Cat Friendly
The Standards of Feline Care

Current Feline Interactions and Handling Recommendations

Why Cat Friendly Interactions and Handling have Replaced Physical Restraint:

Enhance feline welfare

- Minimize **protective emotions** (e.g., fear-anxiety, pain, and frustration
- Understand and support the physical, emotional, and cognitive needs of each feline patient in your care

Improve human safety

- Minimize feline **protective behavioral responses** (e.g., biting, scratching, fleeing)
- Safer subsequent visits as cats will have positive memories associated with veterinary visits

Increase efficiency

- Shorter appointment times
- Shorter anesthetic induction
- More efficient team utilization with minimal handling support

Better medicine

- More thorough examinations
- More diagnostics performed and with more accurate results
- Earlier disease detection and management
- Safer anesthesia

More frequent veterinary visits

- Cats and caregivers have a better experience

Enhanced caregiver satisfaction, loyalty to the practice, and referrals

- Better feline visits help bring clients back

Increase veterinary team confidence, satisfaction, and practice loyalty

- Improved feline knowledge, better team morale, and decreased injuries

Grow your practice and increase revenue

- Cat Friendly Practices® have 17–20% higher average revenue per feline visit than non-Cat Friendly Practices®

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Cat Friendly Handling Replaces Physical Restraint

Restraint and restraint equipment can increase fear-anxiety, pain, and frustration. Studies demonstrate that minimal handling results in fewer protective emotions and behavioral responses, positive future visits, increased team member safety, shorter appointments, and positive caregiver experiences.

What is NOT recommended anymore:

- Scruffing
- Clipnosis or other restraint clips
- Full body restraint
- Stretching cats
- Gloves or gauntlets
- Tight towel wraps or “burritos”
- Cat bags
- Muzzles of any kind, including air muzzles
- Elizabethan collars
- Anesthetic induction boxes
- Nabbers (e.g., mesh cat nabbers)
- Cat tongs
- Rabies poles

Instead, the necessary equipment includes those items that provide the patient with comfort, a sense of safety, a sense of choice, and positive distractions. See a comprehensive list in the Cat Friendly Veterinary Environment Guidelines (Box 5) at **catvets.com/environment**.

Incorporating Cat Friendly Interactions and Handling into Practice:

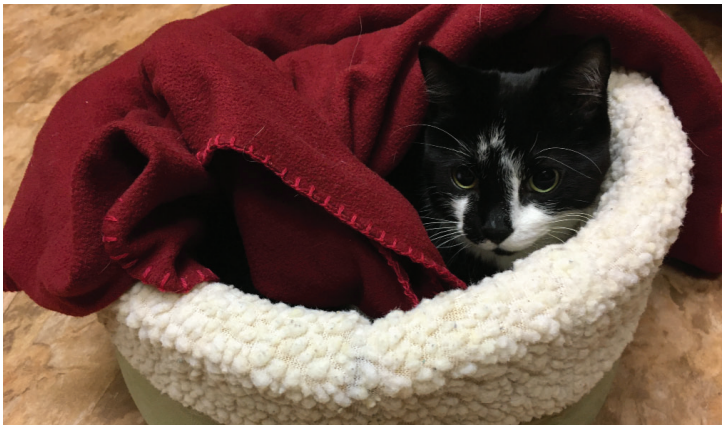
The veterinary visit starts before entering the practice

- Client education about carrier training and transport to the veterinary practice minimizes the cat’s fear-anxiety, reduces caregiver stress, increases human safety, increases frequency of future visits, and increases caregiver loyalty (see **catfriendly.com/carrier**).
- Prescribe pre-visit anxiolytics (gabapentin or pregabalin) for fearful and anxious cats or cats who have previously had negative veterinary experiences.
- Identify when additional pain management is needed pre-visit for cats with chronic pain (e.g., degenerative joint disease [DJD]).
- Coordinate to allow the cat to go from the vehicle directly to the exam room; minimize time that the cat spends in the waiting room.
- If the waiting room cannot be avoided, provide elevated surfaces for carrier placement and cover the carrier.

Permission provided by: Dr. Paige Garnett

Start with non-physical interactions

- Review history, emotional health medical record, and any pre-visit questionnaires (**catvets.com/client-questionnaire**) prior to the visit to identify what works best for the individual cat (e.g., prefers to remain in bottom half of the carrier, likes treats, has painful DJD, etc.). Ensure the practice and examination room environment is Cat Friendly, including providing at least one hiding option (e.g., towel to go over the bottom half of carrier). See the Cat Friendly Veterinary Environment Guidelines for more about Cat Friendly examination rooms (**catvets.com/environment**).



Permission provided by: Dr. Ilona Rodan

Feline Emotions and Behavior Scale

Engaging (positive) emotions

Protective (negative) emotions, from mild to increased intensity

Figure 1

Permission provided by: Dr. Ilona Rodan

- As the cat is acclimating, from a distance, assess the cat's emotional state and corresponding behaviors (see Figure 1) to determine the most appropriate approach for the physical examination and diagnostic procedures.
  - Cats who appear to be more challenging are perceiving a threat to their safety and are demonstrating protective emotions and behaviors. These cats have had previous negative experiences that have led to these emotions, whether chronic (not raised with queen and/or siblings; no or negative interactions with humans, especially between 2-7 weeks of age) or more acute and situational (previous negative experiences with carrier, transport, or veterinary visit). These emotions can cause protective behavioral responses (i.e., hiding, hissing, scratching) which is why teams need to identify the emotions and change their approach before the cat responds.
- Use Cat Friendly body language and other Cat Friendly communication.
  - Approach the cat from the side instead of from the front and meet at the cat's level rather than towering over them.
  - No staring, which the cat can perceive as threatening from an unfamiliar person; instead "slow blink" in the direction of the cat.
  - Speak softly.
  - No perfumes or other strong smells.

