Raising Teeny Tiny Kittens

The Orphans



Street Cat Rescue 2750 Faithfull Ave #108 Saskatoon, SK, S7K 6M6 306 955-7228 contact@streetcat.ca

THE BASICS

Rescued orphaned kittens should be assessed by a veterinarian as soon as possible.

The basic principles of kitten care are:

- Keep them warm
- Keep them fed and well hydrated
- Keep them clean and dry
- Keep them safe
- Monitor, monitor, monitor: normal pee and poop

Despite our best efforts at providing emergency care, proper nutrition, attention to cleanliness, medical treatment and detailed record keeping, some kittens will not survive.

There are many factors that contribute to the death of orphan kittens. Kittens born on the street are often subject to many influences that can reduce their chances of survival. They are often born to malnourished or very ill mothers and their risk of congenital or inherited defects is heightened. Kittens that are poorly nourished and in a cold environment have few defences against disease and infection.

The death of a kitten can be a very disturbing experience for the foster who has been caring for the kitten. It is difficult to understand and accept that some kittens will not survive. Sometimes we can only surround them with warmth and care and make their passing as comfortable as possible.

In the event of an emergency:

Please take the cat to the Small Animal Clinic, Western College of Veterinary Medicine. 52 Campus Dr, Saskatoon, SK. Phone: 306-966-7126

BASIC SUPPLIES

Healthy and Clean	Warm and cozy	Feeding and Hydration
_ Monitoring sheet	_ Incubator	_ Kitten formula (KMR)
_ Digital scale	 Heating pad with cover (no automatic shut off) 	_ Miracle Nipples (mini)
_ Probiotic (fortiflora)	_ Snuggle safe disks	_ Miracle O-ring syringes (3cc and 10cc)
_ Corn syrup	_ Cat carrier (top opening best)	_ Blender bottle/protein shake bottle (to eliminate clumps and to store formula)
_ Unflavoured pedialyte	_ Baby blankets	 Warming system for formula (do not use microwave)
_ Shallow litter box	Micro fleece baby blankets	High calorie weaning food/baby food
_ Non clumping litter	_ Stuffed toys (snuggle kitty)	_ Shallow food dishes
Tissues, toilet paper, cotton pads, washcloths, baby wipes	_ Play pen/kitten tent	* When kittens are older, may use the Miracle Nipples on the PET AG bottle kit
_ Wipe warmer		
_ Soft toothbrush		
_ Cleaning supplies		
_ Dish soap (not antibacterial)		

WARMTH AND FIRST AID

Warmth:

- If kitten feels cold, warm immediately and gently
- If outside: skin to skin is the best incubator. Place the kitten near the core of your body (e.g. an armpit works well)
- If inside: place kitten into the incubator as soon as possible, warm slowly and gradually
- Incubator settings:
 - 0-1 week: 30-32 C; relative humidity (RH): 60%
 - o 1-2 weeks: 28-30 C; RH: 55-60%
 - 2-3 weeks: 26-28 C; RH: 50-55%
 - o 3+ weeks: gradually wean from incubator to heating pad

DO NOT FEED KITTEN FORMULA UNTIL KITTEN IS WARM!

Kittens cannot digest food when they are cold and feeding formula at this time may kill the kitten.

You may, however, feed the kitten a mixture of water and sugar mixed in equal amounts (0.01 ml by syringe or dropper) or rub a few drops of corn syrup on their gums or under their tongue every 15-20 minutes.

Kittens should be kept in an incubator with a cozy blanket.

Isolate completely from all other animals.

- Change bedding daily
- After 3 weeks of age, kittens can be weaned from the incubator. Incubator setting can be gradually lower to room temperature.
- Normal rectal temperature for newborns is 35.5-37 degrees Celsius; normal temperatures for kittens 30 days or older is 37.8-38.6 degrees Celsius
- Seek veterinarian advice for taking rectal temperatures

FEEDING (HYDRATION)

Kittens must be fed KMR brand kitten formula.

