



# HEALING HANDS ANIMAL CARE

Animal Hospice • Grief Support • Pet Sitting

## Initial Hospice Consultation

Date: 11/6/21

Dear {xxx} Family,

It was a pleasure to meet with you to discuss {{xxx}} quality of life. He is such a special soul, and it is clear how much you both love him. T{his/her} quality of life evaluation will help you track {xxx} aging process, medical conditions as well as assist you in determining the best time for {his/her}soul's transition.

## Determine Baseline QOL Number: 43

We are evaluating {xxx} 12 year old self in {his/her} present state.

T{his/her} will give us a baseline to work from in order to create a linear/left-brained way to judge quality of life.

<https://journeypet.com/pet-quality-of-life-scale-calculator/>

You may find these additional resources helpful to reference:

<https://journeypet.com/determining-when-is-it-time-euthanasia/>

## Track Weekly or Daily Progress with a Calendar or Journal:

Download a printable calendar or use a journal to track {xxx} weekly or daily changes. Often days tend to blend together, so t{his/her} is a good way to create a more accurate picture of {his/her} daily quality of life.

Create a number or percentage system to easily start tracking quality of life on a weekly or daily basis (your choice).

It is common to see ups and downs in senior animals; often shifting from day to day. Over time we look at the trend.

Are there more good/up days or more bad/down days? Has anything shifted in likes/dislikes/activity level?

## ANIMAL HOSPICE AND PAIN MANAGEMENT:

Our primary concern with hospice care always starts with the comfort and pain management of the animal.

We never want the animal to be enduring pain or suffering. While {xxx} tends to be more "stoic", you are very in-tune with {his/her} needs and I believe you will be able to tell if he needs additional pain management or medication adjustments.

## WHAT TO LOOK FOR: SIGNS of PAIN/DISCOMFORT

- Panting when resting (will seem different from regular panting)
- Restless/unable to settle/getting up and laying down multiple times, unable to fully relax body
- "Tentative" when attempting to lay down
- Diminished appetite or interest in treats
- Irritability/sudden change in personality

***At the time of t{his/her} write-up {xxx} does NOT appear to be in pain or discomfort. He is tolerating {his/her} medications well.***

## PERSONALITY:

{xxx} is 11, turning 12 on 12/13/21.

{xxx} is a cognitively aware, happy and social dog, communicates with {his/her} bright eyes and smiles, talks, begs for treats, wags {his/her} tail (even with tail droop), LOVES affection, hugs, pets, time with family and is social. Recent "good" days have included him getting up on {his/her} own (without help) and even using the ramp to urinate. Linda also saw him squat to poop on {his/her} own. {xxx} has always been treat and food motivated. He loves barking at yard intruders (wild turkeys, etc), barking at neighbor dogs, and being the family protector. He likes to watch {his/her} yard from the deck. {xxx} has a very thick hair coat, and feels too warm in areas of the house, so prefers cooler areas like the deck or near door to deck. Medications may also make him pant and feel warmer. He becomes sullen when it's dreary and rainy outside. He is very easy to perform medical procedures on (hygiene shave, skin cleaning, etc).

#### CURRENT PHYSICAL CONDITIONS & MEDICAL HISTORY:

- {xxx} has age-related hearing loss (moderately but not fully deaf).
- Diminished hind leg mobility, arthritis, some mild knuckling noted (no scrapes on paws).
- Neurological component to reduced mobility, tail droops but still wags, cannot always feel eliminations. Will poop laying down, which causes some degree of emotional distress for him. Once cleaned, he resumes {his/her} easy-going personality.
- History of IBS.
- Full body skin infection most likely due to moisture on skin and bacterial overgrowth. Antibiotics and Metronidazole (to intercept ABX related Diarrhea) prescribed.
- Drinks a lot of water (most likely due to medications), we discussed {his/her} more recent need to urinate frequently, including late night/early morning urination.

#### RECOMMENDATIONS:

- Try diapers during the night, to be removed in the AM.
- High density foam toddler bed for extra support (one for deck and one for dining area may be nice)
- Printed Medication chart and Mon-Sun pill containers to make medication routine more streamlined as well as allowing all family members to assist as needed, so Bill can take a break from being primary caregiver.

#### CURRENT VET & MEDICATIONS:

##### **Animal Hospice of Sebastopol: 707.823.3250**

- Tramadol 150mg (3 tablets) 3-4x/day (pain, can cause thirst, panting and sedation)
- Gabapentin 600mg (2 capsules) 3x/day (nerve pain, slight anti inflammatory component, causes sedation)
- Galliprant 100mg 1x/day (NSAID, monitor kidney & liver enzyme levels)
- Short Term: Antibiotics and Metronidazole for skin infection

#### {xxx} Favorite Things:

- Visual Stimulation, likes to bark
- Being with {his/her} people! Meeting new friends.
- FOOD & treats, likes CET chews, begs at dinner table
- LOVES being scratched behind ears (will moan in elation)
- Loves affection, hugs and pets

#### Hard Lines for quality of life to watch for:

- Cannot manage pain/suffering
- No longer enjoys favorite things (above)
- Stops eating/drinking
- Stops enjoying affection, or letting William play with {his/her} tongue.
- Sense of {his/her} independence or desire to protect is diminished.

#### End of Life Choices:

- Our hospice goal is always to avoid an emergency situation, and make the decision for {xxx} transition prior to t{his/her} point. T{his/her} will be done through careful monitoring of {xxx} quality of life.
- Consider as a family in-home vs. in-office euthanasia (or even a neutral location).

- An appointment may need to be made for house call vet euthanasia. Please note: while making an end of life appointment may feel awkward, it allows us to prepare our hearts and minds, prioritize all of those special “bucket list” items and is also a solid way to avoid an emergency. You will need to specify with the vet or clinic if you prefer: burial, private cremation or group cremation. With private cremation, the ashes are returned in a box, with a nameplate. You can also ask to keep fur if you’d like. There are many memorial options available online for jewelry or keepsakes, that can be made from a photo of {his/her} nose, paw print and ashes.

- Cara is available to provide grief support as well as attend the end of life appointment if desired.

[- 10 Tips to Healing Early Grief \(PDF\)](#)

Please text me regular updates and let me know how I may be of assistance in your journey. I tell pet parents to trust your own intuition. When there is a shift, it is felt and usually fairly noticeable (we talked about how you will see it in {his/her} eyes). You have a special bond with him and trust that you understand {his/her} communication/language. You may call on me as an extra set of eyes to help you make the decision when the time comes.

#### FAMILY GOALS:

Create {xxx} Bucket List!

Family movie nights in the dining room?

More time with William and Derek? :)

Any questions or points I forgot to add? This is a working file that can be edited, updated and even shared with your Veterinary Care Team. My hope is that it helps you feel organized and more clear about {xxx} quality of life.

Enjoy your special guy {xxx}! He has already made an impression on my heart.

I'm always a text message away.

Warmly, Cara DeLaRosa-Harrison, CPLP

*Certified Pet Loss & Grief Professional*

**(707) 331-4841**

#### **Healing Hands Animal Care**

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