

WakeMed Volunteer Pet Program INITIAL BEHAVIORAL EVALUATION

EXAMINATION PROTOCOL FOR VOLUNTEER VETERINARIANS

- Information supplied by the prospective volunteer/dog owner on the Dog History form will be reviewed making sure all necessary information has been provided and the dog is current on all vaccinations before starting the exam.

DO NOT CONDUCT THE EXAM UNLESS ALL VACCINES AND MEDICAL INFORMATION ARE UP TO DATE AND DOCUMENTATION HAS BEEN RECEIVED.

- If vaccinations are not up to date, the dog owner should be informed that they have the option of rescheduling their exam following a visit to their regular veterinarian, OR, it is acceptable and appropriate for the volunteer veterinarian to administer the needed vaccines. Any charge for vaccinations or any medical attention other than outlined in the Hospitality Pets Program will be the sole responsibility of the owner.
- Examinations will be conducted in a manner to minimize examiner bias. Follow the directions as precisely as possible.
- At the conclusion of the screening, note at the end of the form whether the dog should or should not participate in the WakeMed Hospitality Pet Program. Explain the exam results to the owner.
- If it is deemed that the pet should participate in the program, the last part of the evaluation is a general physical examination. Appropriate throat and/or rectal swabs will be obtained at this time. If it has been more than 30 days since the last fecal exam (as indicated on Dog History form), a float and smear fecal exam will need to be conducted.
- Completed evaluation forms, including the Dog History form and supporting documentation on vaccines and fecal exam results, can be given directly to the owner to turn in to the WakeMed Volunteer Services office where they will be volunteering. If preferred, the volunteer veterinarian can mail or email the forms to the appropriate Volunteer Services office:

WakeMed Raleigh Campus

LuMar Bennet
3000 New Bern Avenue
Raleigh, NC 27610
lubennett@wakemed.org
919-350-8066

WakeMed Cary Hospital

Jennifer Gibbs
1900 Kildaire Farm Road
Cary, NC 27518
jegibbs@wakemed.org
919-350-4005

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Volunteer Name: _____

Address: _____

Phone: _____

Dog's Name: _____

Breed: _____ Coat Length: _____

Dog's Age: _____ Dog's Weight: _____

Neutered/Spayed: Yes No Sex: Male Female

Test 1: Initial Observation

A room with minimal distractions is an appropriate testing area. Allow the dog to investigate this area for several minutes without the tester present. The tester should enter the room, not speak, stand still at a discreet distance, and observe the dog for about 15 seconds. Record the initial response:

Acceptable

- ___ holds ground
- ___ approaches tester
- ___ hackles normal
- ___ lips normal
- ___ sniffs tester

Questionable

- ___ crouches
- ___ hackles up
- ___ lips puffed
- ___ moves stiff legged
- ___ growls
- ___ retreats
- ___ barks
- ___ avoids eye contact
- ___ stares at you
- ___ whines

Other

- ___ no response

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Test 2: Approaching the Dog

After initial, brief observations, approach the dog with hand extended at the dog’s nose level, palm and fingers pointed downward. Do not “rush” in, but do not approach dog in a cautious or apprehensive manner. Walk up to the dog in a normal stride until your hand is within 6 to 12 inches of the dog’s nose. Say nothing and wait for the dog to make the next move.

Acceptable

- extends head or steps forward to sniff hand,
- seeks attention by nudging or leaning into tester
- acts playful by barks or actions
- licks hand

Questionable

- turns head away or tries to ignore hand
- pulls back or retreats
- raises hackles
- barks (not to be confused with playful barking)
- lips puffed
- overly exuberant
- bares teeth (do not confuse with a grin)

Other

- stares at you
- no response

Test 3: Handling the Dog

If the dog has not been eliminated by test 1 & 2, attempt to pet the dog starting with the top of the head. Pet the dog to determine its overall response on especially sensitive areas such as ears and mouth.

Acceptable

- enjoys the attention
- tries to make friends
- becomes playful
- enjoys brushing

Questionable

- pulls back/retreats
- growls
- lips puffed
- raises hackles
- quivers
- barks
- cowers
- rolls over on back
- submissively urinates
- snaps/bites
- overly exuberant (jumps up, not calm by end of test)
- shows white of eye
- overly sensitive to grooming

Other

- meets you, but with head lowered and eyes averted
- attempts to lick your face

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Test 4: Interacting with the Dog

- Lay the dog down, the roll him over, rub his belly. Will the dog allow this subordination?
Comments: _____

- Have an assistant place a novel stimulus such as a large stuffed animal or mirror close behind the dog when he is distracted. Does dog have self-confidence to investigate? Y N
Comments _____

- How does the dog react to sudden arm movement? _____

Test 5: Sound Sensitivity

While casually interacting with the dog, have an assistant make a very loud noise without warning; for example, hitting a metal pan with a spoon.