Formula will be available at the shelter and/or most veterinarians will have some in stock. Formula is available in powdered or liquid form.

DO NOT use cow's milk or other milk supplements (including products found in the grocery store labelled as 'cat milk').

Small or weak kittens do best if they are fed every 2-3 hours for the first 4-5 days (see feeding chart).

If they are unable to take the amount of formula recommended for each feeding (see included feeding chart), the number of feedings should be increased and the amount of formula decreased at each feeding.

Formula intake is limited by the size of the stomach. It is very important not to under or over feed the kitten.

Feeding the Kitten:

The Miracle nursing system is available at the adoption centre. It includes: the Miracle nipples and Miracle O-ring syringes.

CAUTION: regardless of feeding method, ensure the formula is not forced too fast or given in too large an amount.

Formula should be at 36-37 degrees Celsius. At this temperature, the formula should feel slightly warm on the wrist. Use a mug or bowl of hot water to warm the syringes. DO NOT microwave formula.

Place the kitten on its stomach to syringe feed, head slightly elevated and neck extended to prevent the kitten from choking. This is the position it would be in if nursing from its mother.

The syringe is designed to allow the kitten to nurse without air going into the stomach.

If kitten is nursing well, you can encourage suckling by maintaining a slight pull on the syringe.

NEVER force feed the syringe.

You may see bubbles forming around the kitten's mouth when it is full, and the tummy becomes rounded and pear shaped.

ALWAYS burp the kitten after each feeding – similar to how you would burp a baby. Kittens can have their breathing compromised from too much gas formation in their stomach.

Preparing to Wean:

When the kitten has reached 3 weeks of age, if the kitten is stable, you can start to mix Hill's A-D Veterinary Food or Royal Canin Recovery to the formula mixture. Start slowly by mixing ¼ of the canned mixture to ¾ KMR. Monitor kitten response to ensure they are tolerating it. These formulas are designed for tube feeding and/or nursing with a syringe. Gradually increase the formula to 50/50. At this point, kitten can be introduced to the slurry in a dish, usually around 4-6 weeks of age.

Hill's A-D Diet and Royal Canin Recovery are available at the adoption centre.

Maintaining cleanliness during feeding:

Feeding supplies should be kept scrupulously clean, ensure they are well cleaned and rinsed after each feeding.

Wash hands thoroughly before and after feeding kittens.

If caring for more than one kitten, wash hands between each kitten.

Surgical gloves may be used but should be changed and discarded after each feeding.

Keep an apron or large T-shirt in the kitten room. Put it on before feeding and remove/leave in the room after feeding. Wash frequently to prevent transference of bacteria and viruses.

Stimulation for Peeing and Pooping:

There is one more important aspect to the feeding routine that must never be overlooked.

THE KITTEN MUST BE STIMULATED TO PEE AND POOP AFTER EACH MEAL.

Massaging the kitten's anogenital area for 60 seconds with a warm/damp tissue or toilet paper (simulating a mother cat's tongue) will provide the necessary stimulation.

Kittens should urinate with each stimulation but will probably poop once or twice a day. Not pooping for 24-48 hours can be cause for concern.

It will be necessary to stimulate the kitten after each meal until the kitten can eliminate on its own, usually at 3-4 weeks of age.

When the kitten has reached 3 weeks of age, you can begin introducing the kitten to a litter box (with non clumping litter).

Feeding Problems:

The two most common feeding problems are overfeeding and underfeeding.

Overfeeding:

Overfeeding can cause serious health complications in a new born kitten.

Their kidneys have very limited capacity and cannot handle excessive amounts of fluid.

Overloading can cause diarrhea and diarrhea causes dehydration.

Healthy kitten poo should be formed and brownish in colour.

