

Interim Guidance for Veterinary Practices Regarding COVID-19

DC Health has gathered information from the Centers for Disease Control and Prevention (CDC) and the American Veterinary Medical Association (AVMA) to create this interim guidance for veterinarians. Guidance is based on limited available data and general recommendations for zoonotic diseases. This guidance will be updated as new information becomes available.

Key Points

- While the novel coronavirus seems to have emerged from an animal source, it is now spreading from person-to-person. There is now community transmission of COVID-19 in the U.S.
- At this time, there is no evidence that companion animals, including pets, can spread COVID-19.
- COVID-19, a disease that causes flu-like symptoms in people, including mild to severe respiratory illness with fever, cough, and difficulty breathing.
- Transmission primarily occurs when there is contact with an infected person's bodily secretions, such as saliva or mucus droplets in a cough or sneeze. Transmission routes include fomites and contaminated surfaces. Smooth (non-porous) surfaces (e.g., countertops, door knobs) transmit viruses better than porous materials (e.g., paper money, pet fur).
- There are currently no antiviral drugs recommended or licensed by FDA to treat COVID-19, and there is no immunization available.

Infection Prevention Guidelines

- a. CDC - <https://www.cdc.gov/coronavirus/2019-ncov/prepare/animals.html>,
 - b. AVMA - <https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19>
 - c. DC Health - <https://coronavirus.dc.gov/>
- For all upcoming appointments, determine how you would classify pets as needing to be urgently seen, versus ones that need routine care or surgery that could possibly be delayed.
 - If a client has a pet with an urgent need for veterinary attention and the client is a case of COVID-19, asymptomatic but under in-house quarantine or sick and isolated at home, please consider how you might arrange for the pet to receive an evaluation. It is recommended that a family member or friend pick up the pet in a pet carrier if the owner cannot leave the home.

- To assess the risk level from individuals bringing pets to your facility, ask the following screening questions:
 - Are you having flu-like symptoms, such as fever, cough or shortness of breath?
 - In the last 14 days have you traveled to a high-risk area for transmission of COVID-19?
 - Have you been in close contact with anyone confirmed or being evaluated for COVID-19?
- If someone who is known to be infected with COVID-19 should contact you, the recommendation is to have a different member of the household care for the animal, if possible. The ill owner/household member should avoid contact with the pet as with other household members, including petting, snuggling, being kissed or licked and sharing food. If the ill individual must care for the pet, they should wash their hands before and after interacting with the pet and wear a facemask if one is available.
- Consider making arrangements to have clients call you from their car upon arrival, and have someone from your practice pick up the animal outside so the client does not have to come inside the practice. Discuss care measures via cell phone.
- Recommend implementing restriction of employee visitors (family, friends, and pets) to business purposes only, and limiting the number of people coming into the clinic.
- Educate your clients on the differences between the enteric coronaviruses that circulate in domestic animals, and for which we can vaccinate, and this novel coronavirus which, though it shares the same common name, is in fact something quite different.
- Even though laboratory tests for COVID-19 in animals are being developed and advertised now, there is still no epidemiological evidence that animals play a role in the transmission of this virus, nor is there evidence that they can become infected themselves. DC Health is not recommending you test pets for COVID-19 at this time; instead rule out other common causes of patient symptoms.
- Contact your state public health veterinarian (**Nivedita Ravi-Caldwell** - Nivedita.Ravi-Caldwell@dc.gov | **202-442-9143**) or state veterinarian (**Vito DelVento**, Vito.DelVento@dc.gov | **202-724-8813**) if you are seeing a new, concerning illness in a patient that has had close contact with a person with COVID-19. For general information regarding COVID-19, go to <https://coronavirus.dc.gov/>

Prevention Tips to Implement in the Veterinary Setting

Take steps to prevent the spread of disease among veterinary personnel and to/from clients by following guidelines and procedures laid out in the [National Association of State Public Health Veterinarian's Compendium of Veterinary Standard Precautions for Zoonotic Disease Prevention in Veterinary Personnel](#). While the primary focus of this resource is controlling the spread of pathogens between animals and veterinary personnel, many of its principles apply to infection control in general and following it is simply good practice.

- There is currently no vaccine to prevent COVID-19. The best way to prevent illness is to avoid being exposed to the virus and to follow strict handwashing and other hygiene protocols.
- Designate your practice/workplace as a temporary NO HANDSHAKE ZONE. Ask colleagues and clients to refrain from shaking hands.
- Practice good hygiene: Wash hands often with soap and water for at least 20 seconds, especially after using the restroom; before eating; after blowing your nose, coughing, or sneezing; and between client/patient visits.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with 60%-95% alcohol.
- Place hand sanitizer, sanitizing wipes, and tissues in all exam rooms, meeting rooms, restrooms, break rooms, and other common areas.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Cough or sneeze into your elbow or use a tissue to cover your nose and mouth, then throw the tissue into the trash can.
- COVID-19 symptoms are similar to those of influenza (e.g., fever, cough, and shortness of breath), and the current outbreak is occurring during a time of year when respiratory illnesses from influenza and other viruses, including other coronaviruses that cause the common cold, are highly prevalent. To prevent influenza and possible unnecessary evaluation for COVID-19, all persons more than 6 months old should receive an annual influenza vaccine. Vaccines are still available and effective in helping to prevent influenza.
- Ensure staff are aware of sick leave policies and are encouraged to stay home if they are ill with respiratory symptoms.
- Advise employees to check for any signs of illness before reporting to work each day and notify their supervisor if they become ill.
- Do not require a healthcare provider's note for employees who are sick with respiratory symptoms before returning to work.