- | | |
|--|---------------------------|
| Acceptable | Questionable |
| ___ notices, but continues previous activity | ___ flees |
| ___ notices, investigates | ___ cowers |
| ___ startles, but recovers quickly | ___ freezes |
| | ___ trembles |
| | ___ urinates |
| | ___ moves as if to attack |

Additional Comments: _____

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Test 6: Pain Threshold

While playing with the dog, briefly pinch the webbing between his toes or pull a hair from his side to determine pain tolerance.

Acceptable

- ___ tries to pull away, but shows forgiveness
- ___ yelps, but is not aggressive
- ___ trusts you, allows further petting

Questionable

- ___ growls
- ___ snaps
- ___ acts fearful
- ___ acts distrustful

Additional Comments: _____

Test 7: Reacting to Unexpected Events (choose A or B)

A. Have your assistant hide around a corner, out of sight, with noisy utility or shopping cart. Walk with the dog toward the intersection as the assistant rolls the cart in front of the dog as close as possible. Record the dog's reaction: _____

OR

B. While the dog is playing with you and distracted, have the assistant hide in a closet or behind a door. Lead the dog to within six feet of the hiding place and have the assistant suddenly jump out at the dog and open an umbrella. Note reactions: _____

Test 8: Manners

Test the dog for basic control on a leash. Comments: _____

Does the dog know basic obedience commands, such as heel and sit-stay. Comments: _____

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Behavioral Evaluation Summary

- | | Yes | No |
|--|-----|-----|
| 1. Initial observations: | | |
| • Is the dog friendly and outgoing? | ___ | ___ |
| • Is the dog aggressively friendly? | ___ | ___ |
| • Is the dog responsive to you? | ___ | ___ |
| • Is the dog fearful? | ___ | ___ |
| • Does the dog cower/hide behind the owner | ___ | ___ |
| • Does the dog growl or curl its lip when approached or handled | ___ | ___ |
| 2. Behavioral examination. Note any adverse reactions from the dog when: | | |
| • A door is slammed | | |
| • Someone enters the room in a loud manner | | |
| • Someone approaches the owner | | |
| • Its hair is pulled | | |
| • Its ears are pulled and fingers are stuck into its ear canals | | |
| • Its legs are pulled | | |
| • Its tail is pulled and lifted high | | |
| • It is patted aggressively | | |
| • It is pushed around the room | | |
| • It is hugged tightly around the neck | | |

Adverse reactions noted: _____

Physical Evaluation: Systems Review (Please note any abnormalities in space spaces provided below.)

- | | | | |
|-----------------------------------|---|-----|-------|
| 1. General condition/cleanliness | N | Abn | _____ |
| 2. Head (eyes, ears, nose & neck) | N | Abn | _____ |
| 3. Oral cavity | N | Abn | _____ |
| 4. Lymph nodes | N | Abn | _____ |
| 5. Urogenital | N | Abn | _____ |
| 6. Integument | N | Abn | _____ |
| 7. Musculoskeletal | N | Abn | _____ |
| 8. Neural system | N | Abn | _____ |
| 9. Abdominal palpation | N | Abn | _____ |
| 10. Auscultation | N | Abn | _____ |

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INITIAL BEHAVIORAL SCREENING EVALUATION RESULT

On this date and under the circumstances of this examination, it is my opinion

that _____ SHOULD / SHOULD NOT (circle one)
(dog's name)

participate in the Hospitality Pets Program at WakeMed Health and Hospitals.

Print Veterinarian Name _____

Veterinarian Office Name _____

Veterinarian Signature _____ Date _____

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PROGRAM APPROVED VETERINARIANS

You may have your Veterinarian conduct the Behavioral Evaluation. Please inquire if there is a charge before scheduling. Veterinarians listed below will provide at no cost Initial and Annual Behavioral Exams.

Dr Joe Gordon
Care First Animal Hospital at Oberlin Road
1216 Oberlin Road
Raleigh, NC 27605
(919)832-3107

Dr. Craig Wilson
Bayleaf Veterinary Hospital
10009 Six Forks Road
Raleigh, NC 27615
(919) 848-1926

Dr. Susan Bristol
Mayfair Animal Hospital
1130 SW Maynard Road
Cary, NC 27513
(919) 467-6146

Dr. J. Conley
Complete Pet Care Animal Hospital at Falls Pointe
9500 Falls of Neuse Rd # 120
Raleigh, NC 27615
(919) 841-4211

Dr Brian Lapham
Southpoint Animal Hospital
5601 Fayetteville Road
Durham, NC 27713
(919) 226-0043

Elisa Sumakeris
Grace Park Animal Hospital
11010 Lake Grove Blvd
Morrisville, NC 27560
(919) 462-1212