- Loose yellowish poop is a sign of mild overfeeding.
- Greenish poop is a sign that food is passing too quickly through the kitten's system.
- Greyish poop with a fowl odor may indicate poor digestion of formula and is the most serious form of diarrhea.

Consult with a veterinarian as soon as you are aware of an overfeeding condition. Make sure you have calculated the correct amount of formula for each feeding. The veterinarian may suggest diluting the formula, giving medication (e.g. antibiotic) or the addition of Pedialyte to the formula.

KITTENS WITH GREY OR WHITE POOP MUST GO TO A VETERINARIAN IMMEDIATELY!

Underfeeding:

Underfeeding is life threatening to a new born kitten.

An underfed kitten is restless and cries a lot, it will eventually become lethargic and listless. Underfeeding a kitten will result in dehydration and the kitten will become chilled. A kitten that is chilled will have to be rewarmed and rehydrated if it is to survive.

To be sure you are feeding the correct amount of formula, refer to the included kitten feeding chart.

KEEP ACCURATE RECORDS OF THE KITTEN'S WEIGHT AND TEMPERATURE.

A normal kitten is 90-100 grams at birth but some orphans may be as low as 40-50 grams.

The kitten should gain weight steadily for the first 7 days (7-12 grams per day). They should double their weight by day 7 and triple by 21 days (males may gain weight faster).

Kittens should be weighed daily for the first 4 weeks and then, if stable, every 3 days. If any changes are observed or the kitten becomes ill, continue daily weighing.

CLEANLINESS AND AVOIDING DISEASE

Orphaned kittens are very vulnerable to infectious diseases and, when sick, pose a risk to all other animals around them.

KEEP KITTENS AWAY FROM OTHER ANIMALS FOR 10 DAYS AFTER THEY HAVE RECEIVED THEIR FIRST VACCINATION.

PRACTICE GOOD DISEASE CONTROL.

GOOD HAND WASHING PRACTICES ARE THE GOLD STANDARD.

The most common cause of death in orphaned kittens is infectious disease.

The factors that can predispose a kitten to infection include:

- Exposure to infectious organisms (e.g. viruses, bacteria and parasites)
- Lack of colostral antibodies
- Stress from poor nutrition
- Stress from temperature extremes

Most infectious diseases are extremely contagious and easily spread from one kitten to another.

They can be spread by direct contact, eye or nasal discharge, contaminated litter, food/water bowls, human hands/clothing and some by airborne droplets.

Common infections include:

- Panleukopenia virus (feline distemper)
- Feline calicivirus
- Feline corona viruses
- Feline herpes virus
- Feline infectious peritonitis
- Parasitic infections (worms, ear mites)
- Fungal infections (ring worm)
- A variety of upper respiratory infections
- Feline leukemia
- FIV

Ideally the kittens will have consumed colostrum from their mother's milk before they were orphaned. This is usually produced within the first 24-36 hours after birth.

- Significant immunity is determined by the mother's immune state, for example, if she has not been immunized against certain diseases, there is no protection for the kitten.
- Antibodies from mom are temporary (some kittens may need deworming or immunization earlier, this will be determined by a veterinarian).

Follow the attached daily monitoring chart to identify early signs and symptoms of infectious disease. Example:

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEIGHT	gm	gm	gm	gm	gm	gm	gm
FEEDINGS Amount	ml	ml	ml	ml	ml	ml	ml
# of feedings/day							
WARMTH Heating pad/lamp on?	V	1	4	V	√ /	- V	V
Kitten feels warm?	V	V	4	4	V	V	
POOPS Stimulated after each feeding?	-	/	4	V	√	/	√
Colour							
Consistency							
# of poops							
HYDRATION Checked skin turgor?	V	V	√	V	V	V	V
Are gums pink, moist and slippery?	V	V	/	/		/	✓
# of pees							
Colour of pee							
CLEANING Burn Bath	V	V	√	· /	V	V	V
Ears and eyes cleaned and check for discharge?	V	V	√	V	√	V	V
Checked for skin irritation and parasites?	· /	V	√		V	√	√
WARNING SIGNS Checked for warning signs?	w.	V	V	w.	W.	W.	
Warning signs include: Sneezing; coughing; gagging; wh	eezing; lethargy; di	arrhea; straining to	pee/poop; twitch	ing muscles; no/dec	reased appetite; h	eavy/rapid breathin	ng.
If wor	ning signs are pres	ent, kitten require	s veterinarian care	e. Bring monitoring	sheets to the appo	intment.	