Permission provided by: Dr. Tina Hall (top left and right) and Dr. Ilona Rodan (bottom left and right)

- Allow the cat to stay in the position and place they choose in order to give them a sense of control and make them more comfortable. Cats often pick positions that reduce pain (such as with DJD) or help them avoid being touched in areas that cause discomfort or fear-anxiety.
  - Allow the cat to choose to remain in the carrier or choose another location (e.g., floor level, a bench, a perch).
  - If not highly fearful or anxious, entice the cat to leave the carrier by passively placing treats near the carrier or on the floor (not from the hand).

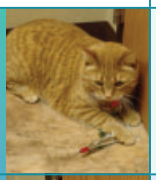
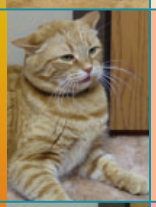
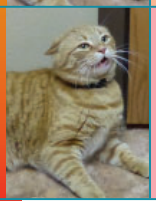
Cat Friendly Veterinary Interaction Guidelines — catvets.com/interaction

Cat Friendly Veterinary Environment Guidelines — catvets.com/environment

Develop a Plan for Physical Examination

When considering your approach, observe the cat's emotional health status to develop a plan for the physical examination to enhance and protect feline welfare and human safety. Below are descriptions and associated behaviors with protective emotions, as well as recommended actions. The consideration of engaging emotions and emotional arousal also need to be considered.

Protective Emotions, Associated Behaviors, and Actions Plans

Protective Emotions	Emotional State Description with Associated Behaviors	Recommended Action
	**Very Low Protective** emotional state. Relaxed, affiliative; friendly; calm; interested in environment and caregiver/ veterinary team	**Proceed** with routine care; maintain environment and interactions with reduced distress (e.g., offer treats, gentle handling, allow sense of control)
	**Low Protective** emotional state. Heightened alertness; tense body and ventral flat posture; minimal movement; ears rotated to the side, dilated pupils, splayed whiskers; listening, eyes back, avoidance	**Slow approach**; optimize environment (e.g., hiding option +/- treats); monitor response to handling and give time and/ or adjust as needed
	**Moderate Protective** emotional state. Heightened alertness; hypervigilant; inhibition; tense body; piloerection; head lowered; tail stiff and/or low; ears back; staring; avoidance with attempt to hide	**Pause and reassess**; reduce stimuli; modify plan as needed and give breaks; try positive reinforcement or distraction (passively offer treat, not from hand); these cats could become less or more protective based on the team's interaction and handling decisions
	**High Protective** emotional state. Avoidance or repulsion responses with limited coping; trying to escape, hiding; backing away, not moving or moving to back of carrier; possible hissing; tail tucked; piloerection, ears flattened; whiskers splayed, lips parted; eyes wide, staring, dilated pupils, or rapid blinking	**Stop or significantly modify handling and interactions**; ensure the cat has a place to hide; try positive reinforcement or distraction; give long breaks; if these do not work consider chemical support or send cat home with anxiolytic/ways to decrease distress; prioritize urgent exams/procedures
	**Very High Protective** emotional state. Repelling behaviors (growling, attempting to bite or scratch, hissing, spitting); frustration (lunging, swatting); heightened alert, rapid head movements, leaning forward	**Do not proceed**; provide caregiver options to decrease distress and minimize highly protective state by: giving a long break; chemical support (will be needed if highly protective state continues); send cat home with plan (see section titled, "The veterinary visit starts before entering the practice")

Physical interactions should respect and enhance feline, caregiver, and human safety

- Cats demonstrating low to moderate protective emotions:
  - With the cat remaining in their preferred location, proceed with the physical examination +/- other diagnostics, treatments, etc., while continuing to demonstrate Cat Friendly body language and communication.
  - Continue to encourage engaging (positive) emotions (e.g., offering treats, cat-preferred touch over the facial glands) and monitor for changes in emotional response.
  - Avoid petting or touching the belly, feet, or area just before the base of the tail.
  - Examine the cat, starting with least stressful and painful areas first, usually auscultating the heart and lungs first. Give analgesia prior to assessing painful areas. If the cat begins to demonstrate protective emotions and behaviors, take a break and redirect to what the cat prefers (e.g., treats, massage over facial glands, calm object play) and reward desired calm behavior.
- Cats demonstrating moderate to severe protective emotions:
  - If this is not a preventive visit or if history and non-physical examination determine that the cat needs immediate care, chemical restraint (sedation) may be needed.
  - With the patient remaining in their preferred location and position, loosely cover the cat from the side with a towel before administering.
  - If this is a preventive care visit and it is safe to reschedule the visit, communicate to the caregiver that proceeding today will likely lead to further protective (negative) emotions and behaviors during future visits.
  - Offer the caregiver the choice to proceed with chemical restraint or to reschedule the visit in 2-4 weeks with carrier training and anxiolytic medication administered pre-visit.

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