can't always be helped, but going over your 3-hour shift time is not encouraged.
- Allow a few minutes after the end-of-shift chore has been done to go over the training checklist; ask trainees if they have any questions, particularly about anything you noticed they were not quick to pick up.
- Fill out the End-of-Shadow Feedback form, scan and email it to *[bottle training email]* **in 24 hours or less**. Put the trainee's name and date in the subject line (ex: Jane S 5/20 Shadow 2) before sending.
  - As of now, there is no scanner in the nursery. We had great success with a smartphone app last season called Turboscan (that's what it is called for iPhones, may be different for Androids). There is a free version of this app and it is very easy to use—you just take a photo of the form, then "save as PDF" and send as email.
  - If you do not want to use an app, you can scan and email offsite, as long as it is **within 24 hrs**.
  - Please do not send jpgs (photos), as these files do not always travel well.
  - If you notice any conditions that may inhibit a trainee from working successfully in the nursery, be sure to note this in your feedback.
  - Any behavior that you feel is inappropriate or causes you any concern should be noted.
- For second shadows, trainers will receive feedback from the first shadow. Review it to be sure that all trainees feed bottle babies and do dishes and laundry before going solo.

We strongly discourage cancelling a shift with a scheduled shadow due to time constraints for both the trainee and the team.

- If you need to cancel or change your regularly scheduled feeding shift and you **DO NOT have a shadow scheduled:**
  - Notify *[Bottle Baby Training email]* so we can adjust the training calendar.

- Notify *[Bottle Baby Scheduler email]* as required for more or less than 24 hours' notice.
- If you need to cancel or change your regularly scheduled feeding shift and you **DO have a shadow scheduled**, please let us know as soon as possible—it is very difficult to reschedule the trainee and it disrupts their training, so we will need to find a substitute if possible.
  - Notify *[Bottle Baby Training email]* so we can adjust the training calendar.
  - Notify *[Bottle Baby Scheduler email]* as required for more or less than 24 hours' notice.
  - Do **not** plea to the general group to cover your shift if you have a shadow scheduled—not all feeders are authorized to train. If it is a last-minute cancellation, be sure to notify *[Bottle Baby Training email]* as well as *[Bottle Baby Scheduler email]* so we can take care of the shadow.

We may occasionally ask if trainers are available to schedule extra shifts to take shadows. We realize you may not have additional time to offer—if you can answer these pleas that will be greatly appreciated; if you cannot, then simply do not respond.

**\*If a shadow asks to take pictures, politely tell them taking pictures or videos in the nursery is not allowed. If they persist, explain that feeders should be focused on feeding the kittens so they don't fall behind; note this on the feedback form. You might mention that if they see others taking photos, it is because they are helping with kitten marketing and are authorized to do so. If you are authorized to take photos for the foster team, please do not do so when you have a shadow—it undermines the training process and team policies.**

**\*If a shadow asks medical questions that do not pertain to a feeder's duties or to a litter they are working with, explain that volunteers only feed the kittens and that nursery management oversees all the kittens' medical needs; the vets and clinic staff also provide medical attention. If a shadow asks for statistics about our program, questions that do not pertain to what you are teaching, or any inappropriate questions, refer them to *[Manager]* and note this on the feedback form.**

**Do not give the access code to the building to trainees.** They will be given the code once they have selected their shift and have been invited to the BB Yahoo group.

Below is a detailed list of what you need to teach your shadows. It is a long list, but you will find that routine tasks are simply broken down into small steps so that important details are not overlooked. This will help you guide your shadows with ease and to establish good habits from the beginning. Thank you for not deviating from this list. Consistency is necessary so that the training experience is effective and productive from the start.

## Shadow 1

It will take a little time to introduce the shadow to the nursery—allow for that extra time so you can stay on track.

