

SPAY/NEUTER IN THE AGE OF COVID-19

Sample Clinic Protocols

Compiled by Neighborhood Cats

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*This document will be updated as more protocols are submitted. It is available to view and download on the COVID-19 page at www.neighborhoodcats.org. If your agency is willing to share your SOPs, please contact us at info@neighborhoodcats.org. Thank you!

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*Clinic A has asked to remain anonymous.

CHECK-IN

Alley Cat Advocates
www.alleycatadvocates.org

SETUP – OUTSIDE THE CLINIC

- Block off one parking space near the front door of the clinic with an orange security cone.
- Make sure the handicapped spot is NOT the spot blocked off.
- Set up two six-foot-long tables at the end of the parking spot, where a car's rear bumper would be if front-end parking.
- Place the six-foot-long tables parallel to one another with the long sides touching. A staff member will conduct business on one side of the two tables and the caretaker will be on the other side. The tables create a barrier between the two people.
- Cover the tables with towels to catch any urine or feces that may appear.
- Hold the towels down with stones or bungee cords.
- If rain is imminent, set the tables up under the 10x10 foot tent.

SETUP – INSIDE THE CLINIC

- Have a cup marked “dirty pens” to place used pens in.
- Put the computer cart with laptop and printer by the door.
- Log in to Clinic HQ.
- Put trap tags by the laptop on the cart.
- Have tape for the trap tags, extra trap covers and cable ties on the cart.
- Make sure that both trap racks in Exam Room 1 are set up and ready to go.
- Set up a table to stage the colonies, covered with towels.
- Check to see if crates in kitten nursery are set and ready for kittens and /or nursing mothers with kittens.
- Consult the schedule and for each caretaker with an appointment, prepare a separate clipboard.
- For caretakers using THEIR traps:
 - On each caretaker's clipboard, place a separate intake form for every cat being checked in and a trapping release form.
 - Place a clean pen on each clipboard.
- For caretakers using OUR traps:

- On each caretaker's clipboard, place a separate intake form for every cat being checked in.
 - Place a clean pen on each clipboard.
- Organize the clipboards in alphabetical order by caretaker's last name.

CHECK-IN

NOTE: All volunteers and staff must wear cloth face masks at all times when working with the public.

Volunteer 1 (outside the clinic)

- As caretakers enter the parking lot, jot down their names and note the order of their arrivals.
- Ask caretakers to park and let them know they will be checked in according to the order of their arrival.
- Distribute the prepared clipboards to caretakers in their cars in the order of their arrivals.
- Bring the cup marked "dirty pens."
- Have each caretaker complete the required forms.
- After a caretaker is done writing, have him/her place the used pen in the cup marked "dirty pens."
- Clipboards with completed forms are brought to the staff member at the two six-foot-tables.
- In the order of their arrival, caretakers are told to bring their trapped cats to the tables. Volunteer 1 can assist. One caretaker must complete the check-in process before the next caretaker brings over her cats. Before moving cats out of their vehicles, caretakers are advised to check the trap latches.
- The caretaker places the traps on the table opposite the staff member. This leaves space equaling the width of the two tables between the caretaker and staff member.
- After the forms have been removed, place the used clipboard in a stack to be wiped down later.
- Once a caretaker has completed check-in, notify the caretaker next in line to check the trap latches and bring their cats over to the tables.

Staff (outside at tables)

- Confirm caretaker's name.
- On each intake form, write down the color and a description of the cat. Ask about the health of the cat and write down any concerns.
- Ask the caretaker to wait at the tables or in her car while the cats are entered into the computer system.

Volunteer 1 (and Volunteer 2, depending on number of traps)

- Carry traps inside the clinic to the staging table with their rear doors facing into the lobby toward the exam room.

Staff (inside the clinic)

- Attach each intake form on top of the corresponding trap and check for any noted health concerns. Intake forms remain with traps until discharge.
- Lift the trap cover and evaluate again for health concerns.
- Enter the cat into Clinic HQ:
 - Go to “Clients”
 - Select the surgery date
 - On the list, locate caretaker’s name
 - Select “Check-in”
 - Go to the second tab “Animal” at the top
 - Fill out description and under notes put health concerns, hit save
- On the intake form in the field for “cat’s name” write the ID number that Clinic HQ has generated.
- Make a copy of the intake form. Place original on trap.

