Brachycephalic Animal Fit-To-Fly assessment form

Name of Veterinarian:	Country/State:
Vet Registration/License #:	Vet Phone contact:

Name of Owner:		Owner Phone contact:	
Name of Pet		Breed:	Age:
Microchip #:		Weight: ____ kg	Colour:	Male / Female

Travel Plan	Anticipated Date of Travel:	Total Flight duration:
Departure Airport:	Destination Airport:	Transit? Y /N Transit Airport:

This B.O.A.S assessment shall be completed within 30 days of travel.

Medical History

Are there any pre-existing medical conditions?

☐ No

☐ Yes: _____

_____ _____

Current medications? _____

Previous history of BOAS surgery? ☐ No ☐ Yes: If yes, at what age was surgery performed? _____ years

Physical examination

- Cardiovascular system: Any abnormalities? ☐ No ☐ Yes: _____ _____
- Respiratory system: Any abnormalities? ☐ No ☐ Yes: _____ _____
- Central nervous system: Any abnormalities? ☐ No ☐ Yes: _____ _____
- Musculoskeletal system: Any abnormalities? ☐ No ☐ Yes: _____ _____
- Body condition: ☐ Thin (BCS 1/9 – 3/9) ☐ Normal (BCS 4/9 - 6/9) ☐ Obese BCS 7/9 – 9/9)
- Nostrils: ☐ Open ☐ Mild Stenosis ☐ Moderate Stenosis ☐ Severe Stenosis
- Temperament: ☐ Calm
  ☐ Excited, but settles quickly.
  ☐ Extremely excitable or anxiety.

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BOAS ASSESSMENT:

- Inspiratory effort[1]: ☐ Not present ☐ Mild ☐ Moderate ☐ Severe

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- Stertor[2]: (Low pitch noise): ☐ Not audible ☐ Mild ☐ Moderate ☐ Severe

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- Stridor[2]: (High pitch noise): ☐ Not audible ☐ Mild ☐ Moderate ☐ Severe

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- Cyanosis or Syncope* ☐ No ☐ Yes

[1]**Inspiratory effort**: characterized by evidence of increased effort to inhale the air in with the use of diaphragm and /or accessory muscles of respiration and/or nasal flaring with an increase in breathing rate.

[2]**Respiratory noise** (Stertor and/or stridor) is diagnosed by pharyngolaryngeal auscultation.
Mild: only audible under stethoscope auscultation.
Moderate: Intermittent audible noise that can be heard without a stethoscope.
Severe: Loud, constant audible noise that can be heard without a stethoscope

BOAS EXERCISE TEST (ET)[3] (required for ALL Bulldog, Pug & Boston Terrier breeds)

Inspiratory effort[1]: ☐ Not present ☐ Mild ☐ Moderate ☐ Severe

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- **Stertor[2]: (Low pitch noise): ☐ Not audible ☐ Mild ☐ Moderate ☐ Severe**

- **Stridor[2]: (High pitch noise): ☐ Not audible ☐ Mild ☐ Moderate ☐ Severe**

- **Cyanosis or Syncope* ☐ No ☐ Yes**

[3]**Exercise Test (ET):** The exercise test is only required for the above-mentioned dog breeds with a higher incidence of BOAS.
The test is designed to keep the dog active for 3 minutes. They should be encouraged to trot at 4-5 miles by the assessors or the owners, but not pulled on the lead. Toilet stops should be accommodated. If the dog has reasons that it cannot manage this pace (osteoarthritis, obesity, anxiety) a fast walk should be attempted.
The clinical grading is based on respiratory signs before (pre-ET) and immediately after the exercise test (post-ET). The highest grade from any of the three categories (respiratory noise, inspiratory effort, dyspnoea/cyanosis/syncope) should be given as the final grade.

Assessment:

- Animals with no or mild BOAS symptoms and no other risk factors are considered Fit-To-Fly.

- Animals with moderate BOAS symptoms especially with other risk factors (Obesity, other pre-existing medical conditions and anxious/excitable temperament warrant careful assessment of Fitness-To-Fly.

