



Royal Animal Hospital – FAQ's

Preventative Health & Nutrition

1. When can we start our puppy's vaccinations? Immunocompetent (fit and healthy) puppies can be vaccinated in one of two ways depending on the local situation and individual factors:

Nobivac DHPPiL at 8 weeks or older and repeated every 3-4 weeks until 16 weeks of age.

Earlier vaccination can be considered in certain situations dependant on breed, environmental risks and health status. An individual decision is made for each puppy.

2. Does my dog need vaccinating once it's had its "puppy jabs"? Yes. The primary vaccination course does not give lifelong protection and hence annual boosters are necessary.

3. When should I vaccinate against Kennel cough? Generally we recommend vaccination at least 2 weeks prior to your dog going into kennels. This still holds true although we can now consider annual regular vaccinations as the vaccine lasts this long and means your dog can be put into kennels at short notice.

4. How do I test for Feline Leukaemia Virus and Feline Immunodeficiency Virus? The in-house test gives us initial screening results and involves taking a small blood sample which can be tested virtually as you wait provided we are given notice of the test. If we have any concerns, especially where a result is positive, we would strongly recommend further testing at an external specialist laboratory which utilizes a different testing method.

Diagnostics

1. How much help can a laboratory on site be? It is obviously of great importance in emergency situations but also invaluable for checking body functions prior to anaesthesia or for screening purposes especially in older patients. A laboratory on site provides results within minutes in certain circumstances.

2. Why do you x-ray and ultrasound some patients? Both x-ray and ultrasound modalities allow us to visualise the internal structures and organs of the body. They work in very different ways, each 'preferring' slightly different tissues as they provide an image for us – e.g. fluid build-up tends to obscure detail for x-rays whilst enhances our images for ultrasound. Thus, very different levels of information is gained depending on what is being studied and which modality is used e.g. a chest x-ray will gives us a great deal of information about the lungs but really only give us the shape and size of the heart and not what goes on

inside it. An ultrasound scan however will give us a great deal of detail on what the heart is doing and how well it is working whilst no information on the lungs is gained. For the best chance of a full diagnosis both systems should be utilised.

3. How does the ultrasound help diagnose tumours? Relatively accurate diagnosis of certain tumours can be achieved via specific testing of samples taken whilst guided by the ultrasound scanner's picture. These samples are usually taken using special needles and sampling can often be carried out without the need for full anaesthesia even for internal lumps.

4. Apart from looking down the bowel what can you do with an endoscope? Not only can we visualise the inside of the gut but, by using specific instruments, we can take biopsies or remove foreign material without the need for a major surgical operation. This means that the pet recovers more quickly without the risks inherent in any form of abdominal surgery and with trauma of a large incision. The bronchoscope used to look down the airways can help with more accurate and safer sampling of fluids or tissues within the lungs, often taking much less time and much less anaesthetic. Another major advantage is the ability to retrieve some foreign bodies such as an inhaled grass-seed from within the airways, avoiding open chest surgery, thus greatly reducing risks.

5. Why x-ray teeth? A few straightforward radiographs can provide a huge amount of precious information leading to knowing when to keep or remove teeth; when only medical treatment is needed and not surgical.