Volunteer 2 (inside the clinic)

- Prepare trap tags with caretaker’s name, Clinic HQ ID number, cat’s name and description. Two trap tags should be prepared for each cat and both affixed to the corresponding trap.
- Place the tags on the trap and place trap with cat on check-in rack in the exam room. Keep colonies together and traps in order of tag numbers.
- If kittens and/or mom with nursing kittens:
 - Trap tags include all kittens’ Clinic HQ ID numbers
 - Move kittens and moms with nursing kittens to kitten nursery or bathroom until check in is over.
- Repeat process with remaining cats and kittens.

Volunteer 1 (outside the clinic)

- Give caretakers copies of the intake forms and tell them which services the cats will be getting and any health concerns that were noted inside the clinic.
- If kittens, explain what treatments the kittens will get with us.

BREAKDOWN

- Gather towels and place in laundry room.
- Use Rescue to spray down tables.
- Fold tables and put away.
- Remove paper and plastic from racks and discard.
- Spray down racks with Rescue.
- Cover racks with clean plastic and newspaper.
- Sweep and mop floor.
- Wipe down all surfaces and door handles in lobby and outside.
- Sanitize dirty pens and used clipboards.

Clinic A*

*The clinic wishes to remain anonymous

LOBBY ACCESS

Our lobby door is locked. There are very large signs on and adjacent to the front door. For any walk-ins or medication needs, it instructs those without an appointment to go back to their car and wait for us to come to them.

Right by the door there is a piece of plywood which shows people how far apart six feet is with a hand-drawn Cheshire cat.

DROP-OFF

Due to staff limitations we have extended our drop off time about an hour later. This is not ideal, but it is how we had to survive.

Prior to their arrival at the clinic, we have already sent a text reminder to the pet owner or feral cat caretaker about new drop-off procedures, approximate wait times, etc. If clients are not text-savvy, we called them in person.

In addition, the client information form has been filled out in advance and the client has informed us of any extra services they desire. The completed forms are ready inside the clinic. When the client arrives, one receptionist stays behind the desk while the technician carries out the clipboard with that client's forms and goes over everything briefly again.

We ask clients to wait for our technician to come to them. One at a time, we go to their vehicles or ask them to bring their cat/dog/pet/trap up to the porch. In general, we prefer if they stay in their vehicle while we talk to them.

The only problem we have had is bigger and/or aggressive dogs that don't walk. For this reason, we temporarily stopped seeing all dogs over 40 lbs. We can easily lift and carry the smaller dogs ourselves into the clinic without owners having to come inside. We now have a waiting list of backlogged large dogs. Not ideal, but it eliminates a lot of additional time and manpower needed to carry 90 lb. dogs to the back.

All other client communications are done by phone or text. If clients are new, we have the surgery consent form posted about five feet high (facing out but mounted on the inside of our glass window) so they can read it from outside.

If the client is not "textable" or is not 100 percent sure they can be reached by phone that day, we tell them pickup time is approximately 4:30 but to call ahead to be sure we are running on schedule. If someone says they have to be done by a certain time, we say we can't guarantee that and ask if they prefer to reschedule.

Animals are brought into the clinic by the intake technician. The tech disinfects hands, etc., before picking up the next paperwork to check in the next animal.

Shelter Medicine Program, Oklahoma State University, College of Veterinary Medicine

<https://vetmed.okstate.edu/veterinary-medical-hospital/shelter-surgery.html>

IN GENERAL

The shelter medicine program accepts transports from more than 35 shelters. The program is currently entirely paperless. All paperwork must be completed and emailed, texted or relayed by phone. All transporters bringing shelter animals to the clinic must wear a face mask per CDC guidelines.

INSTRUCTIONS TO SHELTER CLIENTS - INTAKE

1. Call 405-XXX-XXXX to notify us of your arrival.

2. The transporter should unload large dogs first, one at a time, on a leash, and walk them into the small, gated area around our door.
3. Please close the gate behind yourself.
4. Wait for a shelter staff member to place a clinic leash on the dog, and then remove yours.
5. We will take the patient into the building.
6. Repeat this process with all larger dogs that are not in carriers.
7. For small dogs/cats that are in carriers, the transporter will place each carrier into the gated area.
8. Close the gate and return to your vehicle.
9. We will wipe down carriers and bring them into our facility.