Examine the kitten carefully and look for the following indicators:

- Matted hair
- Diarrhea
- Patches of missing hair
- Discharge from ears or nose
- Evidence of parasites (worms in poop)
- Ear mites (dark brown waxy discharge in ear)
- Fungal skin infection or other skin conditions (red skin, irritated skin, missing fur)

KEEP KITTENS AND ENVIRONMENT CLEAN

LOVE AND ATTENTION

For an orphaned kitten, emotional and physical bonding to their foster is as essential as food and warmth. Hand raised kittens have a much deeper bond to their humans and are highly loyal, intelligent and affectionate.

Handle the kitten often, petting it and letting it snuggle.

As the kitten grows, you will be surprised to see how early cuddle activity will remain a basic instinct.

A variety of toys and play time with the kitten is also very important: it will help them develop motor skills and strengthen the bond to you.

6-8 week-old kittens who are healthy, have been tested for feline leukemia and FIV, and have received their first vaccinations (10 days post vaccine), can then be gradually integrated into the home where they may interact with other cats and dogs under strict supervision.

Fostering teeny tiny kittens is a labour of love. It is also an incredibly rewarding and educational experience. Enjoy!

THE SCOOP ON POOP

Colour	Description	Required actions
Brown	Healthy	Be happy
White to grey	Very abnormal. Usually indicates severe infection. KITTEN AT RISK OF DYING.	Very abnormal. Needs immediate care.
Mucousy	Yellowish to clear slimy substance. Could indicate bowel irritation.	Very abnormal. Needs immediate care.
Black	True dark black colour. Could indicate bleeding high in bowel.	Severe sign, immediate attention required.
Bloody	Obvious red blood streaks seen in the poop. Could indicate active disease.	Severe sign, immediate attention required.
Orange	Too much bile in the poop.	Seek medical advice.
Yellow	May be related to a bacterial imbalance in the bowel or diarrhea.	Seek medical advice.

Consistency	Description	Required Actions
Firm and formed	Normal	Ве һарру.
Squirts	Watery fluid squirts out of the rectum. KITTEN AT RISK OF DYING.	Very abnormal. Needs immediate care.
Liquid	Fluid seeps out of the rectum, thin consistency, may be mucousy. Kitten is severely at risk.	Severe sign, immediate attention required.
Cow Patty	Not formed but thick enough that it falls into a patty shape. Kitten at significant risk.	Severe sign, immediate attention required.
Toothpaste	Has a somewhat tubular form but falls apart once touched.	Abnormal. Seek medical advice.
Dry and hard	Abnormal, may indicate dehydration.	Seek medical advice.
Formed but soft	Low range of normal, watch and monitor carefully.	Seek medical advice if it does not improve.

THE KEY TO PEE

Colour	Description	Required Actions	
Pale Yellow	Dilute Urine Usually indicates excellent hydration.	Ве һарру.	
Light Yellow	Mildly dilute urine. Indicates adequate body hydration.	No action required.	
Yellow	Mildly concentrated urine.	Monitor closely. If there are any other signs of dehydration, seek care immediately.	
Almost Clear	Severely dilute urine. Risk of over hydration.	Seek medical attention.	
Intense Yellow	Concentrated urine. Kitten is getting dehydrated.	Seek immediate care.	
Dark yellow/brown	Extreme dehydration or bilirubin in urine. REALLY BAD.	Severe sign. Needs immediate care.	
Dark orange/red Kitten is severely at risk.		Severe sign. Needs immediate care.	

