

FEAR FREE PRACTICE CERTIFICATION TIPS, TOOLS AND TEMPLATES



General

This document was created to provide examples and resources to help you implement the Fear Free Practice Certification Standards.

Unless otherwise noted, you are not required to implement any of these specific examples or resources. They are also not all-inclusive. You could be doing something amazing that we haven't even thought of yet! Some information will be a valuable resource if you are planning a remodel or building a new facility.

If you have any additional questions or concerns about this information or how to meet any of the standards, please contact at us at practicecertification@fearfreepets.com.

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Category 1: Physical and Emotional

MANDATORY

1.3 Restraint of any animal that could be painful and/or cause emotional distress is prohibited. The use of physical punishment or force in anger or frustration is unacceptable.

- Practice team members should choose a calm and quiet environment for procedures.
- Practice team members should allow adequate time for the animal to acclimate to the environment.
- While in the care of the practice, the animal's body language is continually monitored, and practice team members make adjustments as needed to prevent and alleviate fear, anxiety, and stress (FAS).
- When restraint is needed, it should be of the least intensity and duration needed.
- If a canine patient struggles longer than three (3) seconds or a feline patient longer than two (2) seconds, this indicates a need to stop and reassess.
- If a canine patient struggles three (3) times or a feline patient struggles two (2) times, this indicates a need to stop and reassess.
- PVN, PVP, and sedatives are used when appropriate to alleviate FAS and increase patient and practice team member safety.
- Scruffing of cats is not an acceptable means of restraint.
- “Box” or “tank” anesthetic induction is not an acceptable means of sedating/anesthetizing a pet.
- A muzzle, nor any other restraint implement, is never an excuse to overlook, override, or overpower the emotional state of the animal.

EQUIPMENT & SUPPLIES

Examples include but are not limited to:

- Nonslip surfaces
- Blankets and towels to assist with restraint and provide hiding places
- Humane traps (e.g., clamshell net) for capture of fearful cats for sedation
 - Use of “cat gloves” should be a rare occurrence (e.g., to safely restrain patient for injectable sedation, the same way a humane trap might be used).
 - Review Level 2 Module 2 “Cat Emergency Sedation” for alternatives.
- Basket-type muzzles are preferred
 - They provide safety but still allow mouth breathing, panting, and taking treats.
 - Avoid nylon or noose-type muzzles that hold the mouth shut or those that restrict opening of mouth. If necessary, use them only for quick procedures. They should never be left on patients when hospitalized.
 - The Canine Friendly Short Snout Dog Muzzle (or equivalent) may be more appropriate, as determined by the dog’s facial phenotype.
- PVNs, PVPs, sedatives, analgesics

Category 1: Physical and Emotional

- Treats, toys, brushes, or other grooming objects to help with lowering FAS



Towel wrap technique for restraint (Credit: Sophia Yin)



Basket muzzle being utilized



Canine Friendly Short Snout Dog Muzzle



Category 1: Physical and Emotional

MANDATORY

1.4 Any animal that is observed to be experiencing mental suffering or distress must be assessed and appropriately treated without delay.

- While in the care of the practice, the animal's body language is continually monitored, and practice team members make adjustments as needed to prevent and alleviate fear, anxiety, and stress (FAS).
- Treatment options include but are not limited to calming techniques, pheromones, supplements, and medications to reduce or eliminate mental suffering or distress.
- The Emotional Medical Record (EMR) is updated to show cause of incident, intervention, and results of intervention.

Example

- A persistently vocalizing animal is:
 - Moved to an area of the practice that is quieter and has less traffic flow
 - Provided with pheromone-treated bedding
 - Provided with nutraceuticals or sedatives
 - Provided with additional physical and/or mental stimulation
 - Toys/play
 - Food puzzle
 - Access to outside



Category 1: Physical and Emotional

MANDATORY

1.7 Appropriate pain management is provided for the level of occurring and/or expected pain.

- Pain management is instituted for acute and/or chronic pain.
- Consideration for severity and duration of pain is a must.
- Anticipate procedures that may be uncomfortable so that analgesia can be provided PREEMPTIVELY.
 - *Examples include but are not limited to:*
 - A patient that presents for lameness evaluation
 - Cystocentesis for a patient with history of hematuria, dysuria, pollakiuria, etc.
 - Microchip placement in an awake patient
 - Otitis externa
 - Infected anal gland(s)

Resources include but are not limited to:

- Glasgow/NewMetrica Acute Pain Measurement for Dogs and Cats
 - <https://www.newmetrica.com/>
 - AKA CMPS-SF
 - AKA CMPS-Feline
- Colorado State University's Canine and Feline Acute Pain Scale
- 2015 AAHA/AAFP Pain Management Guidelines for Dogs and Cats
 - https://www.aaha.org/globalassets/02-guidelines/pain-management/2015_aaha_aafp_pain_management_guidelines_for_dogs_and_cats.pdf
- WASAVA Guidelines for Recognition, Assessment and Treatment of Pain
 - <https://wsava.org/Global-Guidelines/Global-Pain-Council-Guidelines/>
- Veterinary Anesthesia & Analgesia Support Group
 - <http://www.vasg.org/>
- Animal Pain
 - <http://www.animalpain.com.br/en-us/>



Category 1: Physical and Emotional

MANDATORY

1.8 The practice maintains a Standard Operating Procedure (SOP) for preventing and alleviating fear, anxiety, and stress (FAS) upon arrival at the practice.

- Drafting SOPs helps practices create their Fear Free culture.
- Consider making this a team effort. Ask a few team members to work together to create a first draft (or review and edit an existing SOP), then review and finalize it as a group.
- SOPs can also be used in New Hire Training & Orientation.
- Basic SOP Format
 - **Procedure:** This is what we do and why we do it.
 - **Responsible Team Members:** This is who does it.
 - **Equipment/Supplies:** This is what we need to do it.
 - **Procedural Steps:** This is how we do it.
- The examples below are meant to provide further insight as to what Fear Free is looking for.
- Example SOPs should NOT be copied and pasted into your self-assessment.
- Additional resources include but are not limited to:
 - Fear Free Module 8
 - The Vital Role of the CSRs
 - Webinar: Tell Me More About SOPs!

Example

Procedure: Pheromone support supplied to patients upon arrival to the practice to help prevent and alleviate FAS.

Responsible Team Members: CSRs

Equipment/Supplies: Canine & feline pheromones, assorted sizes of bandanas for dogs, towels for cats

Procedural Steps:

- The daily appointment schedule is reviewed. The anticipated needed bandanas and towels for morning appointments are treated with canine and feline pheromones upon arrival. For afternoon appointments, they are treated 15 minutes before the first appointment of the afternoon.
- When a canine patient arrives, the owner will be handed an appropriately sized pheromone-treated bandana and instructed to allow the dog to sniff it before securing it comfortably around the dog's neck. If this results in a rise in FAS, the owner will be advised to discontinue placing the bandana.
- When a feline patient arrives, the owner will be instructed to place the carrier on the "cat parking" elevated platform and to partially cover the carrier with the pheromone-treated towel. Partial coverage provides the cat with the choice to either hide or observe his/her surroundings.



Category 1: Physical and Emotional

MANDATORY

1.9 The practice maintains a SOP for preventing and alleviating FAS during the visit at the practice.

Example

Procedure: To minimize entrances and exits, exam rooms are prepared with all anticipated supplies.

Responsible Team Members: All

Equipment/Supplies: May include but are not limited to handling tools (e.g., basket muzzles, towels, treats, toys), sampling supplies (e.g., needles, syringes, butterfly catheters, blood collection tubes), vaccines, and diagnostic equipment (e.g., doppler, Tonopen, Wood's Lamp)

Procedural Steps:

- Each morning and mid-day before appointments begin, supplies of items routinely kept in exam rooms are monitored and restocked as needed. These include but may not be limited to species-appropriate pheromone diffusers, treats, toys, catnip, towels, cotton balls, cotton swabs, paper towels, cleaning supplies, water bowls, and litter boxes. Trash cans are also to be emptied at these times.
- For each appointment, the reason for the patient visit is reviewed and anticipated equipment & supplies are gathered.
- If additional supplies are needed, exits and re-entries are made slowly and quietly.
- Patients will not be moved to the treatment area for procedures that can be completed in the exam room. If the owner does not wish to be present, s/he will be asked to wait in the reception area.
- If a patient does need to be moved to another part of the hospital, the owner will be given the option to accompany their pet, returning to the exam room or reception area once the patient arrives at the desired location.



Category 1: Physical and Emotional

MANDATORY

1.10 The practice maintains a SOP for preventing and alleviating FAS during checkout/discharge from the practice.

Example

Procedure: To prevent and alleviate FAS during checkout, discharge instructions are reviewed and payment is collected without pet needing to wait in the reception area.

Responsible Team Members: Veterinarians, veterinary nurses, CSRs

Equipment/Supplies: May include but are not limited to PVN/PVP or other FAS management tools for next visit, medications, written discharge instructions, other applicable handouts (e.g., Fear Free Happy Homes: How to Pill Your Pet With Kindness, How to Manage a Fear Free Return Home)

Procedural Steps:

- Checkout should occur in the exam room or a quiet, distraction-free space.
- The veterinarian or nurse will review any discharge instructions including but not limited to nutraceutical or prescription instructions and information, test results, and, if applicable, re-integration of patient to a multi-pet household. Written discharge instructions will also be provided.
- The CSR will collect payment for the visit in the same space.
- Alternatively, if there is more than one owner, one can wait outside or in the car with the pet while the other owner receives the discharge instructions and provides payment.
- Cat carriers shall not be placed on the floor during discharge/checkout.



Category 1: Physical and Emotional

MANDATORY

1.11 If training and/or behavior modification is provided at the practice, either by a practice team member or an outside provider, techniques must be free from aversives and adhere to scientific principles for humane handling.

1.12 If the practice refers clients to a trainer in the community, the trainer's techniques must be free from aversives and adhere to scientific principles for humane handling. First-hand experience is **HIGHLY recommended.**

Standard is considered met if "N/A-service not provided" is selected on the self-assessment.

- Aversives include confrontational or frightening human-pet interactions. Examples are physical corrections such as jerking leashes or swatting; verbal reprimands such as shouting “No!”; startling stimuli such as spraying pets with water bottles; directing sonic stimuli toward pets (e.g., air horns, shake cans, ultrasonic devices); throwing items at the pet; and training tools such as prong, pinch, choke, electric stimulation (shock), and citronella collars.¹
- Fear Free **STRONGLY** recommends you have recent, first-hand experience with any trainer you recommend.

Resources include but are not limited to:

- Fear Free Podcast: “Why Trainers & Veterinary Professionals Should Work Together”
- Fear Free Webinar: “There are no Fear Free trainers near me – how do I meet the trainer standards?”
- AAHA Canine and Feline Behavior Management Guidelines
- <https://spca.bc.ca/wp-content/uploads/AnimalKind-Dog-Training-Standards.pdf>

¹Debbie Martin, LVT, VTS-Behavior, used with permission



Category 1: Physical and Emotional

MANDATORY

1.15 Animals in boarding are given enough space to eliminate in a different area than their resting area and/or taken outside to eliminate at least four (4) times in 24 hours.

Standard is considered met if "N/A-service not provided" is selected on the self-assessment.

- If a practice is unable to take a pet out four (4) times in a 24-hour period, then the housing must be large enough to allow the pet to relieve themselves and have enough room to lie down without lying in the soiled area.
- Feline housing must have enough room to accommodate an elevated resting platform as well as a litter box.
- During the onsite visit, a cat observed to be resting in a litter box *due to lack of space or lack of other options* may result in failing to meet this standard.

Resources include but are not limited to:

- <https://indoorpet.osu.edu/sites/indoorpet/files/assets/documents/CageSetUpPoster.pdf>
- https://indoorpet.osu.edu/sites/indoorpet/files/assets/documents/handouts/Environmental_Enrichment_for_Confined_Cats_512.pdf



Category 1: Physical and Emotional

MANDATORY

1.16 Animals in boarding are provided with daily positive social interaction including but not limited to social interactions with people, physical exercise, and other environmental enrichments. During their stay, animals should be cared for by the same practice team member whenever possible.

Standard is considered met if "N/A-service not provided" is selected on the self-assessment.

Enrichments may include but are not limited to:

- Time outside of housing longer than is needed for bathroom duties with the opportunity to:
 - Sniff
 - play +/- socialize with people
 - play +/- socialize with other animals, if deemed safe & owner has given consent
- Food puzzles
- Toys
- Catnip
- Blowing bubbles
- TV, music, audiobooks
- Scratching substrate (cats)

SOP: Same practice team member provides care for boarding animals.

- SOP should include HOW you ensure animals are cared for by the same practice team member during that member's workday.

Resources include but are not limited to:

- Fear Free Webinar: Care of Hospitalized and Boarding Patients
- Fear Free Boarding Checklist and Consent Form (Level 2)
- Fear Free Pet Boarding Client Handout (Level 2)



Category 2: Client Education

MANDATORY

2.1 The practice DISPLAYS client education about Fear Free.

At least one (1) item must be present in the reception area and ONE (1) in each exam room.

Comfort rooms used for euthanasia are exempt.

- The same Fear Free client education piece does not have to be in the reception area and exam rooms. For example, the practice may display a Fear Free seasonal infographic in the reception area and the Fear Free Fear, Anxiety & Stress (FAS) scale in the exam room.
- Fear Free Happy Homes (FFHH)
 - Most content requires a membership to access.
 - Memberships are COMPLIMENTARY.
 - If you elect to convert a FFHH article into a physical handout, either to display or to give to clients, the article shall not be edited and shall include both the link to FFHH and the reviewed/edited credits.
- Practice-made pieces must be uploaded for review and approval.

