guidelines for
Veterinary Hospice Care

MARCH 2007

AMERICAN VETERINARY MEDICAL ASSOCIATION
The following policy is current as of March 2007. AVMA policies are reviewed and updated on a regular basis, so please visit the AVMA’s website at www.avma.org/issues/policy/default.asp for the most current version.
GUIDELINES FOR VETERINARY HOSPICE CARE

The American Veterinary Medical Association recognizes that clients facing terminal illness in companion animals may desire veterinary hospice care for their animals. As offered within the context of veterinary practice, and as consistent with veterinary practice acts, veterinary hospice gives clients time to make decisions regarding a terminal companion animal and to prepare for the pending death of the animal. The comfort of the animal must always be considered when veterinary hospice care is provided. As is the case in human hospice programs, patients must have a terminal illness with a short life expectancy. The veterinary hospice team consists of the veterinarian and trained staff who provide expertise in palliative care and pain control for such terminally ill animals. Maximizing the benefits of veterinary hospice requires that all family/household members participate in the care of the patient. Veterinarians and their staff also benefit from veterinary hospice by assisting in the respectful closure of each unique human-animal bond (e.g., owner-companion animal and doctor-patient).

Hospice services provided by veterinarians are time consuming and require a considerable commitment to the medical needs of the patient and to the emotional needs of the client. A number of issues should be addressed when veterinary hospice care is provided.

♦ Family/household dynamics are a consideration when deciding whether veterinary hospice care is appropriate. Veterinarians should counsel clients regarding the severity of their animal’s illness or condition and the expected outcome. Clients also should be informed of their responsibilities as well as the services to be provided by the veterinarian.

♦ As with any service, fees should be discussed and agreed upon before hospice service is provided.
Patients should be kept as free from pain as possible and in a sanitary state. Appropriate analgesics may be needed, and, subject to applicable practice acts, the veterinary hospice team should be prepared to train clients in the administration of drugs and other necessary routine care. Clients and caregivers may need to be instructed in the assessment of patients’ pain levels and stages of organ system failure. Veterinarians should have contact with clients and patients on a regular and frequent basis. Veterinarians should recognize that this is an emotional and stressful time for clients of terminally ill companion animals and, despite training by the veterinary hospice team, clients may not be able to perform necessary medical treatments in the home setting. Regular visits will allow veterinarians and their staff to assess how clients are coping with treatment protocols.

The veterinary practice must have an appropriate Drug Enforcement Administration and state license, and keep records of all drugs and supplies dispensed.

Veterinary staff should be part of the veterinary hospice team. Insurance coverage for staff must be considered, and should include liability and travel coverage. The latter is important if staff members will be traveling to and from the client’s residence.

Clients should be advised, preferably before the animal dies, of their options concerning care of the animal’s remains.

In the case of home deaths, clients may need confirmation of death through absence of vital signs or pronouncement of death by the attending veterinarian.

Euthanasia service should be available if the client and veterinarian at any time believe this service is appropriate. If clients are to be present, they should be informed of the events involved in euthanasia prior to their occurrence. Clients may need time alone with the deceased companion animal.
Optimally, veterinary care should be available at all times. This includes after-hours referral for emergency care or advice.

Records must be kept of all interactions with patients and clients, including visits, patient observations, treatments, telephone conversations, and instructions.

A team approach, encompassing professionals in veterinary medicine and psychosocial care, is the ideal. The veterinary hospice team should be prepared to recommend that clients contact licensed mental health professionals who are trained and experienced in grief and bereavement.