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| **Shelter X**  **Management of COVID-19-exposed or infected animals** | |
| Approved by: | Effective date: |
| Author: Linda Jacobson | Revision Date: |
| Sources | 1. Animal Services’ Role in COVID-19 Support - University of Wisconsin Shelter Medicine <https://www.uwsheltermedicine.com/library/resources/animal-services-role-in-covid-19-support#temporarysheltering> 2. COVID-19 infection in pets: <https://humanecanada.ca/our-work/covid19-for-shelters/> 3. Council of Chief Veterinary Officers’ Position Statement on SARS-CoV-2 testing of animals - <https://www.canadianveterinarians.net/documents/council-of-chief-vet-officers-p-s-testing-animals-sars-cov-2> |

This protocol was written by and for the Toronto Humane Society. Please review carefully before implementing and adjust as needed for your shelter. It is important to ensure that the measures are adequate and appropriate for your environment. Some shelters may prefer to take more stringent measures e.g. adding shoe covers. Please refer to current recommendations from Reference 1.

# Terminology

SARS-CoV-2 – the virus

COVID-19 – the disease

# Definitions

**Exposed animal:** Has been in close contact with a person known or strongly suspected to be ill with COVID-19

**Infected animal:** Confirmed positive on a PCR test

Note, as for other infectious diseases, “**exposed to exposed**” [people or animals] does not require special precautions

# Pets and COVID-19: Basics

1. Some types of pets can get COVID-19 infection from people but only a handful of natural cases have been reported.
2. Susceptibility to COVID-19 for animals that are typically housed at THS:
   1. Ferrets are most susceptible, followed by cats. Ferrets were able to transmit infection to other ferrets in a laboratory setting and the same was found for cats.
   2. Clinical signs tend to be transient and are often mild; may be absent. Typically fever, lethargy, upper respiratory signs, diarrhea.
   3. Young animals are more susceptible than older ones and may show more severe clinical illness such as clinical pneumonia. Important to be aware of this for kittens.
   4. Dogs are less susceptible. They are unlikely to get infected, did not show clinical signs and did not spread infection to other dogs in a laboratory setting.
   5. Rats and mice were not susceptible but hamsters could be experimentally infected.
3. Pet-to-human transmission is considered very unlikely but not impossible. It’s important to remain primarily focused on avoiding human-to-human transmission.

# Management of COVID-exposed animals housed in the shelter

Wear mask, reusable gown and gloves during hand-over and intake exam.

Add face shield if animal has upper respiratory signs

No special precautions with gowns after removal; normal laundering.

Disinfect all surfaces and objects that may have become contaminated during the animal’s entry and intake exam. Deep cleaning is not needed.

Bathing and decontamination are NOT needed

Keep separate from the general population for 14 days, “out of an abundance of caution”:

Dedicated quarantine room, one for dogs, one for cats

Level 2 room(s) and standard PPE for this level

Quarantine sign

Use double-sided housing where possible; spot cleaning as per normal procedures

No direct contact with other dogs when out on walks; dogs to go out through kennel cough exit

Wait 14 days before adoption or foster

Owned animals (emergency sheltering for medical or other reasons) can return home as soon as possible

Streamline outcomes:

Surrendered animals can be placed on adoption hold or foster hold during the quarantine period; adopt/foster with COVID-exposed disclosure

# Management of COVID-exposed animals housed briefly in the shelter

For example, urgent visits or procedures for foster or owned animals

Manage as above

However, the animal can be housed in other parts of the shelter at DVM discretion, if medical needs require (e.g. critically ill)

Quarantine within the room where needed e.g. dog or cat ward

# COVID-exposed animals with clinical signs

Clinical signs are respiratory signs and/or diarrhea. These may be seen in many shelter animals, the vast majority of which will not have COVID-19. Consider:

History and timing of exposure

Age and species of animal

A likely non-COVID-19 explanation for the clinical signs

What would be the purpose of the test and how would the results change management and outcomes?

If COVID-19 infection is suspected and testing is being considered, a veterinarian should contact the Chief Veterinary Officer immediately regarding next steps.

Animal testing is not recommended by the Canadian Council of Chief Veterinary Officers or any other public health agencies, other than under exceptional circumstances (e.g. suspected shelter outbreak).

Details for local veterinary authorities are listed in the CCVO Position Statement, see link in Sources.