MANDATORY

2.2 The practice has at least three (3) TAKE-HOME Fear Free educational resources for owners.

Resources are provided to owners on an as-needed basis.

- Fear Free take-home client education resources may be provided via physical handout or digitally.
 - Digital format is acceptable if a **specific** link or file (e.g., PDF) is provided to the client.
 - Verbal communication of “it’s on our website” or “Google xyz” does **NOT** meet this standard.
 - It is highly recommended that if a link is provided, the client is emailed or texted the link so s/he does not have to type it into his/her web browser.
- Fear Free Happy Homes (FFHH)
 - Most content requires a membership to access.
 - Memberships are COMPLIMENTARY.
 - If you elect to convert a FFHH article into a physical handout, either to display or to give to clients, the article shall not be edited and shall include both the link to FFHH and the reviewed/edited credits.
- Practice-made pieces must be uploaded for review and approval.



Category 2: Client Education

OPTIONAL

2.3 The practice provides Fear Free–compliant CLIENT EDUCATION.

- Fear Free client education includes information about preventing and alleviating fear, anxiety, and stress (FAS), emotional wellbeing, behavior, pain management, etc.
- For example, education on ear cleaning that did **NOT** include the potential need for analgesia (if infected), having pet on a nonslip surface, and use of positive reinforcement would not be considered Fear Free.
- Fear Free client education does not include use of positive punishment, including but not limited to verbal reprimands; shaker cans; air horns; citronella spray; and electric mats, collars, or fences.
- Client education may be provided via physical handout or digitally.
 - Digital format is acceptable if a **specific** link or file (e.g., PDF) is provided to the client.
 - Verbal communication of “it’s on our website” or “Google xyz” does **NOT** meet this standard.
 - It is highly recommended that if a link is provided, the client is emailed or texted the link so s/he does not have to type it into his/her web browser.
- Fear Free Happy Homes (FFHH)
 - Most content requires a membership to access.
 - Memberships are COMPLIMENTARY.
 - If you elect to convert a FFHH article into a physical handout, the article shall not be edited and shall include both the link to FFHH and the reviewed/edited credits.
- ALL applicable practice team members shall be able to locate all material.
- During the onsite visit, the Practice Certification Veterinarian may be required to upload one or more items. Without that, the practice will be evaluated on what resources were observed in use.

Examples include but are not limited to:

Canine Socialization

- FFHH: Fear Free Puppy Socialization Bingo handout
- FFHH: <https://fearfreehappyhomes.com/socialize-new-dog-puppy/>
- FFHH: Training and Socialization 101 video
- “5 Secrets to a well-adjusted new puppy” by Kathryn Primm, DVM
- That Dog Geek – Beacon Dog Training
 - https://www.youtube.com/channel/UC_mAuMGvtqi2LfeyTWUHcJA
- AVSAB Position Statement on socialization
- https://www.whole-dog-journal.com/issues/20_5/features/Puppy-Socialization-Guide_21638-1.html



Category 2: Client Education

Feline Socialization

- FFHH: Fear Free Kitten Socialization Bingo handout
- FFHH: <https://fearfreehappyhomes.com/how-to-set-your-kitten-up-for-success/>
- FFHH: <https://fearfreehappyhomes.com/teach-kittens-gentle-play-yes-you-can/>
- FFHH: <https://fearfreehappyhomes.com/emotional-rescue-how-play-meets-needs-of-young-cats/>
- “5 Secrets to a well-adjusted new kitten” by Kathryn Primm, DVM
- <https://www.americanveterinarian.com/news/the-educated-client-kitten-socialization-made-easy>
- <https://www.aspcapetinsurance.com/blog/2018/march/07/how-to-socialize-your-cat/>

Puppy and/or Adult Dog Housetraining

- FFHH: <https://fearfreehappyhomes.com/9-tips-to-housetrain-your-puppy-or-adult-dog/>
- FFHH: <https://fearfreehappyhomes.com/housetrain-new-dog-puppy-10-tips/>
- That Dog Geek - Beacon Dog Training: 7 Quick Tips for Toilet Training a Puppy or Dog
 - <https://www.youtube.com/watch?v=xpzjtHPQpOk>
- Veterinary Medicine April 2007 by Valarie Tynes, DVM, DACVB: 10 easy steps to housetrain your dog
- Arizona Humane Society: House Training
 - <https://www.azhumane.org/wp-content/uploads/2017/10/House-Training.pdf>

Litter Box Training and Care

- FFHH: <https://fearfreehappyhomes.com/cat-litter-science-why-to-let-your-cat-choose/>
- <https://indoorpet.osu.edu/cats/basicneeds/litter-boxes>
- <https://catfriendly.com/cat-care-at-home/litter-box/>

Meeting the Scratching Needs of Cats

- FFP: Cat Got Your Couch? Try This! (Feline Destructive Scratching course handout)
- FFHH: <https://fearfreehappyhomes.com/scratch-that/>
- FFHH: <https://fearfreehappyhomes.com/clawful-behavior/>
- FFHH: <https://fearfreehappyhomes.com/an-introduction-to-feliscratch/>
- <https://www.catscratching.com/>
- <https://catfriendly.com/cat-care-at-home/living-clawed-cat/>
- “It’s natural for cats to scratch” AAFP client handout
- <https://indoorpet.osu.edu/cats/basicneeds/scratching>

Meeting the Environmental Needs of Indoor Cats

- FFHH: <https://fearfreehappyhomes.com/to-make-cats-happy-offer-choices-enrichment/>
- FFHH: Meeting the Basic Needs of Your Cat video



Category 2: Client Education

- FFHH: <https://fearfreehappyhomes.com/beat-feline-boredom-with-3-fun-cat-games/>
- <https://indoorpet.osu.edu/cats/basic-indoor-cat-needs>
- <https://indoorpet.osu.edu/sites/indoorpet/files/assets/documents/KeepingCatsIndoors-2013.pdf>
- <https://catfriendly.com/cat-care-at-home/what-your-cat-needs-to-feel-secure/>
- “Your Cat’s Environmental Needs” AAFP Client Handout
- <https://catfriendly.com/cat-care-at-home/indoor-vs-outdoor/>
- FFHH: <https://fearfreehappyhomes.com/zoom-zoom-agility-training-gets-cats-off-the-couch/>
- FFHH: <https://fearfreehappyhomes.com/exercise-cat-feed-time/>
- FFHH: <https://fearfreehappyhomes.com/5-games-puzzles-keep-cats-mentally-physically-challenged-2/>
- FFHH: <https://fearfreehappyhomes.com/enrich-cats-life-art-connecting-cat/>
- FFHH: <https://fearfreehappyhomes.com/emotional-rescue-how-play-meets-needs-of-young-cats/>
- FFHH: <https://fearfreehappyhomes.com/five-cat-toys-you-can-make-in-less-than-five-minutes/>
- FFHH: <https://fearfreehappyhomes.com/cat-enrichment-products-top-5/>
- FFHH: <https://fearfreehappyhomes.com/low-cats-need-way-physical-space/>
- FFHH: <https://fearfreehappyhomes.com/catio-life/>