- Animals with severe BOAS symptoms (Inspiratory effort, severe stridor/stertor, cyanosis/syncope are considered not Fit-To-Fly.

This animal has been evaluated and, at the time of this examination, IS FIT TO FLY ☐

This animal has been evaluated and, at the time of this examination, IS NOT FIT TO FLY ☐

_____ _____

Signature Veterinary Surgeon **Date:**

Print Name: _____

Practice Address: _____

Country: _____

This B.O.A.S is valid for 30 days from the date the document is signed by the Veterinarian Surgeon.

Clinic Stamp

Pet Shippers: A copy of the BOAS checklist must be kept on file for a period of 3 months. In addition, two copies of the BOAS checklist must be presented on lodgement.

Guidance Notes for the Veterinary Surgeon

1. **Initial examination:** The dog should be kept as calm as possible with gentle restraint. If the dog is stressed, allow some time for the dog to settle. Auscultation is performed directly over the larynx from the side, avoiding any upward pressure on the pharynx and larynx. Head should be in a neutral position, not flexed.
2. **BOAS assessment:** In consideration of the brachycephalic breed list, the following "Red flag" breeds that warrant special BOAS evaluation (All Pugs, Bulldogs and the Boston Terrier) These breeds require an exercise test in addition to the resting BOAS grading. The clinical grading is based on respiratory signs before (pre-ET) and immediately after the exercise test (post-ET). The highest grade from any of the three categories (respiratory noise, inspiratory effort, dyspnoea/cyanosis/syncope) should be given as the final grade.

3. Please find the following video links to assist with identifying the various respiratory noises:
   (headphones required to listen to stethoscope auscultation)

   Not Audible: https://www.youtube.com/watch?v=emY7zQxUGhw

   Mild: https://www.youtube.com/watch?v=LMk5szo54Io

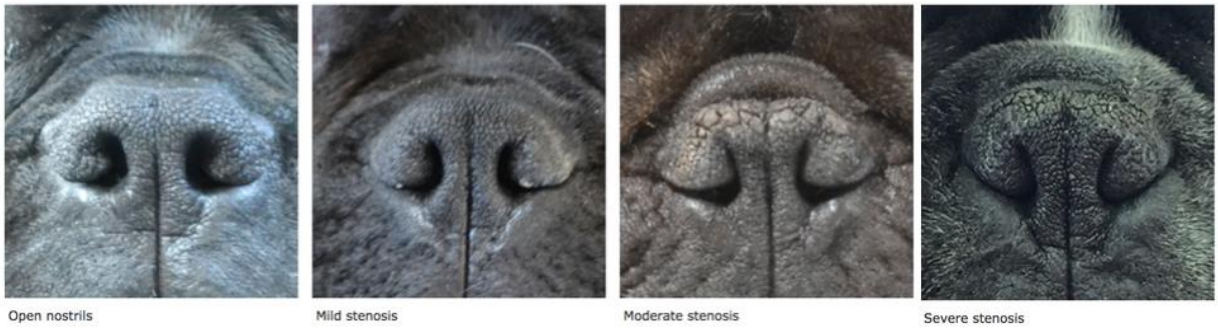
   Moderate: https://www.youtube.com/watch?v=R10CKlqfxQc

   Severe: https://www.youtube.com/watch?v=tP7bXy_YhsM

   Credit and thanks to Cambridge University BOAS research group

https://www.vet.cam.ac.uk/boas/about-boas/recognition-diagnosis#respiratory-noise

4. **Nasal stenosis grading:**

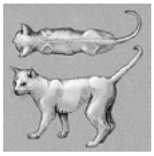
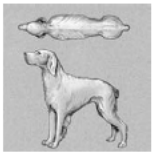
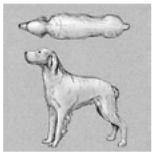
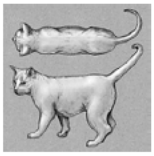


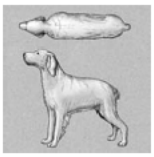
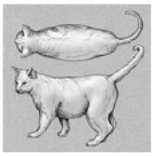
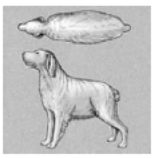
5. **Body Condition Score (BCS)** – Please follow the AAHA 9- point scale below.