Note: Staff wears PPE during check-in, including eye covering (goggles or glasses), cloth gowns, masks (homemade is ok outside surgery) and exam gloves.

DISCHARGE

Alley Cat Advocates
www.alleycatadvocates.org

TIMING

- Discharge of cats – 30 minutes for 30 cats

SETUP – OUTSIDE

- Block off one parking space near the front door of the clinic with an orange security cone
- Make sure the handicapped spot is NOT the spot blocked off
- Set up two six-foot-long tables at the end of the parking spot, where a car's rear bumper would be if front-end parking.
- Place the six-foot-long tables parallel to one another with the long sides touching. A staff member will conduct business on one side of the two tables and the caretaker will be on the other side. The tables create a barrier between the two people.
- Cover the tables with towels to catch any urine or feces that may appear
- Hold the towels down with stones or bungee cords
- If rain is imminent, set the tables up under the 10x10 foot tent
- Hand sanitizer is on the table for use by anyone
- Prepare a plastic cup with clean pens for the needed signing/initialing. Make sure CLEAN is written in clear, large letters on the plastic cup
- Clean all pens going in the plastic cup marked CLEAN using approved disinfectant wipes or dilute bleach solution. And remove all pen caps for ease of use.
- Prepare a plastic cup for dirty pens to house after needed signing/initialing. Make sure DIRTY is written in clear, large letters on the plastic cup.

SETUP – INSIDE

- Prepare a separate clipboard for each caretaker.
- On each clipboard, attach the general discharge instructions and the specific records of the cats being discharged to that caretaker, stapled together.
- Also attach to the clipboard the original of the intake form as this is needed to collect the signature or initials of the caretaker upon pickup of their cat(s).

- Remove food trays from traps.
- Confirm tag on trap matches tag on trap handle (that was removed from around the cat's neck after surgery and placed on the handle).
- Confirm cats grouped together belong to the same caretaker (check trap tags for caretaker's last name). Also make sure all colony cats are accounted for by placing the traps in numerical order.
- Place clipboard with completed forms on top of the trap of the first cat in each colony for easy access.
- Set up table to stage the colonies, covered with towels.

DISCHARGE

NOTE: All volunteers and staff must wear cloth face masks at all times when working with the public.

Volunteer 1 (outside)

- As caretakers enter the parking lot, take their names and note the order of their arrivals. Jot it down in a little notebook.
- Ask the caretakers to park and let them know that they will be called up to retrieve their cats in the order of arrival.
- Notify Volunteer 2 of the which caretaker is next in line to pick up their cats.
- Notify the caretaker who is next in line to come to the two six-foot-tables to retrieve their cats.
- Alert the next caretaker that they are next and to watch for their turn.
- Assist caretakers to their cars with their cats.

Volunteer 2 (inside/outside)

- As Volunteer 2 is notified of the name of the next caretaker in line, the clipboard and traps for that colony are pulled from the rack and set on the staging table inside the clinic.
- From the staging table, the caretaker's traps and clipboard are carried by Volunteer 2 to the two tables outside the clinic's front door.
- Traps are set on the table closest to the client, maintaining width of the two parallel tables between the client and staff or volunteer.
- Place the previously prepared clipboard on top of the first numbered trap.
- Inside the clinic, the next colony is staged and readied to move outside.

Staff member (outside)

- General discharge instructions are given verbally – what complications to watch for, how to open the trap for release, etc.

- Caretakers are asked to verify that the two tags on each trap match their name.
- Caretakers are asked to retrieve a pen from the clean cup and initial on the bottom right corner of the original intake form.
- Caretakers are asked to remove the discharge instructions and individual cat receipts (all stapled together) from under the initialed intake forms. *(NOTE: It might be better to do this paperwork step without a clipboard as clients may fumble with it and staff members are tempted to assist, causing possible contamination of the clipboard.)*
- Caretakers are asked if they have any questions.
- Caretakers are asked for donations. If given, the amount is written on the intake form for later reconciling. Donations are placed in a donation bin not handled by staff. Credit card donations are managed by the caretaker writing their credit card information on a credit card slip and placing the slip in the donation bin.
- Caretakers are asked if there are additional cats needing assistance. If there are, notes are made on the intake form for later follow up.
- Remind caretakers that traps are to be returned on Saturday from 12:30-3:30pm.
- Repeat process with remaining caretakers.