Canine Crate Training AND Feline Carrier Acclimation Training

- FFHH: <https://fearfreehappyhomes.com/welcome-home-crate-train-new-dog-puppy/>
- FFHH: <https://fearfreehappyhomes.com/setting-routines-schedules-new-dog-puppy/>
- <https://positively.com/dog-behavior/puppy-knowledge/puppy-housetraining/crate-training/>
- Karen Pryor Academy’s Positive Crate Training Guide
- Dog Training by Kikopup: <https://www.youtube.com/watch?v=P8yc5Y9HGY4>
- FFHH: <https://fearfreehappyhomes.com/cat-carrier-follies-help-cats-learn-love-carriers/>
- FFHH: <https://fearfreehappyhomes.com/cat-carrier-follies-help-cats-learn-love-carriers/>
- http://catalystcouncil.org/resources/health_welfare/cat_carrier_video/
- Cat Carrier Training with Dr. Jacqui Neilson
 - https://www.youtube.com/watch?feature=player_embedded&v=V5a19du2BjA
 - https://www.youtube.com/watch?feature=player_embedded&v=b6Bz6K6HqXg
- <https://catfriendly.com/be-a-cat-friendly-caregiver/cat-carriers/>
- <https://catfriendly.com/be-a-cat-friendly-caregiver/cat-carrier-mistakes-avoid/>
- Getting Your Cat in the Carrier for Your Next Vet Exam Feliway® Client Information Series by Ceva

How to Select a Trainer AND Training Resources

Selecting A Trainer

- FFHH: Training videos



Category 2: Client Education

- FFHH: Finding a Qualified Trainer or Behavior Consultant & Red/Green Lights in Training and Behavior Consulting handouts
- http://www.ispeakdog.org/how-to-choose-a-dog-trainer.html?fbclid=IwAR1SI8NO8hKpbPUVTap-GMMqx0f0CJezy_aeSS0FLhE5P38Ee64aGd25wCw
- Victoria Stillwell: <https://positively.com/dog-training/find-a-trainer/how-to-choose-a-good-dog-trainer/>
- Pet Professional Guild - <https://www.petprofessionalguild.com/>
- <https://www.dacvb.org/page/dogs>
- AVSAB Position Statement: How to Choose a Trainer

Training Resources

- Team Education in Animal Behavior: <https://www.teamanimalbehavior.com/online-courses/>
- Jean Donaldson: <https://www.thegreatcourses.com/courses/dog-training-101.html>
- Lori Nanan: Fetching Canine Education + Solutions: <https://lorinanan.com/all-courses/>
- Kristi Benson Dog Training: <http://www.kristibenson.com/online-courses/>
- Victoria Stillwell: <https://positively.com/dog-training/positive-training/>
- Dog Training by Kikopup: <https://www.youtube.com/user/kikopup>
- The Family Dog: <https://www.thefamilydog.com/>
- Dr. Ian Dunbar: <https://www.dunbaracademy.com/>
- *Puppy Start Right: Foundation Training for the Companion Dog* by Debbie Martin RVT, VTS (Behavior), CODT-KA, KPA-CTP, and Kenneth M. Martin, DVM, DACVB
- *Decoding Your Dog: Explaining Common Dog Behaviors and How to Prevent or Change Unwanted Ones* by Debra Horwitz, DVM, DACVB, John Ciribassi, DVM, DACVB and Steve Dale, CABC
- *The Other End of the Leash* by Patricia McConnell, PhD
- *From Fearful to Fear Free: A Positive Program to Free Your Dog from Anxiety, Fears, and Phobias* Drs. Marty Becker, DVM, Lisa Radosta, DVM DACVB, Dr. Wailani Sung, PhD, DVM, DACVB and Mikkel Becker, KPA, CTP, CBCC-KA, CDBC, CPDT-KA, CTC
- *Perfect Puppy in Seven Days: How to Start Your Puppy Off Right* by Sophia Yin, DVM, MS

Muzzle Training

- FFHH: Keep Calm and Muzzle On handout
- <https://muzzleupproject.com/muzzle-training/>
- <https://www.maddiesfund.org/basket-muzzle-training.htm>
- Dog Training by Kikopup: <https://www.youtube.com/watch?v=KJTucFnmAbw>
- Domesticated Matters, Chirag Patel: <https://youtu.be/1FABgZTFvHo>
- <https://bestfriends.org/resources/muzzle-training-dog-training-plan>



Category 2: Client Education

Nail Trims & Grooming

- FFHH: <https://fearfreehappyhomes.com/nail-anatomy-101-keep-trims-safe-not-scary/>
- FFHH: <https://fearfreehappyhomes.com/how-to-trim-puppy-nails-without-a-fuss/>
- FFHH: <https://fearfreehappyhomes.com/8-steps-fear-free-nail-trims-cat/>
- <https://www.youtube.com/watch?v=gAzup4LwIVo>
- Video series:
 - Part 1 https://www.youtube.com/watch?time_continue=1&v=8vo2jtVXBsc
 - Part 2 https://www.youtube.com/watch?time_continue=6&v=08qcMc1GqrM
 - Part 3 https://www.youtube.com/watch?time_continue=2&v=-2Pab8L1ZWE
- Donna Hill: <https://www.youtube.com/watch?v=6JTKrJ2sVGo>
- <https://fearfreehappyhomes.com/make-brushing-a-pleasurable-experience-one-cats-story/>
- <https://fearfreehappyhomes.com/taming-the-longhairs-locks-2/>
- <https://fearfreehappyhomes.com/brush-longhaired-dog/>
- <https://fearfreehappyhomes.com/12-tips-caring-senior-dogs-coat/>
- Please note: The following is **NOT** considered an acceptable option for CLIENT EDUCATION:
 - https://drsophiayin.com/videos/entry/training_a_dog_to_enjoy_toenail_trims/
 - <https://www.youtube.com/watch?v=WWZUcLfHXLE>
 - It is highly unlikely an owner will have the skill needed to handle an animal with this high level of FAS.
 - It also demonstrates Simultaneous Conditioning, not Classical Conditioning, the latter being more desirable.

