

What is Canine Cough, what do you do about it, and can my dog get it?

Canine infectious tracheobronchitis (Canine Cough or Kennel Cough) is one of the most common infectious diseases in dogs. Fortunately, the majority of cases are not serious, resolving on their own in 1 to 2 weeks. The main cause of Canine Cough is the airborne bacteria, Bordatella bronchiseptica. A dog with Canine Cough will develop a coarse, dry, hacking cough about 5 to 10 days after being infected. It sounds as if the dog needs to “clear its throat” and the cough will be triggered by any extra activity, drinking water, exposure to change of temperature, or exercise. Many dogs that acquire Canine Cough will cough every few minutes, all day long. They will wretch and sometimes vomit a white foamy looking matter. Their general state of health and alertness are usually not affected, they usually have no rise in temperature, and do not lose their appetite.

Even in the most hygienic, well ventilated, spacious dog facilities, the possibility of a dog acquiring Canine Cough still exists. Canine Cough can be acquired from your neighbor’s dog, from the dog park, from your dog’s veterinarian, from the sidewalk where an infected dog walked earlier, etc. For this reason, try not to blame anyone or any place if your dog develops Canine Cough. There may have been an infected dog, unknown to anyone, that acted as a source for other dogs. The signs of Canine Cough usually will last from 7 to 21 days and can be very annoying for the dog and the dog’s owners. If you suspect your dog has Canine Cough, isolate your dog to prevent spreading to other dogs and call or visit your veterinarian for medical advice. If your dog has recently been to dog school, boarding, doggie daycare, or any other place where your dog was exposed to other dogs, notify the correct individuals and advise that your dog is coughing.

You don’t need to isolate your dog to prevent infection. The best recommendation is to discuss with your veterinarian what combination of vaccines and boosters they recommend. Many dogs that contract Canine Cough will display only minor signs of coughing that may last 7 to 10 days and will not require any medication at all. Treatment is generally limited to symptomatic relief of the coughing with non-prescription, and occasionally prescription, cough suppressants. If the dog is running a fever or there seems to be a persistent and severe cough, antibiotics are occasionally utilized to assist the dog in recovering. It can happen that secondary bacterial invaders will complicate a case of Canine Cough and prolong the recovery by severely affecting the upper airway. Therefore the use of antibiotics is determined on an individual basis. Follow the advice and course of treatment that your veterinarian has prescribed.

REFERENCE: Merck Veterinary Manual – Eighth Edition, Dr. Michele St. Pierre, Waterloo West Animal Hospital

At Paws Pet Resorts, we don’t want any dog to get a cold; our dog’s are here too! Our knowledgeable staff is always looking for signs of illness and every boarding dog has three health checks daily. All facilities get Canine Cough from time to time. Colds go around, just like in child daycare. The hard part for us is that a fully vaccinated dog can still get a cold and they won’t show symptoms until 5 to 10 days later. An infected dog can even give the cold to others and never have symptoms themselves. To minimize outbreaks, we use hospital disinfectants and scrub everything constantly. We have air exchange and air purification systems. We don’t let any dog into the facility unless they have their vaccinations. Outbreaks are usually once or twice a year and only affect a few dogs. Would you isolate your child to prevent a cold? No, socialization and schooling is just as important for our dogs as our children.

Owner has read the information provided on Canine Cough and agrees to keep their dog’s vaccination status current at all times while attending Paws Pet Resorts. _____(initial)

Owner understands that vaccinations, in order to be active, should be given at least two weeks prior to attending Paws Pet Resorts. _____(initial)

Owner further understands that the Bordatella (Canine Cough) vaccination does not cover all strains of the virus and your dog may still contract Canine Cough. _____ (initial)

I agree that I will NOT hold Paws Pet Resorts responsible if Owner’s dog contracts Canine Cough.

Owner’s Signature _____ Date _____



Parent Information

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email Address _____

Emergency Contact Information

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email Address _____

***Note: Your Emergency Contact person should be someone that can make decisions about your dog in the event that you cannot be reached.**

Veterinary Information

Vet's Name _____

Hospital Name _____

Location _____

Phone Number _____

Referral Program

How did you hear about Paws? (circle one) Website Vet Advertisement Trainer Friend Other

What is your friend's name? _____ What is their dog's name _____?

