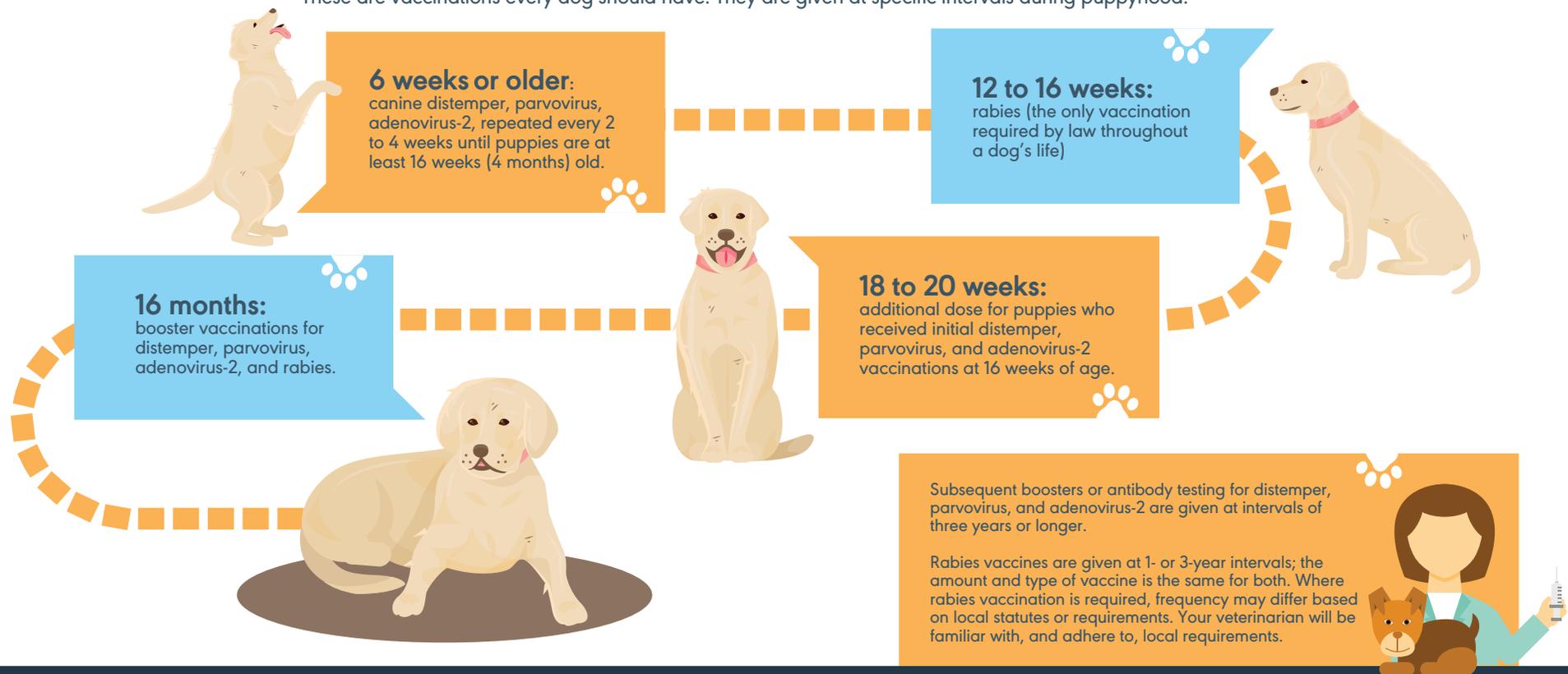


When it comes to vaccinations, a lot has changed in the past 30 years. Except in certain circumstances, annual vaccinations are a thing of the past. Vaccinations are still an important part of your pet's preventive health care plan, but veterinarians now tailor them to the needs of individual animals, based on their lifestyle, potential risks, and overall health. The following recommendations from the American Animal Hospital Association and the American Association of Feline Practitioners will help you understand your pet's vaccination needs so you can work with your veterinarian to prevent disease and maintain good health.

## Core Vaccinations for Dogs:

These are vaccinations every dog should have. They are given at specific intervals during puppyhood.



## Non-Core Vaccinations for Dogs

These vaccinations are not appropriate for every dog and are not typically given to puppies unless they are at risk. They are given to dogs at risk due to lifestyle, environment, or geographic considerations, such as being boarded, going among large numbers of dogs at shows or other events, hunting or hiking in tick-infested areas, or risk of exposure due to community outbreak.

**Dogs are susceptible to two types of canine influenza—H3N8 and H3N2.** At-risk dogs—those who attend or participate in dog shows or dog sports events or who visit dog parks or other large gatherings of dogs, including boarding kennels, dog daycare, and grooming shops—should be vaccinated for both strains.

**Canine influenza virus-H3N8:** initial dose is given 4 weeks prior to possible exposure, followed by second dose 2 to 4 weeks later. This allows for two weeks between the vaccines, plus two weeks to allow time for the immune response to develop. Booster one year after completion of initial two-dose series and then annually for at-risk dogs. Can be given to puppies as young as 6 to 8 weeks old. Dogs at risk for exposure to influenza virus should be vaccinated against both H3N2 and H3N8 strains. Vaccinated dogs may still become infected following exposure, develop mild clinical signs, and shed virulent virus for a time.

**Canine influenza virus-H3N2:** initial dose is given 4 weeks prior to exposure, followed by second dose 2 to 4 weeks later. This allows for two weeks between the vaccines, plus two weeks to allow time for the immune response to develop. Booster one year after completion of initial two-dose series and then annually for at-risk dogs. Can be given to puppies as young as 6 to 8 weeks old. Dogs at risk for exposure to influenza virus should be vaccinated against both H3N2 and H3N8 strains. Vaccinated dogs may still become infected following exposure, develop mild clinical signs, and shed virulent virus for a time.

**Bordetella bronchiseptica:** Vaccination is recommended for dogs coming into social contact with other dogs, such as being boarded, attending daycare, or going to dog parks. For puppies or dogs 8 weeks or older, intranasal or oral vaccines are given only once. If given subcutaneously, initial dose can be given as early as 8 weeks, followed by second dose 2 to 4 weeks later. For at-risk puppies, a single intranasal dose can be given at 3 to 4 weeks of age, but this is not typical. Booster annually for dogs who are boarded, attend daycare, or go to dog parks, dog shows, or other events with multiple dogs.

**Bordetella bronchiseptica combined with canine parainfluenza:** When vaccination is recommended for dogs being boarded or attending daycare, a single intranasal dose can be given as early as 8 to 16 weeks of age. Booster at-risk dogs annually.

**Leptospira:** Initial dose given as early as 8 to 9 weeks if puppy or dog is at risk of exposure through entering or drinking from rivers, lakes, or streams; roaming on rural property; exposure to wild animals or farm animal species anywhere outdoors, including suburban backyards; contact with puddles or standing water anywhere outdoors; and contact with infected rodents or dogs or dogs who have experienced the risk factors previously mentioned. Second dose is given 2 to 4 weeks later. Booster at-risk dogs annually.

**Borrelia burgdorferi (canine Lyme disease):** Initial dose can be given to at-risk dogs as early as 8 to 9 weeks of age, followed by a second dose 2 to 4 weeks later. Ask your veterinarian about the risk of canine Lyme disease in your area as well as about tick prevention.