Skin Turgor (your guide to hydration)

This may sound intimidating, but it is not.

Hydration basically indicates how much water we have in our body.

To understand the basic concept, pull up on your own skin, the skin should snap right back down. Skin turgor (how well it snaps back) indicates the level of hydration.

The kitten's mouth can also be examined to assess hydration. Normal should be pink, moist and slippery. Pale, tacky membranes indicate dehydration.

Checking hydration:

Grasp the kitten's skin at the base of the neck, between the shoulder blades, and pinch and pull up gently.

Action	Indicator and Actions
Immediate snap back	Excellent hydration.
Quick but not immediate snap back	Hydrated.
Snap back within one second	Adequate hydration. If other signs of dehydration exist, animal may be at risk. Monitor closely.
Snap back within 1-3 seconds	Dehydrated. Needs immediate attention.
Skin stands up on its own	Severe dehydration. Seek URGENT care.

MONITORING THE KITTENS/DEVELOPMENTAL MILESTONES

	What is Normal?	Something is Wrong!
Weight	Birth weight approx. 100g They gain 7-10% birthweight each day (that should be 7-12g/day) Weight doubles by 2 weeks	Underweight for age Not gaining weight
Attitude	Bright, alert and responsive (BAR) Hardly cries	Lethargic and unresponsive Cries a lot
Body Condition	Plump and round (0-6 weeks) Symmetrical body and limbs	Thin body condition, taut over extended abdomen (0-6 weeks) Asymmetry
Coat Condition	Hair shiny and free of debris	Hair loss, skin irritation, cuts, hair stained with poop
Muscle Tone	Strong	Weak and flaccid
Rectal Temperature	0-2 week, 35.5-37C 2-4 weeks, 36-37.5C 4+ weeks, 37.8-38.6C	0-2 weeks, anything below 35.5 is abnormal 4+ weeks anything above 38.6 may be a fever
Heart Rate	220-260 beats/min	Slow or irregular heart rate, in chilled kittens heart rate will slow down
Respiratory Rate	Birth: 10-18 BPM (breaths per minute) After 1 week: 16-22BPM	Laboured breathing (slower or faster)
Reflexes	0-14 days: rooting and suckle reflex 0-38 days: elimination reflex 0-7 days: gag reflex 3-17 days: startle reflex 6-8 days: shiver reflex	Weak, fading kittens will have diminished reflexes Note: if chilled, newborn kitten do not shiver
Mouth	Palate closed 2-3 weeks: incisor 1 and 2 erupt 3-4 weeks: incisor 3 and canines erupt 4-5 weeks: lower pre molar erupt 5-6 weeks: upper pre molar erupt	Cleft palate
Mucus Membranes	Pink, moist and slippery	Dark red, dry, tacky, pale
Eyes and Ears	5-14 days: eyes open 6-17 days: ears open 4-6 weeks: iris colour and normal vision	Swelling, discharge or pain around area
Abdomen	Slightly plump and enlarges after nursing 2-4 days umbilical stump falls off	Distended and painful with excessive crying Redness, pain and/or swelling around umbilicus
Anus Genitals	Present and evident	Red, swollen; Yellow or green discharge; Not present or evident
Pee	Dilute yellow 3-4 weeks: urinating on their own	Dark yellow or bloody
Gastro- intestinal	Responsive to nursing Interested in solid food at 3-4 weeks Eating dry food and wet food on their own by 8 weeks	Unresponsive and weak Poor appetite Vomiting and/or diarrhea
Movement	1-10 days: fore limb support (belly crawl) 4 days after belly crawl: some hind limb support; 16 days: walking; 21 days: normal gait	