Ear Care

- FFHH: <https://fearfreehappyhomes.com/stop-ear-fear-help-pets-stay-calm-ear-care/>
- All Pets Education & Training:
<https://www.youtube.com/watch?v=dAlVo4aXVYg&list=PLniRZehYiNIH0BEDnrNt-8drNyJ0xpH0c&index=2&t=0s>
- <http://veterinarymedicine.dvm360.com/fear-free-veterinary-training-tip-feline-ear-cleaning>

Anal Gland

- <https://www.petmd.com/blogs/dailyvet/2009/September/17-4688>

Environmental Enrichment for Activity Restricted Pets

- My Fantastic Friend, Jessica Ring: <https://www.myfantasticfriend.com/2019/06/14/operation-no-grumpy-gus-mental-enrichment/>



Category 2: Client Education

Chronic Health

Why do these meet this standard? They address the fact that pain control and sedation may be needed, both of which help prevent & alleviate FAS.

- FFHH: <https://fearfreehappyhomes.com/coping-chemo-reduce-stress-pet/>
- FFHH: <https://fearfreehappyhomes.com/pet-losing-a-limb-how-to-help-him-get-back-on-his-feet/>
- FFHH/Zoetis Petcare: When Is An Itch More Than Just An Itch video and handout
- <http://veterinarybusiness.dvm360.com/client-handout-what-do-about-miserable-itch>
- http://files.dvm360.com/alfresco_images/DVM360/2015/12/11/13e2172b-6ac5-4c5e-af64-36ccbd942fd/miserable_itch-AJF.pdf
- http://www.dvm360.com/sites/default/files/images/pdfs-for-alfresco-articles/Hot_spot_handout.pdf

Senior and/or Geriatric Patient Care

- FFHH: <https://fearfreehappyhomes.com/category/explore/senior-pets/>
- FFHH: <https://fearfreehappyhomes.com/helping-your-senior-cat-2/>
- <https://dogdementia.com/enrichment-toys-for-senior-dogs/>
- <https://catfriendly.com/cat-care-at-home/senior-care/>

Palliative and/or Hospice Care and/or Euthanasia

- FFHH: <https://fearfreehappyhomes.com/hospice-care-what-to-know-about-quality-of-life/>
- FFHH: <https://fearfreehappyhomes.com/hospice-helps-dogs-and-humans-cope-with-end-of-life/>
- FFHH: <https://fearfreehappyhomes.com/feline-hospice-offers-a-fearfree-path-to-a-lifes-end/>
- Lap of Love: <https://www.lapoflove.com/>
- https://vetsocialwork.utk.edu/quality-of-life_resources/
- <https://vet.osu.edu/vmc/sites/default/files/import/assets/pdf/hospital/companionAnimals/HonoringtheBond/HowDoIknowWhen.pdf>
- <https://www.compassionunderstood.us.com/>
- <http://pet-loss.net/>
- <http://petloss.com/>
- <https://veterinarypartner.vin.com/default.aspx?pid=19239&id=4951966>



Category 3: Medical Records

MANDATORY

3.1 The practice maintains the Fear Free Pre-Visit Questionnaire (PVQ) for each patient. The PVQ should be standardized, easy to find in the medical record (MR), and used by all practice team members.

- Steps to ensure client completion of PVQ could include emailing it to client when the appointment is scheduled and/or making it available for download on the practice website.
- The PVQ does not need to be redone for each patient visit. Like client contact information, it should be reviewed and updated as needed, ideally at least every 12 months. For example, a dog or cat may not initially experience motion sickness, but it could develop over time.
- Client education should address any areas of concern noted in the PVQ.
 - Examples include but are not limited to:
 - Animal rides loose in the car
 - Motion sickness
 - Animal is fearful of other animals or strangers

MANDATORY

3.2 The practice maintains the Fear Free Emotional Medical Record (EMR) for all patients. The recording method should be standardized, easy to find in the MR, and used by all practice team members.

- Think of the EMR as a template for how to provide a Fear Free visit for *that* patient.
- It should be reviewed when an appointment is made for an established patient to ensure the owner and practice team members have what they need prior to the patient's visit.
- It should be updated accordingly with each patient visit.

MANDATORY

3.3 FAS documentation, using the Fear Free FAS Scale, is a part of any and all visits to the practice. The recording method should be standardized, easy to find in the MR, and used by all practice team members.

- Practice should use the Fear Free fear, anxiety, and stress (FAS) scale.
- The patient's FAS score will likely change throughout the visit. Body language should be monitored continuously, and adjustments should be made accordingly. It is not unlike monitoring the vital signs of an anesthetized patient.
- Example:
 - "FAS increased to 4 with blood draw but was able to reduce to 2 with chicken baby food"



Category 3: Medical Records

MANDATORY

3.4 A pain score is recorded for all patient visits with a veterinarian AND at least once daily for hospitalized patients.

Resources include but are not limited to:

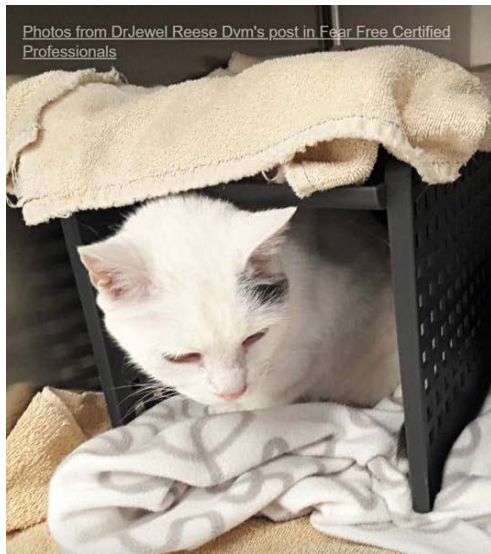
- Glasgow/NewMetrica Acute Pain Measurement for Dogs and Cats
 - <https://www.newmetrica.com/>
 - AKA CMPS-SF
 - AKA CMPS-Feline
- Colorado State University's Canine and Feline Acute Pain Scale
 - <http://csu-cvmbbs.colostate.edu/Documents/anesthesia-pain-management-pain-score-canine.pdf>
 - <http://csu-cvmbbs.colostate.edu/Documents/anesthesia-pain-management-pain-score-feline.pdf>
- International Veterinary Academy of Pain Management
 - <https://ivapm.org/professionals/>

Category 4: Facilities

MANDATORY

4.2 Unless medically contraindicated, feline housing includes one (1) or both of the following: elevated resting platform, ability to hide.

- Hiding is a critical coping strategy for cats, so all efforts should be made to provide cats with this option. Even cats with IV or urinary catheters can potentially have half of the front of their enclosures blocked with a curtain.
- The cat's carrier, a cardboard box, or a plastic stool are a few options that provide both an elevated resting platform and a place to hide.
- The Fear Free closed Facebook group is another place to get great ideas.



The Little Cat Clinic - La Mesa, CA

Category 4: Facilities

MANDATORY

4.3 Practice provides at least two (2) options from the following list.

Note: Not all options for this standard are featured here.