- Smile ☺. Welcome trainee and thank them for coming. Have trainee sign in.
- Remind trainee to log hours in Vol2 from a computer or personal device. Contact Bottle Baby Support with any problems.
- Point out posted contact info and suggest that trainee put this in their phone before leaving.
- Discuss community message board—always read upon arrival.
- Point out office, overflow/intake room.
- Trainees should leave purses, jackets, etc., outside of feeding room. **No phones** while training.
- Give trainee a quick tour of the nursery. Look for “teachable moments,” and walk and talk.
- Have trainee wash hands. Demonstrate proper hand-washing (up to elbows, long enough, nail brush).
- Explain “all in—all out” system and how it helps prevent and contain contagion; remind trainee that young kittens do not have developed immune systems yet. Point out foot tubs.
- Explain how to determine which room they should feed using status boards; ask *[Managers]* where to feed but do not ask other feeders, as they will not know the status of every room.
- Ask the current feeder in the room if they need any supplies before entering the room; if no one else is feeding in the room, explain to trainees that they should ask feeders about supplies when they are present.
- Briefly go over where supplies are kept in the room where you are feeding. Clean supplies = clean hands.
- Explain the Feeder Board and how we choose who needs to be fed next.
  - Each trainee must feed bottle babies before solo feeding.
  - Explain how to prioritize. Do not skip gruel babies or pregnant/nursing cats.
- If there is another feeder in the room, ask them to take singletons so you can feed litters with your trainee.
- The trainer and the trainee will gather the supplies needed before taking kittens out of their crate.
  - Use puppy pads or blankets in bins, explaining that the plastic is cold for kittens. Make sure bin is sanitized before using.
  - Take out a couple of syringes, spoons, etc., and have them ready in case you need them while feeding a litter so that you will not have to rummage through clean supplies with contaminated hands.
- The trainer and the trainee will feed litters together.
  - If there are singletons that need to be fed and there is not another feeder in the room, supervise the trainee and let them feed the kitten. Watch the time.
- As you are feeding, let the trainee know about how long it should take to feed a kitten; try to keep up a good pace and help the trainee understand how to do so.
- Explain/show how to make KMR and/or gruel, depending on the litter you are feeding.
  - When making KMR, point out the posted KMR instructions. Explain ratios.
  - When making gruel, point out the posted gruel instructions. Be sure to tell them to never change the ratio that is posted—it is always the same whether for gruel or for syringe gruel.
- Explain Weigh, Feed, Weigh.
  - Point out the posted feeding calculations chart.

- Explain how to fill out the Daily Care Sheets. Have the trainee put their initials with yours on their charts (ex: cm/bs) so it is clear it was a trainee who fed the kitten and who they were shadowing.
- If bottle-feeding:
  - Explain that there are two different types of nipple and when to use which one.
  - Show them how to properly position a kitten for feeding; use lap or table pad.
  - Explain what to do when kittens will not suckle—syringe-feed if necessary and don't spend more than a few minutes trying to bottle-feed a recalcitrant kitten.
  - Keep kittens warm while feeding; reheat the snuggle disc.
  - Be sure to clean kitten's face and neck when finished feeding.
  - When stimulating, talk about poo-poo—what's normal and what's not.
- When syringe-feeding, show them how to hold the syringe; tell trainee not to push KMR or gruel too fast or kitten can aspirate or choke. No nipples on syringes!
- If gruel-feeding, show them the entire process:
  - As you take kittens out of the crate, weigh them and place them in a sanitized bin.
  - Put their blanket (if it is being replaced) or puppy pad in the bin along with their food and toys.
  - Clean and sanitize the crate while the kittens are eating in the bin.
  - Put clean bedding, fresh food and water, and warmed snuggle disc in crate.
  - Re-weigh kittens and syringe feed if necessary.
  - Be sure to clean kittens before putting them back in the crate.
  - Clean and sanitize bin; put it back where it belongs.
  - Gruel kittens eating independently should be cleaned and fed in about 15 minutes.
- Try to work with a ringworm litter if possible.
  - Empty crate completely, clean and sanitize with bleach water. Be sure trainee knows to use diluted bleach and not Trifectant to sanitize. Bleach should rest 10 minutes before it is wiped.
  - Put kittens in a bin with bedding, toys, and food; weigh them and clean while they eat.
  - Discuss gloves—we do not use them because they do not prevent contamination; feeders can use them but must supply their own. Must use diligence not to cross-contaminate.
  - Remind them that ringworm is harmless and common but spreads easily and is problematic.
  - If ringworm litters are present but you are not feeding them, be sure to discuss.
  - If trainee shows any hesitation about ringworm, they can discuss with *[Manager]*. This should be noted on their feedback.
- When finished feeding a litter, show trainee how to complete the Daily Care Sheet.
- Be sure the shadow sanitizes properly between litters and washes hands properly.
- Be mindful of time. Remember, the goal is for shadows to become efficient solo feeders. Coach trainees to stay focused on the task at hand and not to be distracted by all the cuteness.
- Both trainer and trainee will clean up after feeding, and the trainer should explain the uses of 409, the only approved cleanser (**cleaning**), and Trifectant and bleach water (**sanitizing**). **Clean as you go!**
- Move on to the next litter. If you can, try to do at least one bottle and one gruel litter during the shift. Both of you should be feeding the same litter. Watch the trainee and coach as needed.