BREAKDOWN

- Gather towels and place in laundry room.
- Use Rescue to spray down tables.
- Fold tables and put away.
- Remove paperwork from clipboards.
- Disinfect clipboards and dirty pens.
- Remove paper and plastic from racks and discard.
- Spray down racks with Rescue.
- Cover racks with clean plastic and newspaper.
- Sweep and mop floor.
- Wipe down all surfaces and door handles in lobby and outside.

Clinic A*

*The clinic wishes to remain anonymous

When we call the client to come pick up, we ask if they can pay over the phone with a credit card. If they don't prepay, and/or if they need additional medications at pickup, we allow them to come inside the lobby one at a time, where we have a very specific setup at one desk location only.

We try to stagger pickups when we call or text the client. This does not always work but if we can, it does help to stagger them in. If we postpone a surgery to the end of the day (like a known cryptorchid or additional procedure, etc.), we tell that client their pet is last and they know not to come before a certain time.

When we contact the owner or caretaker to confirm pickup, we ask if they need anything else like dewormer, flea medication, etc. They can still tell us at checkout. Not really an issue for most of our TNR's; they just get their traps and go!

It may on occasion be necessary for a client to enter the lobby or come to the door. After they are checked out, we fully disinfect with Rescue, Clorox Fuzion or 99 percent alcohol any surfaces that were touched, including credit card machine and door. Only then do we allow the next client in.

Shelter Medicine Program, Oklahoma State University, College of Veterinary Medicine

<https://vetmed.okstate.edu/veterinary-medical-hospital/shelter-surgery.html>

IN GENERAL

The shelter medicine program accepts transports from more than 35 shelters. The program is currently entirely paperless. All paperwork must be completed and emailed, texted or relayed by phone. All transporters picking up animals must wear a face mask per CDC guidelines.

INSTRUCTIONS TO SHELTER CLIENTS - DISCHARGE

1. Call 405-XXX-XXXX to notify us of your arrival.
2. Each larger dog will be walked on a leash into the closed gated area, one at a time.
3. The transporter will place their leash on the dog; then we will remove ours.
4. The transporter will load the animals into the vehicle.
5. Small dogs/cats in carriers will be placed in the gated area.
6. The paperwork will be placed on top of their carriers.
7. After we exit the area, the transporter may enter the gated area to load the animals.

Note: Staff wears PPE during discharge, including eye covering (goggles or glasses), cloth gowns, masks (homemade ok outside surgery) and exam gloves.

PAPERWORK & PAYMENT

Clinic A*

*The clinic wishes to remain anonymous

ENABLING TEXTING TO LANDLINES

This has been our very best time saver and social distancer. We finally spent money to institute a text-to-clinic option, where our main landline was converted to a text-enabled number. This has helped in more ways that we could have imagined:

- 1) The use of texting resulted in less staff time being needed to answer phones, schedule appointments, do reminder calls and do postoperative checkups. This was very timely because our staff has been reduced due to personal leave, quarantine and Families First Coronavirus Response Act leave.
- 2) Being able to preschedule text reminders and postoperative surgery checks has eliminated a tremendous amount of staff time playing “phone tag.”
- 3) Clients can text us from their cars when they arrive so in most cases they don’t need to come inside.
- 4) Staff including the doctor can all get the same text messages on their personal devices or office desktop/tablets, without staff members’ personal phones being used.
- 5) Staff members can receive texts on their own devices. This allows us to answer these texts from anywhere (even at home!). Plus, we don’t all use a common electronic device or phone receiver.

SCHEDULING

We limit our caseload so that we can get all cleaning and disinfection done at days’ end with the support staff we have available.

Prior to the pandemic, we did surgery in the morning and had pre-scheduled appointments in the afternoon. We have eliminated afternoon pre-scheduled appointments and instead we accept same-day bookings as time permits. This way no one’s spot gets cancelled if surgery is running late. Since we have been going so much slower with the safety precautions, we don’t often have time for as many afternoon appointments. We figure our main mission is surgery anyway. However, we do make exceptions for kitten/puppy series or urgent care needs.

When the client schedules by phone or text, we fill out paperwork then. This takes much more time on the front end but avoids a bottleneck the morning of drop-off and really streamlines things.

We don't use NCR forms, just plain paper; we run copies off on our Xerox machine. For our frequent feral clients, we have forms already filled out and stored on our computer, so we can just print them when needed. This too saves tremendous time.