Outdoor exam space for dogs



Hardin Valley Animal Hospital - Knoxville, TN



Our zen garden with a water fountain

Country Oaks Pet Hospital - Sacramento, CA

Category 4: Facilities

Platform for cat carriers in reception area and/or exam rooms



VCA Central Kitsap Animal Hospital - Silverdale, WA

Category 4: Facilities

Design options for Considerate Approach and Gentle Control



Loyal Companions - St. Charles, IL



North Shore Veterinary Hospital - Duluth, MN

Category 4: Facilities

Outdoor views from exam rooms for cats



Applebrook Animal Hospital - Ooltewah, TN

Enrichment for cats in exam rooms



VCA New Hartford Animal Hospital - New Hartford, NY



Category 4: Facilities

OPTIONAL

4.6 Separation of species in reception area.

- Separate entries for species: the most extreme of the species separation. This is ideal for the animals but may not be an ideal solution for all types of practices.
- Separate waiting areas are ideal to reduce anxiety for each species. This may be achieved with a wall or a partial divider.
- For practices that cannot physically separate species, a visual block may be erected between areas of the reception area. This may be achieved with furniture, screens or plants. The visual block should extend above eye level of all animals to be effective.

OPTIONAL

4.7 Reduce wait times for animals in reception area.

- Alternative Check-In Methods
 - Non-audible paging systems can be used to notify staff of a client's arrival or for the practice to notify the client when the exam room is ready.
 - Client either checks in at reception area when arriving or texts from the car once in the parking lot.
 - Practice either provides a restaurant-style buzzer or texts client when exam room is ready.
- Covered Outdoor Waiting Areas
 - Provide a covered waiting porch to be used in pleasant weather.
- Alternative Access into the Building
 - Provide doors directly to one or more exam rooms to provide an option for a fearful animal to come into exam rooms without going through the reception area.
 - If providing this option to clients, secondary fencing around the exam room door is recommended to ensure animals cannot escape.
- Ensure the methods used are safe for clients and animals.



Category 4: Facilities

OPTIONAL

4.10 Steps are taken and SOPs are maintained to improve the olfactory experience.

Note: Not all options for this standard are featured here.

In case they become soiled with body secretions, team members that have contact with animals have a change of clothes at the practice.

- Review Fear Free Certification Program: Module 5, slide 1.21

Basic SOP Format

- **Procedure:** This is what we do and why we do it.
- **Responsible Team Members:** This is who does it.
- **Equipment/Supplies:** This is what we need to do it.
- **Procedural Steps:** This is how we do it.

SOP: Spot Cleaning of Housing

- Animals benefit from being around their own odors.
- Spot cleaning of animal housing is preferred unless the enclosure has become too soiled for this to be reasonable.
- Example: <https://www.aspcapro.org/resource/video-how-spot-clean-cat-kennels>

SOP: Prevention of Nose Blindness

- Prevent “nose blindness” in pets by using effective but gentle cleaning chemicals.
- Harsh or caustic chemicals can be hard on pets and people in the veterinary hospital.
- For one means of compliance, use an accelerated hydrogen peroxide (AHP) cleaner and disinfectant formulated for veterinary use. When used as directed, AHP is effective against pathogens while being gentler for pets, people, and the environment. AHP helps remove biofilms that create lingering odors.
 - <https://rescuedisinfectants.com/dog-gone-nose-blind/>

Category 4: Facilities

OPTIONAL

4.11 To reduce stress for animals in a ward setting, practice has implemented at least two (2) options from the following list.

Note: Not all options to meet this standard are featured here.

Non-reflective surfaces in housing



VCA Animal Wellness Center - Maple Grove, MN

Category 4: Facilities

If bars are present on the doors of cat housing, they are horizontal

- Horizontal bars are easier to use for hanging towels for hiding and also provide unobstructed views when the cats want to look out.
- Horizontal bars should not be used for dogs as they can bite the bars and injure themselves.



Cat housing with non-reflective interiors, horizontal bars, and resting benches.
(Credit: Foto Imagery / Tim Murphy)

Category 4: Facilities

Housing has views to pleasant or neutral spaces

- Views to the outdoors are preferred but not required.
- Common areas of the practice, such as the treatment area, are **not** considered pleasant or neutral.



North Shore Veterinary Hospital - Duluth, MN

Enrichment used in housing

Examples include but are not limited to:

- Scratching surfaces for healthy cats
- Safe toys or treats for healthy animals
- Food puzzles
- Music, TV
- Blowing bubbles

Litter boxes designed for ill or compromised cats

- Provide wide, shallow litter pans so that ill or compromised cats can use them easily



Category 4: Facilities

Fear Free dimensions for patient housing

FELINE

- Many cats have traditionally been housed in small enclosures that do not allow them to express normal behaviors and assume normal postures.
- Fear Free housing prioritizes a cat's ability to move normally in a horizontal direction and may also incorporate movement in the vertical direction.
- Enlarging caging to 3' in width and at least 30" in height can suffice for healthy, short-term housing.
- Healthy cats held overnight or cats housed with litter pans need at least a 4-foot-long housing unit.¹
- Additional information about modifying existing structures can be found here:
 - <http://www.sheltermedicine.com/library/resources/cat-portals-order-information-and-instruction-for-installation>
 - <https://indoorpet.osu.edu/sites/indoorpet/files/assets/documents/CageSetUpPoster.pdf>

CANINE

- Because dogs vary in size, a variety of housing units can be provided.
- Healthy adult dogs must be able to move freely within their enclosures.
- If a dog cannot turn around without touching the sides of an enclosure, the enclosure is too small for the dog.²
- Runs in medical settings should be wide and shallow rather than deep and narrow. Wide and shallow runs give dogs more room to maneuver and allow technicians to sit inside the run with a dog.

¹ If an animal needs restraint, such as in post-surgical situations, it is acceptable to provide smaller housing as is medically appropriate for the patients. Kittens may also be housed in smaller units.

² The hospital may intentionally restrict movement when medically required, such as in post-surgical situations.



Category 4: Facilities

OPTIONAL

4.12 Practice creates calming environments using lighting and sound engineering by implementing at least one (1) option from the following list.

Note: Not all options to meet this standard are featured here.

Sound walls around exam room, treatment area, and/or wards

- During the design of the hospital, walls around these spaces can be insulated with sound batt insulation and can be constructed full height with all penetrations sealed to reduce sound leakage between spaces.³

Sound-reduction strategies (baffles, ceilings, etc.)

- High NRC (noise reduction coefficient) ceiling panels/tiles can be placed when the hospital is constructed or can be retrofitted after the hospital is in operation.⁴
- Baffles added to walls or hard ceiling surfaces to reduce sound transmission. Choose baffles with an NRC of at least 1.0.

Masking sound

Examples include but are not limited to:

- Play classical music, music made for animals, audiobooks, or use a white noise machine to mask background noises.
 - Can be delivered through central speaker systems or simple sound systems in each room
 - Should be played at low volume (softly audible from a human perspective)

³ Sound Transmission Class (STC) of sound walls should achieve 43 or greater, and the doors and windows within sound walls should achieve an STC of 35 or greater.

⁴ Choose cleanable products that achieve the noise reduction criteria. For example, ceiling products made for human hospitals are appropriate.



Category 4: Facilities

OPTIONAL

4.13 Practice prevents noise and vibration by implementing at least one (1) option from the following list.

Note: Not all options to meet this standard are featured here.

Isolate mechanical equipment

Examples include but are not limited to:

- Placing mechanical equipment such as pumps far away from animal housing and treatment areas
- Providing full-height sealed sound isolation walls around noisy mechanical equipment
- Locate rooftop air handling equipment away from animal housing areas

Prevention of unnecessary operational noise

Examples include but are not limited to:

- Put rubberized casters on chairs (rather than hard plastic ones) to prevent clattering when chairs are rolled over tile or other hard floor surfaces
- Place mats under rolling chairs to prevent noise
- Use of door sweeps and “Cushy Closer Door Cushions” (<https://cushycloser.com/>)
- Quiet, regularly maintained clippers
- Dental machine vented away from animals
- Practice team members refrain from shouting or playing loud music

Sound-dampening materials used in housing

Examples include but are not limited to:

- Manufacturers of animal housing carry quiet latches and hinges for their products
 - These can be specified with new cages or retrofitted to old ones
 - Use these products when possible to eliminate slamming and squeaking
- Insulated or solid kennel panels to prevent noise



Category 4: Facilities

OPTIONAL

4.14 Practice provides healthier environments using mechanical techniques including at least one (1) option from the following list.

Negatively pressurize ward spaces

- Be prepared to demonstrate via the building mechanical drawings that the patient wards are negatively pressurized, meaning that more air is removed than supplied.

Achieve minimum air exchanges for wards

- More air must be exchanged in patient ward spaces than in office areas to comply with accepted animal health standards.
- At a minimum, 10 to 15 air changes per hour are generally required in animal housing areas.
 - While this rule of thumb is a good start, using a **cubic foot per minute (CFM)** guideline may be more useful and create a more targeted approach:
 - Isolation wards should be exchanged at 40 CFM per animal.
 - Dog wards need 30 to 35 CFM per animal.
 - Cat cage wards need 35 to 40 CFM per animal.

External heat support provided to patients/pets as needed to maintain normothermia

- Radiant heating is used for patient comfort and is not intended to replace building heating systems.
- Radiant heating may be delivered several ways, including but not limited to:
 - air or water patient warmers
 - radiant heating pads
 - hydronic or electric heating integrated into the floor slabs
- Radiant heating may be provided to locations including but not limited to:
 - Pre- and post-anesthetic housing
 - ICU/CCU housing
 - Examination, treatment, and surgery tables, including via electric radiant heating integrated with the table
 - If using caging with built-in radiant heating, always separate the animal from direct contact with the heated surface. This can be done with a platform provided by the supplier of the heated cage. Providing this separation will safeguard against the patient overheating.
- For safety reasons, patients who are not awake, alert, and/or ambulatory should not have access to radiant heating pads or other plug-in devices.



Category 6: Culture, Training & Leadership

MANDATORY

6.1 Considerate Approach, Gentle Control, and Touch Gradient are employed by ALL practice team members during all client-patient interactions.

Considerate Approach is recognizing ALL the sensory and environmental input that a patient might experience and using this information to approach the patient in the calmest, least confrontational way possible.

Gentle Control is how the veterinary team comfortably and safely positions the patient to allow the administration of veterinary care without causing undue fear, anxiety, and stress.

Touch Gradient has two components: initiating and maintaining hands-on physical contact with a patient and administering treatments that involve contact with the body, such as injections and nail trimming, beginning with the least invasive touch as you acclimate the patient to be ready for the final administration of care.

How might this look in practice?

- Outpatient visit procedures that *can* be done in the exam room *should* be done in the exam room.
- If an animal needs to be moved from one part of the hospital to another, the practice team member should recon their route to ensure potential fear, anxiety, and stress (FAS) triggers are avoided during the move.
- Practice team members should not peer into cat carriers or reach hands out to dogs for them to sniff.

MANDATORY

6.3 As per the Fear Free Fear, Anxiety & Stress (FAS) Scale, owners of animals exhibiting behaviors consistent with a sustained FAS score equal to or greater than 4 will be counseled on rescheduling and/or providing the animal with additional support to alleviate their FAS, including but not limited to analgesia and/or sedation.

Resources include but are not limited to:

- Review concept of wants vs. needs – Module 4, slide 1.36
- Review module 7a & 7b – analgesia, sedation
- Module 8 Talking Points
- Course: Developing the Fear Free Plan of Action for Patient Care



Category 6: Culture, Training & Leadership

MANDATORY

6.4 All practice team practice members exhibit an appropriate demeanor consistent with Fear Free principles when they can be seen and/or heard by clients and animals.

How might this look in practice?

- Use “inside voices”
- Move calmly and deliberately
- Avoid large hand gestures
- Always use Considerate Approach, Gentle Control, and Touch Gradient

Resources include but are not limited to:

- Think ‘Spaw’: Fear Free Hospital Supply List

MANDATORY

6.6 The practice’s new-hire orientation process must demonstrate inclusion of Fear Free definitions and goals.

- Fear Free requires a team effort.
- Orientation and training for ALL team members must include Fear Free core concepts and skills.

Resources include but are not limited to:

- Customer Service Overview: The Fear Free Approach to Welcoming Clients and Patients to Our Practice
- Fear Free List of Must-Haves in Your Practice
- Fear Free Checklist for the Client Service Rep
- Module 8 Talking Points
- Fear Free **Open to Public** Webinars & Podcasts



Category 6: Culture, Training & Leadership

MANDATORY

6.7 SOPs for procedures that affect animals and/or clients must include Fear Free principles.

- Drafting SOPs helps practices create their Fear Free culture.
- Consider making this a team effort. Ask a few practice team members to work together to create a first draft (or review & edit an existing SOP), then review and finalize it as a group.
- SOPs can be used in New Hire Training & Orientation.
- Fear Free is not concerned with anyone's technical abilities (i.e., how to aseptically prepare for IVC placement). These SOPs should focus on what you are doing to incorporate Fear Free principles into your day-to-day activities.
- **Basic SOP Format**
 - **Procedure:** This is what we do and why we do it.
 - **Responsible Team Members:** This is who does it.
 - **Equipment/Supplies:** This is what we need to do it.
 - **Procedural Steps:** This is how we do it.
- The example on the next page provides further insight as to what Fear Free is looking for.
- Example SOPs should NOT be copied & pasted into your self-assessment.

Resources include but are not limited to:

- Fear Free Module 8
- The Vital Role of the CSRs
- Webinar: Tell Me More About SOPs!



Category 6: Culture, Training & Leadership

Example

Procedure: Cats feel safer when elevated, and the ability to hide is an important FAS management strategy for them. Unless medically contraindicated, cats staying at the practice for any length of time will be provided with both the ability to hide and/or perch in their housing.