6. The presence of any other **pre-existing medical conditions** must be taken into consideration with any animal that is being examined in preparation for air travel. It is the responsibility of the examining Veterinarian to discuss any other risk factors with the pet owner and ensure they fully understand the outcome of the assessment.

7. **<u>In the case of failed dogs:</u>**
   There will be dogs that fail. It is critically important that those dogs which are at a high risk are correctly identified.
   Professional recommendations such as weight loss programs (for obese dogs), travel crate conditioning, referral for upper respiratory tract assessment / surgery (stenotic nares, soft palate, everted lateral ventricles, laryngeal surgery) may be recommended where indicated. All these recommendations will not only improve the dog's safety and comfort during flight but will also improve the dog's overall quality of life.

Body Condition Scoring (BCS) Systems

5 Point	9 Point	Description
1/5	1/9	**Dogs:** Ribs, lumbar vertebrae, pelvic bones and all bony prominences evident from a distance. No discernible body fat. Obvious loss of muscle mass.  **Cats:** Ribs visible on short-haired cats; no palpable fat; severe abdominal tuck; lumbar vertebrae and wings of ilia obvious and easily palpable. 
1.5/5	2/9	**Dogs:** Ribs, lumbar vertebrae and pelvic bones easily visible. No palpable fat. Some evidence of other bony prominence. Minimal loss of muscle mass. **Cats:** Shared characteristics of BCS 1 and 3.
2/5	3/9	**Dogs:** Ribs easily palpated and may be visible with no palpable fat. Tops of lumbar vertebrae visible. Pelvic bones becoming prominent. Obvious waist.  **Cats:** Ribs easily palpable with minimal fat covering; lumbar vertebrae obvious; obvious waist behind ribs; minimal abdominal fat. 
2.5/5	4/9	**Dogs:** Ribs easily palpable, with minimal fat covering. Waist easily noted, viewed from above. Abdominal tuck evident. **Cats:** Shared characteristics of BCS 3 and 5.
3/5	5/9	**Dogs:** Ribs palpable without excess fat covering. Waist observed behind ribs when viewed from above. Abdomen tucked up when viewed.  **Cats:** Well proportioned; waist observed behind ribs; ribs palpable with slight fat covering; abdominal fat pad minimal. 

5 Point	9 Point	Description
3.5/5	6/9	**Dogs:** Ribs palpable with slight excess fat covering. Waist is discernible viewed from above but is not prominent. Abdominal tuck apparent. **Cats:** Shared characteristics of BCS 5 and 7.
4/5	7/9	**Dogs:** Ribs palpable with difficulty; heavy fat cover. Noticeable fat deposits over lumbar area and base of tail. Waist absent or barely visible. Abdominal tuck may be present.  **Cats:** Ribs not easily palpable with moderate fat covering; waist poorly distensible; obvious rounding of abdomen; moderate abdominal fat pad. 
4.5/5	8/9	**Dogs:** Ribs not palpable under very heavy fat cover, or palpable only with significant pressure. Heavy fat deposits over lumbar area and base of tail. Waist absent. No abdominal tuck. Obvious abdominal distension may be present. **Cats:** Shared characteristics of BCS 7 and 9.
5/5	9/9	**Dogs:** Massive fat deposits over thorax, spine and base of tail. Waist and abdominal tuck absent. Fat deposits on neck and limbs. Obvious abdominal distention.  **Cats:** Ribs not palpable under heavy fat cover; heavy fat deposits over lumbar area, face and limbs; distention of abdomen with no waist; extensive abdominal fat pad. 

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Available at aahanet.org/PublicDocuments/NutritionalAssessmentGuidelines.pdf