BABY CAT - PHYSICAL AND BEHAVIOURAL MILESTONES

	Physical Milestones	Behavioral Milestones
Week 1	- cannot regulate body temp for several weeks - must maintain a warm environment, they snuggle with mom and litter mates - grooming by mom is critical to bonding: mom must also stimulate their anogenital region to allow them to pee and poop - nursing provides essential nutrients as well as colostrum and milk immunoglobulins to build a healthy immune system as well as intestinal health - kittens will call to mom (we will not be able to hear all their cries, but mom can) kittens cry at an ultrasonic range	 kittens move towards warmth they can identify mom accurately they purr as early as 2 days they start to respond to sound by 5 days
Week 2	- they gain in strength, sensory and motor skills - they start to belly crawl - their eyes open at 5-14 days (on average): they can only see very blurry images - ears start to unfold, increasing their ability to hear - the sense of smell improves	- they respond to sound by 10 days; they respond to mom's commands by 14 days - they recognize distinct odours and may hiss at unfamiliar smells - they test out their wobbly legs and start to explore - they start to relate to litter mates, sniffing and pawing - they may start to groom themselves and litter mates
Week 3	- they continue to develop motor skills and senses - they are better able to regulate temperature - they start to walk - vision improves rapidly - they start to wean/the first canine teeth appear - they start to pee and poo on their own (3-5 weeks)	 they snuggle less with mom and litter mates they identify and follow objects by sight social play and play fighting begin: life is a party litter box (with non-clumping litter) can be introduced to start potty training

	Physical Milestones	Behavioral Milestones
Week 4	 hearing, sight and smell develop to adult level coordination improves, they begin to jump, pounce and climb weaning is underway teeth continue to come in much better at regulating their own temperature 	 they stray further from their nesting box, and they are able to orient by sight and avoid obstacles they begin to learn by watching and practicing in the wild, mom would start to teach hunting skills by bringing in live prey group play is common, waking hours are spent playing with and grooming their litter mates they begin to interact with humans on a regular basis dominance hierarchies are formed
Week 5	 they begin to run and rarely stop the basic skills are well developed but lack grace weaning is well underway but they still love to nurse 	 they are engaging in complex play, e.g. hiding while playing able to consistently use the litter box in the wild, they would start to kill prey
Week 6	 they are growing like a bad weed strength and muscle development increase they continue to refine sensory and motor skills full control of elimination they start to show the grace of an adult cat baby teeth are still erupting (teething!) they can eat solid food (wet and dry) 	 play is more complex adult response to threatening sights and smells they practice arching poses, hissing and sideways jumping they are becoming more independent of mom and litter mates they copy mom's routines and movements they chew on everything! they enjoy regular handling and snuggling with their humans

KITTEN FEEDING CHART

Estimated Age	Weight (grams)	Weight (ounces)	20 Kcal/100 g body weight ¹	Daily volume Commercial milk replacer (ml) Concentration 0.74 kcal/ml*	Stomach capacity (ml) (4 ml/100 g body weight ¹)	Approx. number of feedings per day**
Newborn	50	1.8	10	13.5	2	7
	75	2.6	15	20	3	7
	100	3.5	20	27	4	7
	125	4.4	25	34	5	7
~ 1 week	150	5.3	30	40	6	7
	175	6.2	35	47	7	7
	200	7.0	40	54	8	7
	225	8	45	61	9	7
~ 2 weeks	250	8.8	50	68	10	7
	275	9.7	55	74	11	7
	300	10.6	60	81	12	6-7
	325	11.5	65	88	13	6-7
~ 3 weeks	350	12.3	70	95	14	6-7
	375	13.2	75	101	15	~6
	400	14.1	80	108	16	~5
	425	15	85	115	17	~5
~ 4 weeks***	450	15.9	90	122	18	~5
	475	16.8	95	128	19	~4
	500	17.6	100	135	20	~4
	525	18.5	105	142	21	~4
~ 5 weeks***	550	19.4	110	148	22	~4

¹ Energy requirement and stomach capacity reference: Lawler DF. Neonatal and pediatric care of the puppy and kitten. Theriogenology, 70 (2008) 384-392.