Responsible Team Members: Primarily veterinary nurses and assistants; all practice team members should ensure compliance

Equipment/Supplies: Step stool, towel, cage curtain, cat carrier

Procedural Steps:

- Medical contraindications include patients who have been sedated, anesthetized, are being monitored for seizures or vaccine reactions, and certain trauma cases. If you have any questions or concerns about a specific case, consult with the attending veterinarian.
- Place a step stool in the back corner of the cage.
- Drape a pheromone-treated towel over the top and front of the stool. This provides a soft resting spot on top and a hiding spot underneath.
- The cat's carrier can be used in lieu of a step stool.
 - Depending on the style of carrier, a towel may still need to be draped over it to provide the ability to hide.
 - Soft-sided carriers will not provide the ability to perch but having something familiar may help prevent/alleviate the cat's FAS. A stool may be placed overtop of said carrier to provide the ability to perch.
- Cats with IV or urinary catheters will be provided with the ability to hide via a cage curtain positioned over ½ of the cage door.



Category 7: Patient Observation

MANDATORY

7.1 When an appointment is scheduled, the Emotional Medical Record (EMR) is reviewed with the client and, if applicable, other practice team members to prepare the client, patient, and practice team members for the visit.

- The EMR should be updated accordingly with each patient visit.
- If the patient has no healthcare provider preference, “unknown” or “n/a” is acceptable.

Resources include but are not limited to:

- Fear Free Emotional Medical Record
- Fear Free Pre-Visit Questionnaire
- The Fear Free Approach To Welcoming Clients To Our Practice
- Podcast: The First Line of Defense: The Fear Free Client Service Representative (CSR)
- The Vital Role of Client Services Representatives



Category 7: Patient Observation

OPTIONAL - Pre-Visit Preparation

7.3 Team members have knowledge of and provide instructions to clients on how to deliver a calm pet to the practice.

Note: Not all options to meet this standard are featured here.

New clients are provided with information regarding what to expect during their Fear Free Visit. Clients are provided with/reminded of travel recommendations.

Resources include but are not limited to:

- Fear Free Happy Homes
 - Complimentary membership required to access most content
 - 10 Things That Make Fear Free Veterinary Visits Different
 - How to Prepare for a Fear Free Veterinary Visit
 - How to Make the Trip to the Veterinary Hospital Fear Free
 - Videos
- Fear Free Customer Service Checklist
- Module 8 Talking Points
- Podcast: The First Line of Defense: The Fear Free Client Service Representative (CSR)
- The Vital Role of Client Services Representatives

Practice provides Fear Free scheduling to avoid bottle necks and even the appointment flow.

Examples include but are not limited to:

- Staggered Appointments
 - Veterinarians and veterinary technicians/nurses
 - Dr. A's appointments start at 9 a.m. and Dr. B's at 9:15 a.m. versus both having 9 a.m. appointments



Category 7: Patient Observation

OPTIONAL - Arrival at the Practice

7.4 Team members have knowledge of and demonstrate welcoming experiences consistent with the Fear Free philosophy.

Note: Not all options to meet this standard are featured here.

Patient, pet, and people interactions in reception area are managed to prevent and alleviate fear, anxiety, and stress (FAS)

- Practice team members, including client services representatives (CSRs), shall monitor the lobby environment⁵ and ensure:
 - All dogs are on leash (4-6 feet, no retractable)
 - Pheromone plug-ins are operational and pheromone-treated towels or bandanas are available
 - Animals are monitored for FAS and managed appropriately
 - Vocalizing animals are recognized and managed appropriately
 - Comfortable flooring is available
 - Cats are elevated off the floor and/or carriers are covered
 - Treats are available and offered unless medically contraindicated
 - Noise levels are minimized
 - Calming music is playing softly

Pheromones are used in reception area via diffusers and/or impregnated bandana/towel provided to patients upon arrival

- If practice is using pheromone-impregnated bandanas, it may be less FAS-provoking to have the owner place it around the dog's neck vs. a practice team member.
- The owner should be counseled to:
 - Allow the dog to sniff the bandana before it is secured around his/her neck
 - Stop if dog's FAS increases

Resources include but are not limited to:

- Module 8 Talking Points
- Checklist for the Client Services Rep
- Podcast: The First Line of Defense: The Fear Free Client Service Representative (CSR)
- The Vital Role of Client Services Representatives

⁵Adapted from Shreyer, Barrett "Environmental Management Checklist - Lobby" *Bringing Behavior in Clinical Animal Behavior Conference*, 2015



Category 7: Patient Observation

OPTIONAL - Outpatient Procedures and Experience

7.5 Team members have knowledge and demonstrate appropriate use of Fear Free methods, protocols, and procedures during outpatient care.

OPTIONAL - Inpatient & Hospitalized Patient Procedures and Experience

7.6 Team members have knowledge and demonstrate appropriate use of Fear Free methods, protocols, and procedures during inpatient care.

If a patient is struggling for a procedure:

- A dog struggling for more than three (3) seconds and a cat for more than two (2) seconds requires that the staff reposition and reassess handling techniques or overall handling plan.
- If after three (3) tries for dogs and two (2) tries for cats the patient still struggles, the procedure will be stopped, and the need for the procedure will be reassessed and the handling plan modified to prevent struggling and escalating fear, anxiety, and stress (FAS).

Resources include but are not limited to:

- Podcasts
 - Putting the “Treat Into “Treatment”: Inside the Fear Free Treat Ladder
 - The Benefits of In-Clinic Sedation in the Fear Free Practice
 - Fear Free: Beyond the Treats
- Education Library: Fear Free Handling and Restraint for Dogs and Cats
- Webinars
 - Vaccinations for the Mind: Positive Puppy Socialization
 - Fear Free: Evolving to the Hospitalized, Emergent, and Sick Patient
 - Care of Hospitalized and Boarding Patients



Category 7: Patient Observation

OPTIONAL - Client Education to Improve Patient Experience During Next Visit

7.7 Team members show knowledge and demonstrate appropriate delivery of instructions to clients regarding improving the patient's next visit.

Note: Not all options to meet this standard are featured here.

For chronic conditions/diseases where distraction is not an effective method for providing Fear Free medical care, practice recommends a DS/CCC program with a qualified team member, such as a Fear Free Certified animal trainer, other aversive-free trainer, CAAB, or DACVB.

Examples of chronic care conditions include but are not limited to:

- Otitis Externa
- Hyposensitization for Atopy
- Diabetes Mellitus
- Chemotherapy

OPTIONAL - Communication of Fear Free Tools & Techniques to Clients

7.10 Practice team members effectively communicate with owners about Fear Free throughout the visit.

Resources include but are not limited to:

- Module 8 Talking Points
- Webinar: Communicating Fear Free to Owners: Why It Matters