We tell the non-TNR clients that if an animal has already had a rabies vaccine they can bring proof or text it to us in advance.

We ask for any dog surgeries to give a nonrefundable \$20 deposit to schedule an appointment, but we do not do this for cats.

We allow "walk in" ferals any day we have surgery. Occasionally we will keep them overnight before surgery. We have asked clients to call ahead of time and let us know they are trapping so we have an idea of what may come in. There is no penalty for not showing up if the cats are not caught, but we ask they bring no more than five without calling ahead. Not an issue lately since business has slowed down.

For TNR's, the new texting option allows the trapper to text us an update at any time 24 hours a day. Even if we don't have the app turned on overnight, by the time the opening receptionist gets to work there are messages from the trappers about how many they were or were not able to get, and any updates regarding transporting issues, arrival times, etc. All of this doesn't even require a person!! The texting keeps us in touch without needing to tie up a phone line. Staff doesn't cross contaminate the computer because every staff member can have personal access on their own device.

PAPERWORK AND PAYMENT

One rule with paperwork: Paper only flows in ONE direction: OUT. No one brings us paper, gives us paper, fills out paper, etc. We have text-ahead options for any previous vet records, and we have large windows and a plexiglass barrier at reception for them to hold up anything we need to take a picture of or that we need to see. So, no one touches pens except our staff. No one touches or gives paperwork back and forth anymore.

Payment is trickier; we have asked for payment in the form of credit whenever possible. We do still take cash of course, but staff puts on gloves while handling any cash or coin, and there are bottles of hand sanitizer everywhere for them to immediately use after making change of any kind.

We put up a very handy plexiglass barrier we purchased online that had an adjustable window at the bottom. So, we made the opening just tall enough for our credit terminal to go back and forth under the barrier. If people (usually elderly) cannot insert their card correctly, staff puts on gloves and helps them, and immediately degloves afterward and uses sanitizer.

We keep bottles of homemade sanitizer and desk/door disinfectant on a rack right by where clients check out, so we also encourage them to sanitize after exchanging money, etc.

INSIDE THE CLINIC & PPE

Clinic A*

*The clinic wishes to remain anonymous

INSIDE THE CLINIC

We have a long rectangular lobby and it had a LOT of literature and a huge checkout desk that could accommodate many clients simultaneously. We totally stripped the lobby of everything, so there is nothing for clients to routinely mutually touch (like brochures). We have a large “L” shaped custom-made desk, but we blocked it all off except for one two-foot section where we put up a plexiglass barrier with a small opening. Now all clients have to come to just this one spot to check out or pick up medication. We used furniture or clever blockades to facilitate this. This works GREAT!!! Right by the client plexiglass window are several choices for hand sanitizer, surface disinfectants, etc.

At the front desk, we have 99% alcohol to routinely disinfect phones and electronic devices like keyboards and our credit card machine touch screen.

No clients are allowed to come back and use our restrooms at this time.

No client actually comes into the back of the clinic now except those who have to help with their huge or aggressive dogs, which we are trying not to schedule right now anyway because it brings us into close proximity to each other while restraining. If one shows up and it is massive or aggressive and intractable, we reschedule them.

After we bring all cats and dogs back, the staff processes them one at a time, disinfecting each station and carrier/trap/leash/etc., before moving on to the next. If the doctor is there at this time, preop examinations are done.

Basically, the only thing the staff shares after this point is the client paperwork as it travels through the stations.

Staff is not required to wear masks but is encouraged to; however, if we have to be close (restraining a dog, for instance), we must wear masks. If we had more staff working, we would probably require everyone always wear them, but recently there have been only three of us in the entire building.

Hand sanitizer is everywhere, and staff must use it in between paperwork and after touching solid surfaces like traps, carriers, etc. Handwashing is also encouraged.

Staff is not allowed to bring in any bags or personal items unless they take them directly to an empty dog cage or cat cage which is “theirs” for the day, and they must disinfect at the end of the day. No belongings are allowed on the break room table at any time. Staff must disinfect the table with Rescue before and after they sit down to eat. Staff are also allowed to eat or break in their cars. But... we haven't had time to take breaks much!

Cell phones are strongly discouraged during this time, but if they must be used, 99% alcohol is provided at each station to sanitize the phone after each use (in case the phone was contaminated by the current patient... this is to protect the staff member).