Energy Requirement: 20-26 kcal/100g body weight/day

Comfortable Stomach Capacity: Approximately 4 mL/100g body weight

^{*} Most commercial milk replacers in the US provide less than 1 kcal/ml (0.74 kcal/ml), acting to increase the volume of milk required to meet calorific needs. This can be problematic in terms of the number and size of feedings given relative to stomach capacity and more likely to result in gastrointestinal disturbances. This may also account for why bottle fed kittens grow slower than kittens that nurse off their mother.

^{**} As the kitten is adjusting well to the milk and the feeding volume, you may be able to increase the volume fed to help reduce the number of feedings per day. This will exceed recommended comfortable stomach capacity and may put the kitten at risk of regurgitation, aspiration and diarrhea.

^{***} Kittens at this age are frequently eating some solid food, decreasing the amount of milk replacer required to meet daily calorific requirements. This may result in less frequent milk feedings.

SCAT STREET CAT RESCUE

Basic Monitoring for Kittens

Name of Kitten: Start Date:

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
WEIGHT gaining 7-12g/day	gm	gm	gm	gm	gm	gm	gm
FEEDINGS Amount	ml	ml	ml	ml	ml	ml	ml
# of feedings/day							
WARMTH Incubator setting/heating pad?	M. Sarah	A. Sarakara	Market Co.	420	A Contract	N. Carlotte	W. Saraker
Kitten feels warm?		4	A Contract	4			Africa Contraction of the Contra
POOPS Stimulated after each feeding?	A Salar	M. Sarker	Market Control	Al Say	All parties	N. Sarak	A Control of the Cont
Colour							
Consistency							
# of poops							
HYDRATION Checked skin turgor?	A shaper	A State of Land	A state of the sta	A State of the Sta	No other	A State of the	A Safer
Are gums pink, moist and slippery?		H. Janes	A Contract	H. Sagar	Waster Commencer of the	No. of Parties	# Jack
# of pees							
Colour of pee							
CLEANING Bum Bath	M. Care	Alexander.	Market Comment	4,200	A State of the Sta	N. Carlotte	A September
Ears and eyes cleaned and check for discharge?	A STATE OF THE STA	44	Market.	A Section of the sect	War.	**	42
Checked for skin irritation and parasites?	***	Market Comment	Market.	and the second	Market .	A Control	All Second
WARNING SIGNS Checked for warning signs?	a de la companya de l	N. Andrews	4	a service	¥	4	W. Salar

Warning signs include:

Sneezing; coughing; gagging; wheezing; lethargy; diarrhea; straining to pee/poop; twitching muscles; no/decreased appetite; heavy/rapid breathing.

If warning signs are present, kitten requires veterinarian care. Bring monitoring sheets to the appointment.

References:

American Association of Feline Practitioners: Feline advisory panel report. Journal of the American Veterinarian Medical Association, Volume 229 no. 9, November 2006

Guide for Standards of Care in Animal Shelters: Position Statement. Canadian Veterinarian Medical Association 2010.

Caring for Orphaned Kittens: A How to Guide for Shelters. maddiesfund.org

Kitten Care Handbook: Kitten Rescue Los Angeles 2016.

Feeding Chart:

Additional references:

 Cline J, Cattery Management and Nutrition of the Queen and Her Offspring, in Management of Pregnant and Neonatal Dogs, Cats, and Exotic Pets, 1st ed, ed, Cheryl Lopate, Wiley-BlackwellAmes, Iowa, 2012, 15-24.
 Zambelli D, Feline Neonatal Physiology, Behavior, and Socialization, in Management of Pregnant and Neonatal Dogs, Cats, and Exotic Pets, 1st ed, ed, Cheryl Lopate, Wiley-BlackwellAmes, Iowa, 2012, 145-158.