- At the end of the shift, do a housekeeping chore together.
- When doing laundry, explain all the steps:
  - Shake over trash, place in hamper, shake over trash, place in washer; pack washer loosely. Add bleach to every load. Point out posted instructions.
  - Clean dryer lint screen before starting; fold dry laundry and put away neatly.
  - Always handle clean laundry with clean hands.
- When doing dishes, explain all the steps:
  - Wipe food completely from dishes before placing in bleach water.
  - Empty all KMR from bottles before placing in bleach water; rinse if necessary.
  - Separate plungers from syringes, nipples from bottle caps before placing in bleach water.
  - **Always** hand-wash small syringes, nipples, and bottle caps.
  - Rinse bottles thoroughly before washing; they can be hand-washed.
  - All dishes should be sanitized in bleach water before they're washed.
  - Clean, dry dishes should be put away neatly where they belong. Plungers should be put in syringes before they're put away.
  - Always handle clean dishes with clean hands.
- Update the status boards.
- Remind the trainee to sign out on the nursery sheet **and** on Vol2.
- Go over training checklist with the trainee; encourage questions.
- Send your end-of-shadow feedback within 24 hours. Be sure to give relevant feedback comments.

## Shadow 2

All of the above, except:

- Ask if there are any questions from the first shadow.
- Ask if they remember how to choose which room to feed in; offer guidance as needed, giving trainee a chance to make decisions. You want to see what they have learned and what they still need to know.
- Help trainees gather supplies they will need.
- Have the trainee choose which litter should be fed next and update the Feeder Board; may need to remind trainee how to use the Feeder Board and how to prioritize.
- Once the trainee starts feeding, you feed the next litter that needs to be fed. Watch your shadow to be sure they are feeding the kittens correctly. Demonstrate when necessary.
- Make sure trainees are cleaning kittens' faces and necks after feeding and that kittens and bedding are clean when they are returned to their crates.
- Encourage questions and offer advice if you see anything that needs correcting.
- Please be aware of trainee's feeding pace.
- Gently remind them that they are building their skills to be able to maintain a steady pace.
- Assure them it is normal to occasionally have some difficult kittens that will take longer, but overall a steady pace is needed to ensure the nursery does not fall behind.
- At the end of the shift, each of you will do a housekeeping chore.
- Remind the trainee what chores need to be done; if they aren't sure, they can ask someone.
- Make sure everything on the training checklist has been covered.
- Is trainee ready to feed solo?
  - If yes, give them handout with instructions to select shift and Vol2 links.
  - If not, simply thank them for coming and let them know we will be in touch about selecting a shift; note your recommendation on the feedback form and management will contact the trainee.
  - If the trainee is not comfortable feeding solo and would benefit from a third shadow, note this on the feedback form and management will arrange a third shadow.
- Be sure to note any problems you noticed—unwillingness to follow procedure, can't get the hang of bottle-feeding, handles the kittens roughly, seems very nervous—anything you think might indicate this trainee needs extra coaching or may not be a good fit for the team.
- Be sure to comment on those trainees who seem to have a special knack for kitten feeding!

## Training Checklist

- Sign-in sheet, remind trainee to log hours in Vol2
- Community bulletin board, important contact information (put in phones now)
- Where is everything?
  - Where are supplies? \*Remember to always handle with clean hands!
  - Where is the office? Intake room? Restroom?
- Prioritize litters for feeding (BBs every 2–3 hrs, G/SG every 4–5 hrs, don't skip moms)
  - Go over Feeder Board samples
  - Go over Daily Care Sheet samples
- Clean, Sanitize, Decontaminate
  - Wash hands, use nail brush
  - When to clean with 409, when to clean with wipes or other soap/cleanser
  - When to use Trifectant, when to use diluted bleach
  - Clean, sanitize between litters
  - Smocks, lap pads and table pads, gloves
  - Briefly explain decontaminating rooms
  - Always clean after yourself; always do one chore at end of shift
- Making food, other posted instructions
  - KMR ratios, labeling containers and bottles
  - Gruel or syringe gruel, labeling containers
  - Do not leave empty or nearly empty containers in refrigerator
  - How much to feed kittens, medical symptoms, FKP, Bite Protocol
- Bottle babies (feed every 2–3 hours), proper positioning
  - Which nipples to use
  - When to syringe-feed
  - Keeping kittens clean
  - Weigh, feed, weigh, stimulate
- G/SG babies (feed every 4–5 hours)
  - When to syringe-feed, when to transition to independent eating
  - Keeping kittens clean
  - Weigh, feed, weigh
  - How to clean/sanitize crate
  - Placing kibble, gruel, water, and litter box in crate
- Keeping kittens warm/heating snuggle discs
- Don't skip pregnant or nursing cats with litters—should be cared for according to age of kittens
- Chores
  - Dishes
  - Laundry
  - If those chores are not available, ask management what to do

### After final shadow:

- **Point out Nursery Org Chart, "Go-To" Chart, Contact Information, and Procedures Manual**
- **Give instructions for selecting shift**

## Neonatal Training Questionnaire

|   |   |
|---|---|
| <b>Name:</b>  |   |
| <b>Employer/Occupation:</b>   |   |
| <b>Does your employer match charitable contributions or otherwise contribute for employee volunteer hours? Opportunities with the team?</b>   | <b>Yes      No      Not sure      Other_____</b>          |
| <b>Cell phone number:</b>   |   |
| <b>Email address:</b>   |   |
| <b>Are you 18 years of age or older?</b>  | <b>Yes      No      If no, how old are you? _____</b>     |
| <b>Name of parent/guardian if under age 18:</b>   |   |
| <b>Did you log in for today's class in Vol2?</b>  | <b>Yes      No      If not, was there a problem?_____</b> |
| <b>*The APA! volunteer application must be submitted before you can train or volunteer onsite.</b>  |   |
| <b>Do you intend to shadow (all training must be completed in 30 days or less)?</b>   | <b>Yes      No      Not sure      Other_____</b>          |
| <b>If you cannot commit to one 3-hour shift per week, are you interested in other volunteer opportunities with our team?</b>  | <b>Yes      No      Not sure      Other_____</b>          |
| <b>Are you interested in fostering?</b>   | <b>Yes      No      Not sure      Other_____</b>          |
| <b>How did you hear about training with our program?</b>  |   |
| <b>Don't forget to turn in your signed Participation Agreement.<br/>Ages 16-17: Parent/guardian must also sign your agreement.<br/>You cannot train or volunteer in the nursery without a signed Participation Agreement.</b> |   |

**TRAINERS must email Questionnaires and Agreements to:  
[email address]**

**Congratulations . . .**  
**You have completed Bottle Baby training!**

The last step in becoming an “official” Bottle Baby Feeder and team member is to select your weekly shift. Email *[email address]* and let them know what day and time you would like to feed. If you are not sure what shift you want, or if you have some flexibility and would like to be placed where you are most needed, BB Scheduler will help you find a suitable time slot. Once your shift has been selected, you will be invited to the Yahoo communication group.

***Thank you—and welcome to the team!***

**Congratulations . . .**  
**You have completed Bottle Baby training!**

The last step in becoming an “official” Bottle Baby Feeder and team member is to select your weekly shift. Email *[email address]* and let them know what day and time you would like to feed. If you are not sure what shift you want, or if you have some flexibility and would like to be placed where you are most needed, BB Scheduler will help you find a suitable time slot. Once your shift has been selected, you will be invited to the Yahoo communication group.

***Thank you—and welcome to the team!***

## Common Neonatal Medications

**Upper Respiratory Infections (URI):** symptoms include sneezing, watery eyes, nasal discharge, congestion

- Doxycycline (100mg/ml). antibiotic. Used as a starting point for most URI. Dose is 0.05cc/# PO SID x 7-10 days (best if not refrigerated)
- Azithromycin (40mg/ml) (abbreviated zithro or Zithromax). Antibiotic. Used for more severe URI or if doxy did not work. Dose is most commonly 0.1cc/# PO SID x 3 days then once every third day x 3 more doses (refrigerate!).
- Baytril (injectable) broad spectrum antibiotic. Used for very severe URI with severe congestion. Also use if aspiration is severe and turns into pneumonia. Dose is 1 "hub" diluted in at least 3cc LRS fluids SID x 5 days then recheck (do not refrigerate).
- Nebulizing is used in conjunction with an antibiotic for severe URIs (refrigerate solution).

**Eye infections** (often occur with URIs)

- Gentamicin sulfate eye drops (antibiotic eye drops). One drop each eye with infection BID-TID x 3 days then extend if needed. Eyes will often need to be cleaned first with a diluted iodine solution to remove discharge (do not refrigerate).
- Canine serum- used for severely irritated/infected eyes. One drop each eye TID. Use at least one minute before antibiotic eye drops.

**Diarrhea** (know the difference between diarrhea and "normal" kitten feces—diarrhea is very runny or watery, "cow patty" or "toothpaste" is OK)

- Pen-G injection (broad spectrum antibiotic). Dose is 0.25cc SQ SID x 3 days diluted 6 parts LRS fluids to 1 part Pen-G (refrigerate). First choice for diarrhea unless bloody or worms are seen
- Panacur (dewormer). Dose is 0.2cc/# PO BID x 5 days. Often used in conjunction with marquis paste (do not refrigerate)
- Marquis paste (anticoccidial/antiprotozoal). Dose is 0.2cc/# PO SID x 3 days if used with panacur. If coccidia suspected the course is longer (do not refrigerate)
- Metronidazole (antibiotic). Dose is 0.05cc/# PO BID x 7 days. Use if diarrhea is bloody or if previously listed meds are unsuccessful (refrigerate)
- Baytril is used sometimes used as a last resort if the other medications don't work. Occasionally other medications will also be dispensed at the medical clinic's discretion.
- LRS fluids will be used for dehydration. The dose is 10cc/# SQ.

Other medications will be used in the nursery and you will encounter many more diseases and conditions. This is a list of the most common and the ones you should memorize.

SID = once a day. BID = twice a day. TID = three times a day. PO = by mouth. SQ = subcutaneous (under the skin). IV = intravenously (used rarely in the nursery). IM = intramuscular (used very rarely in the nursery)

