FeLV Testing and Management

Purpose

This document is designed to provide guidelines for Feline Leukemia Virus (FeLV) testing and management for cats entering the shelter.

Testing Policy and Overview

Screening all cats for FIV and FeLV, which have a low prevalence in healthy cats, results in a high rate of false positive test results. In turn, this complicates decision-making based on positive tests. For this reason, testing will be limited to felines with consistent clinical signs or significant risk factors for infection. Selective testing of only ill or higher-risk cats increases the likelihood that any positive results obtained are accurate and correlate with true infection.

An exception to testing only higher risk or symptomatic cats is made for cats that require testing as part of a legal case; have an elevated disease transmission risk in the shelter due to co-housing with unfamiliar cats; or who require advanced or extended care such that a broader minimum diagnostic database is valuable.

Judicious retroviral testing relies on adherence to proper infection control practices to mitigate any risk of transmission in the rare situation in which an infected cat is not identified. Please refer to separate guidelines for sanitation and fomite control protocols in the shelter and in foster homes.

Criteria for Testing

The following criteria provide a framework for when FeLV testing is performed for cats and kittens in the shelter's care.

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Increased risk of infection	Known or suspected exposure	 Positive housemate Evidence of bite wounds (fresh or scarring) from another cat
		Positive queen or littermate
	Consistent clinical signs	Lethargy
		Pale mucous membranes
		Enlarged lymph nodes
		Severe gingivitis
		 URI in an adult free-roaming cat
		 Persistent or recurrent disease
	Coming from a high-risk environment	 Hoarding situation (as defined by the personnel engaging with the client)
		Other overcrowding situations in which cats were co-mingled
Necessary minimum medical database	Legal case	
	Enhanced medical resources required	 Specialty referral (in-house or external)
		 Prolonged duration of treatment (i.e., ringworm)
Elevated risk of in-shelter transmission	Introduced to unfamiliar cats	Pairing singleton kittens
		Surrogate queens
		Communal habitats
Preparation for transfer	Negative test results required by the destination organization or state	

FeLV Screening Recommended

This sample protocol was created by ASPCA® Shelter Medicine Services. Contact <u>sheltermedicine@aspca.org</u> for further information.

No Retroviral Screening Recommended

• All cats without the risk factors or circumstances outlined above.

Decision-Making Based on Test Results

Test Interpretation

The infection status and pathway for cats testing positive for FeLV will depend on their clinical signs or confirmatory testing results.

Pathway Planning

• See Figure 1 for an FeLV pathway planning flowchart.

Figure 1: Pathway Planning for FeLV-Positive Cats



 Euthanasia is frequently the most appropriate pathway for progressively infected cats if any other comorbidities are present.

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- Common conditions like upper respiratory tract infection or dental disease often become significant medical concerns because they are often challenging to successfully treat or frequently recur in progressively infected cats.
- Cats with progressive FeLV infection are at particular risk for prolonged lengths of stay prior to adoption and have shortened life spans. As such, even comorbidities unrelated to FeLV infection (e.g., behavioral compromise) may be challenging to humanely treat or manage for these cats.
- Skipping quantitative PCR testing may be appropriate in certain circumstances when
 reduction in length of stay is imperative based on individual circumstances or due to shelter
 capacity concerns. When quantitative PCR testing is not performed, the pathway for
 progressively infected cats should be followed.
- If their quality of life can be sufficiently maintained, cats with a pathway plan of euthanasia who are not under the shelter's ownership (e.g., due to a legal hold) should receive supportive care and treatment for concurrent medical concerns until the hold is released. If an appropriate quality of life cannot be maintained, legal approval for euthanasia should be pursued.

Infection control	 Use the normal sanitation protocol and PPE level for a healthy cat or as per any comorbidities Handle prior to all other cats in care (except for healthy neonatal kittens) whenever possible 	
In-shelter housing	 House in the same ward as non-contagious cats If an infectious comorbidity is present, isolate separately from other infected cats Do not co-house with unfamiliar cats Okay to co-house with other cats from the same home with the same FeLV testing 	
	 status if otherwise compatible Separate litters by FeLV testing status when possible If one kitten is an outlier in their testing status, assess the benefits of transmission risk vs. the behavioral impact on a case-by-case basis - default to placement as a singleton in an enriched foster home when possible 	
Foster placement	 Encourage foster placement when possible If fosters have resident cats, inform them of the transmission risk and advise that foster cats should always be separated 	
Adoption process	 Provide adopters with an FeLV disclosure specific to their testing status or infection type (progressive vs. regressive/discordant) If adopters have resident cats, counsel them on the transmission risk and encourage them to consult with their regular veterinarian. The risk to resident cats is reduced if the cats share the same FeLV status, if resident cats are fully vaccinated against FeLV, or if the adopted cat has a regressive infection. However, the adopter's veterinarian is best suited to gauge the level of risk. 	

Care for FeLV Positive Cats (regardless of confirmatory testing results)