Staff members are even responsible for their own toilet paper!!! We don't touch anything in common except client files for the most part.

At the end of the day, cleaning and disinfection proceeds as it always has.

USING PPE

We have provided washable reusable masks and disposable gloves for all staff to use at any time they feel vulnerable, like working with files and/or unpacking boxes, or handling money. But we advise the gloves be thrown out immediately after use. For this reason, most staff members are just using the sanitizer and washing hands religiously, since our homemade sanitizer evaporates very quickly.

Masks are not required except during client check-in (out in front of the building), and during client check-out, when animals are exchanged with the client. When a cat is returned, the carrier is set down outside on the ground, our staff member steps back a safe distance and the client then retrieves the carrier. If elderly, we load it for the client.

Receptionists don't have to wear masks, since our blockaded lobby setup keeps them six feet or more away from the client or keeps them separated by plexiglass. They find the mask muffles them on the phone as well.

We have reusable, washable long-sleeved smocks that we have had for years, which we currently use for URI cats, ringworm, suspected FIP, taking in or processing young kittens, etc. and the staff is always welcome to use these while checking in or taking out pets to clients. Some use them for certain pets. We already had these on hand.

The DVM is using washable caps, masks and gowns as well and only consumes latex gloves at this time, which our local hospital didn't want.

Shelter Medicine Program, Oklahoma State University, College of Veterinary Medicine

<https://vetmed.okstate.edu/veterinary-medical-hospital/shelter-surgery.html>

- No more than 10 people are permitted in a room at a time.
 - Inside the clinic, the following PPE is always worn: eye covering (glasses or goggles), masks and gowns.
 - Staff in surgery wear surgical masks and gloves. Outside of surgery, homemade masks are ok and gloves are only worn during check-in and discharge, though frequent handwashing is done.
 - Gowns are cloth so can be laundered; no disposable paper gowns are used.
-

Tips

- If you have more than one surgeon, you can increase social distancing by splitting your staff into two teams and having only one team operate in the clinic at a time. To maintain surgery volume, increase your clinic hours, run two shifts and assign each team a separate shift.
- Screen staff at the start of each shift for an elevated temperature using a handheld, contactless thermometer gun (aka “spot pyrometer”). The device uses infrared technology and works by pointing it at a person’s forehead.

MOBILE CLINICS

Merrimack River Feline Rescue Society (The Catmobile)

www.mrfrs.org/catmobile

IN GENERAL

The Catmobile goes to 25+ locations in Massachusetts. We instituted specific guidelines during the COVID-19 crisis to protect our staff and other cat owners. Usually we can accommodate 30 cat owners per clinic, but during this crisis, we book only 16 cat owners, eight of whom check in at 8:15 am and eight check in at 8:45 am. Each of these owners can bring more than one cat, but we do not go over our daily census of 30 cats.

We also spay/neuter ferals, but due to the size of the traps, we can only fit five traps in The Catmobile at one time, so we have "special" feral days for our trappers when they can bring as many as they have trapped, at staggered times.

We offer masks for those who do not have them.

PAPERWORK & PAYMENT

All services must be prepaid by credit card. No cash is accepted. Appointments are scheduled over the phone or online. Surgical consent forms must be downloaded, completed and brought to the appointment.

INSTRUCTIONS TO CLIENTS – CHECK-IN

ATTENTION: Due to the recent guidelines regarding the Covid-19 virus, MRFRS has instituted strict new procedures to prevent people from gathering at The Catmobile and to allow for social distancing while dropping off and picking up cats. Until further notice, we ask that you stick to the following instructions:

- You will be assigned a time, either 8:15 am or 8:45 am. Please stay in your car and don't approach the Catmobile until the *exact* assigned time you were given.
- Only one person is allowed to stand in line per carrier. Other friends or family members must wait in their cars.

- When your appointment time arrives, form a line with at least 6 feet between the persons in front and behind you.
- Please make sure your carrier is clean.
- Please be patient, respectful of our staff and of other cat owners.
- You will be given instructions for pick up with the same goal of preventing crowds and allowing for social distancing. Please follow these instructions as well.

Failure to follow these instructions may result in the cancellation of your appointment and may result in the closure of The Catmobile Program. We are the only low-cost spay/neuter program still operational in the state of Massachusetts and closure would affect many, many people in need of spay/neuter services. Thank you for your increased diligence during this epidemic and for helping to protect our staff and others in the community.