## Neurologic Kitten Protocol and Ocular Discharge Protocol

1. Neurologic Kitten in Nursery
  - a. Kitten is exhibiting signs of: excessive wobbliness (as determined by manager), circling, falling over, head bobbing, tremoring.
  - b. Start Clindamycin, 25 mg/mL at the following dosing (by mouth, twice a day, for two days):
    - i. < 0.5 pound: 0.11 mL
    - ii. 0.5–1 pound: 0.22 mL
    - iii. 1–1.5 pound: 0.34 mL
    - iv. 1.5–2 pound: 0.45 mL
    - v. 2 –2.5 pound: 0.57 mL
    - vi. 2.5–3 pound: 0.68 mL
  - c. To make the Clindamycin suspension at 25 mg/mL – mix one 150 mg capsule in 6 mLs of liquid (Karo syrup, Feline oral solution...). Label with drug name and concentration.
  - d. If signs do not start to improve in 4 days, or if kitten's condition worsens, then schedule appointment with clinic.
  - e. If signs start to improve within 4 days:
    - i. Extend course of medication x 10 more days (two weeks total) at current dose.
    - ii. After two weeks, increase the dose to the next weight range on the dosing chart and give medication for two more weeks (28 days total). For example: if kitten was getting 0.34 mLs, at the two-week point increase to 0.45 mLs and extend for two weeks.
    - iii. Kitten should be considered contagious and has zoonotic potential, so staff needs to take precautions when handling kittens and with litterbox (washing hands/wearing gloves, etc.). Kittens should not be mixed with other kittens until end of course of medication.
2. Kittens with Ocular discharge in Nursery
  - a. If kittens have crusty eyes/ocular discharge, start Gentamycin drops: one drop each affected eye at every feeding for 5–7 days.
  - b. If the "crusting shut" is not improving after 24 hours, then switch to erythromycin ointment: small ribbon each affected eye three times a day.
  - c. If crusting continues for another 24 hours or if the eyes worsen at any point, continue eye ointment and make appointment.

**Never use the bottle on more than one kitten/litter. Dispense the ointment or drops into syringes with no needles and use that to treat directly.**

## Fading Kitten Protocol

Fading Kitten Syndrome is a life-threatening emergency in which a kitten, sometimes one that was previously healthy, “crashes” and begins to fade away. If not dealt with immediately, it can result in death.

### Symptoms

- Low body temperature: the kitten feels cool or cold to the touch
- Extreme lethargy: not getting up, unable to stand, not responding when pet
- Gasping for breath
- Meowing/crying out

It is caused by 2 things:

1. **Hypothermia** (being too cold)
2. **Hypoglycemia** (low blood sugar)

**When this happens, it is vital that you take these immediate steps!**

### Step 1: Get kitten warm

- Create a “burrito” towel. Immediately wrap the kitten up in a towel like a burrito, leaving only its face exposed. Its whole body, tail, ears, and paws should be in the towel. **Do not take the kitten out of the towel—this is very important!** Every time you take the kitten out you will make it cold again, even if it is only for a second.
- Wrap a heating pad turned onto **low** around the burrito towel as an extra source of heat. Secure it around the towel so it stays in place.

### Step 2: Get kitten’s blood sugar up

Once you get the heat on them,

- Get a bowl or Tupperware and add a few Tbsp of sugar to hot water or Karo syrup.
- Stir to get a sugar-water solution—keep it as strong as possible while still being runny.
- Using a syringe or your finger, feed the kitten 3 drops every 3 minutes.
- If the kitten isn’t swallowing, try not to get it down the throat; try to get it on the tongue or gums.
- Set an egg timer or use the stopwatch on your cell phone to make sure you are doing this at least every 3 minutes. Every 5 minutes or 10 minutes will not work—it must be **every 3 minutes**.

Sometimes it can take hours for a kitten to come out of it. Once they do {make sure you contact [name] and [name] to let them know the outcome.

*Keep in mind: Even with love, attention, and perfect treatment of this condition, some of these kittens still won’t make it. Try not to blame yourself during this difficult time and focus on all the kittens you have personally saved by volunteering in the nursery. Any kitten you’ve ever taken care of was given a second chance at life **because of you!** The survival rate with our care **far** surpasses kittens’ survival rate in nature.*

## How to Age Neonatal Kittens

| Kitten Age                | Characteristics  |
|---------------------------|--|
| Less than 3 days old      | Eyes completely closed and wet umbilical cord still attached   |
| Less than 5 days old      | Eyes completely closed and dry umbilical cord still attached   |
| Less than 7 days old      | Eyes completely closed   |
| Between 7 and 10 days old | Eyes mostly closed or beginning to open, no umbilical cord attached  |
| 2-3 weeks old             | Eyes completely open, no umbilical cord, "rounded" ear shape, no incisors                                      |
| 3½ -4½ weeks old          | Eyes completely open, no umbilical cord, "pointed" ear shape, small incisors not all the way through           |
| 5-6 weeks old             | Eyes completely open, no umbilical cord, "pointed" ear shape, incisors all the way through, weigh about 1½ lbs |

## Ringworm Information for Fosters – Neonatal-Specific

### **What is ringworm (dermatophytosis)?**

Ringworm is the common name for a skin infection caused by a group of fungi; it is not caused by a worm at all. Most often it will cause a circular area of fur loss that is red and may be slightly raised. Ringworm can also have other characteristics but these circular, hairless lesions are most common. Ringworm is similar to athlete's foot in people. It is contagious for people; the young, old, and immune-compromised are more likely to get it. Ringworm is also very contagious to other animals.

### **Am I going to get ringworm from my kitten(s)?**

It is possible for you and anyone in your living space to get ringworm from your new cat. Washing your hands after handling the cat can help reduce the chances of transmission, but some people may be at greater risk than others. This puts young animals and children, elderly people and pets, those who are HIV+, people on chemotherapy or taking medication after transfusion or organ transplant, and highly stressed people and animals at high risk.

### **What if I get ringworm!?**

We recommend that you see a physician.

### **What about my other animals?**

In order to keep your other pets from getting ringworm, we recommend that you keep your fostered kittens/cats isolated in a room or kennel that is easy to clean. Washing your hands and changing your clothes in between contact with your ringworm kitty and with other animals can also reduce the chance of spreading the fungus. Remember, your shoes can also be a carrier of the spores.

### **What about my home?**

If you keep your cat in a bathroom or another confined, tiled area, it is very easy to clean the space. Ringworm is killed using a bleach dilution of 10 parts water to 1 part bleach. Let the solution sit for approximately 15 minutes for maximum efficacy. The area the cat is kept in and all of its bedding should be washed using bleach at least once weekly. Once your cat is clear of ringworm, it is recommended that you dip once more to kill any spores and give the room a final cleaning with the 10:1 bleach solution. After this, your cat is free to roam your home and be in contact with your other pets and people.

### **What treatment do they need?**

For younger kittens (under 6 weeks of age), treatment will consist of spot treatment only with Lymdip. You will be provided Lymdip to treat them at home, and instructions are available at the bottom of this document.

### **What do I tell potential adopters about treating the Ringworm?**

APA! will provide adopters with a complete information packet on ringworm and will continue to provide lyme dips at TLAC for any kitten/cat who has ringworm at the time of adoption until it is cleared. (Note that APA! does not cover the cost of having the adopted kitten/cat with ringworm treated at another vet.) It is recommended that you arrange any meet-and-greets at the Ringworm Ward so that the adoption counselor can fully and accurately answer any ringworm questions the potential adopter may have.

### **How do I get my ringworm kitten/cat accepted into the Ringworm Ward or cleared for the main Adoption Center?**

1. Submit an adoption center request form for your kitten in advance of the scheduled S/N surgery date. (You submit the same form whether your kitten is active with ringworm or not; you simply indicate on the form if your kitten/cat currently has ringworm or has had it in the past). You will receive confirmation in advance if/when a space is available in the Ringworm Ward or Adoption Center.
2. Request a cattery clearance exam (can be done in conjunction with S/N surgery) to have your kitten/cat officially cleared of ringworm.

### **How do I treat with the Lymdip?**

Spot treatment is the only recommended way to treat ringworm in young kittens, who are at risk for hypothermia. The clinic can provide you with the Lymdip, which needs to be diluted at a ratio of 3.5ml of Lymdip into ¼ cup of water. Dab a cotton ball in the Lymdip and dot onto visible lesions. Allow to air dry in a warm kennel. Note that the dip will cause the fur on cats to yellow, but the color fades quickly. The dip does have a “rotten egg”-like odor, so keep towels used during dipping separate from regular laundry and wear old clothes to dip. Also remove any jewelry or nice clothing that could come into contact with the solution.

## Lymdip Instructions

### **Supplies needed:**

- Lymdip
- Measuring cup
- Rubber gloves (optional)
- Large cotton balls

### **Things to know before dipping:**

- Lymdip will change the color of metal, so remove jewelry before dipping
- Lymdip has a "rotten egg"-like odor
- Keep towels used for dipping separate from regular laundry because the smell will transfer
- Dip will cause the fur of the cats to yellow, but the color fades quickly