Pup's Personality Profile



PUP #1

Dog's Name _____

Breed or Mix _____

Sex M / F DOB or Age _____

Neutered/Spayed Y / N At what age? _____

Color _____

Identifying marks _____

How long have you owned dog? _____

Where did you get your dog? _____

If adopted, do you have past history? Y / N

If yes, please describe _____

Health/Grooming

List any Medications _____

Reason for use _____

Dosage Instructions _____

Does your dog have any allergies? Y / N

If yes, please describe _____

Is your dog on flea control? Y / N

List any medical conditions _____

Has your dog been ill in the last 30 days? _____

Does your dog have hip dysplasia? Y / N

If Yes, what restrictions _____

Has your dog ever had a seizure? _____

What food does your dog eat? _____

Any dietary restrictions? _____

Does your dog like being brushed? Y / N

How does your dog react to nail clipping? _____

Any sensitive areas on dog's body? _____

PUP #2

Dog's Name _____

Breed or Mix _____

Sex M / F DOB or Age _____

Neutered/Spayed Y / N At what age? _____

Color _____

Identifying marks _____

How long have you owned dog? _____

Where did you get your dog? _____

If adopted, do you have past history? Y / N

If yes, please describe _____

Health/Grooming

List any Medications _____

Reason for use _____

Dosage Instructions _____

Does your dog have any allergies? Y / N

If yes, please describe _____

Is your dog on flea control? Y / N

List any medical conditions _____

Has your dog been ill in the last 30 days? _____

Does your dog have hip dysplasia? Y / N

If Yes, what restrictions _____

Has your dog ever had a seizure? _____

What food does your dog eat? _____

Any dietary restrictions? _____

Does your dog like being brushed? Y / N

How does your dog react to nail clipping? _____

Any sensitive areas on dog's body? _____

PUP #1 HABITS

Has your dog ever attended daycare? Y / N
If so where? _____

How did he react? _____

Has your dog ever been to a dog park? Y / N
How did he react? _____

How does your dog react to the following:

Around strangers in your home _____

Around children _____

Around small dogs or puppies _____

Around large dogs _____

Around delivery persons _____

When you leave the home _____

When you return home _____

On leash on a walk _____

When another dog approaches _____

Off leash or at a dog park _____

Has your dog been to obedience training? Y / N
If so describe _____

How active is your dog? _____

Is your dog frightened by noises? _____

Is there a type of person your dog is afraid of? _____

Has your dog ever growled or snapped at anyone
taking food or toys away? _____

Does your dog exhibit protective behavior? _____

Has your dog ever bitten a person or animal causing
injury or death? _____

Has your dog ever been in a dog fight that ended
with injuries? _____

Does your dog tend to be an escape artist? _____

Has your dog ever tried to climb a 6 ft fence? _____

Does your dog play with toys? _____

Does your dog have a barking problem? _____

Does your dog use his mouth too rough on you or
your family? _____

PUP #2 HABITS

Has your dog ever attended daycare? Y / N
If so where? _____

How did he react? _____

Has your dog ever been to a dog park? Y / N
How did he react? _____

How does your dog react to the following:

Around strangers in your home _____

Around children _____

Around small dogs or puppies _____

Around large dogs _____

Around delivery persons _____

When you leave the home _____

When you return home _____

On leash on a walk _____

When another dog approaches _____

Off leash or at a dog park _____

Has your dog been to obedience training? Y / N
If so describe _____

How active is your dog? _____

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Does your dog exhibit protective behavior? _____

Has your dog ever bitten a person or animal causing
injury or death? _____

Has your dog ever been in a dog fight that ended
with injuries? _____

Does your dog tend to be an escape artist? _____

Has your dog ever tried to climb a 6 ft fence? _____

Does your dog play with toys? _____

Does your dog have a barking problem? _____

Does your dog use his mouth too rough on you or
your family? _____



Health and Temperament Certification

I, _____, hereby certify that my dog(s) _____ is in good health and has not been ill with any communicable condition in the last 30 days.

I further certify that my dog has not harmed or shown aggression or threatening behavior towards any person or any other dog.

Date _____ Signature of Owner _____

Owner's Representations or Exceptions:
