

American Association of Feline Practitioners 2006 Feline Vaccination Guidelines. Summary: Vaccination in General Practice

Vaccine	Primary Series-Kittens (≤ 16 weeks)	Primary Series-Adolescent/Adult (> 16 weeks)	Booster	Comments
Panleukopenia Virus (FPV) /Feline Herpesvirus-1 and Feline Calicivirus (FHV-1/FCV) Injectable: <ul style="list-style-type: none"> • MLV, non-adjuvanted • Killed, adjuvanted ^[i] • Killed, non-adjuvanted Intranasal <ul style="list-style-type: none"> • MLV, non-adjuvanted 	Begin as early as 6 weeks of age, then every 3-4 weeks until 16 weeks of age.	2 doses, 3 to 4 weeks apart	A single dose is given 1 year following the last dose of the initial series, then no more frequently than every 3 years.	Core <ul style="list-style-type: none"> • Killed vaccines are preferred for use in pregnant cats (and only if absolutely necessary) and in FeLV and/or FIV infected cats, especially those showing evidence of immunosuppression. • Killed panleukopenia vaccines should be used in kittens less than 4 weeks of age. • All kittens and cats should receive at least one injectable panleukopenia injection.
Rabies^e Injectable: <ul style="list-style-type: none"> • Canarypox virus-vectored recombinant (rRabies), non-adjuvanted • 1-year killed, adjuvanted^a • 3-Year killed, adjuvanted^a 	Administer a single dose as early as 8 or 12 weeks of age depending on the product label. Revaccinate 1 year later.	Administer 2 doses, 12 months apart.	Annual booster is required. Vs. Every 3 years or as required by State or local ordinance for 3-year	Core <ul style="list-style-type: none"> • In States and municipalities where feline rabies vaccination is required, veterinarians must follow applicable statutes. • Booster vaccination with a 1-year rabies vaccine is only appropriate in States and municipalities where permitted by law. • Any rabies vaccine can be used for revaccination, even if the product is not the same brand or type of product previously administered. • No laboratory or epidemiologic data exist to support the annual or biennial administration of 3-year vaccines following the initial series.
Feline Leukemia Virus (FeLV) Transdermal: <ul style="list-style-type: none"> • Canarypox virus-vectored recombinant (rFeLV), non-adjuvanted Injectable <ul style="list-style-type: none"> • Or Killed, adjuvanted 	Administer an initial dose as early as 8 – 12 weeks of age, depending on product; a second dose should be administered 3-4 weeks later.	2 doses, 3 to 4 weeks apart	When indicated, a single dose is given 1 year following the last dose of the initial series, then annually in cats determined to have sustained risk of exposure. ^f	Non-Core <ul style="list-style-type: none"> • FeLV vaccination is highly recommended for all kittens. • Booster inoculation is recommended only in cats considered to be at risk of exposure. ^[ii] • In the United States, the 0.25 ml rFeLV vaccine dose may only be administered via the manufacturer's transdermal ^[iii] administration system. • Only FeLV negative cats should be vaccinated; FeLV testing prior to vaccine administration is recommended. • Cats should be tested for FeLV infection before their initial vaccination and when there is a possibility that they have been exposed to FeLV since they were last vaccinated.
Feline Immunodeficiency Virus (FIV) Injectable: <ul style="list-style-type: none"> • Killed, adjuvanted^a 	When indicated, 3 doses are required: The initial dose is administered as early as 8 weeks of age; 2 subsequent doses should be administered at an interval of 2-3 weeks.	When indicated, 3 doses are required: Each dose is administered 2-3 weeks apart.	When indicated, a single dose is given 1 year following the last dose of the initial series, then annually in cats determined to have sustained risk of exposure. ^h	Non-Core <ul style="list-style-type: none"> • FIV vaccine should be restricted to cats at ^[iv] high risk of infection. • Vaccination induces production of antibodies indistinguishable from those developed in response to FIV infection, and interferes with all antibody-based FIV diagnostic tests for at least a year following vaccination. • Cats with positive FIV antibody assay results may have antibodies as a result of vaccination, infection, or both. • FIV antibodies are passed from vaccinated queens to their kittens in colostrum. Colostrum-derived antibodies interfere with FIV diagnosis past the age of weaning in the majority of kittens, but this interference appears to wane by 12 weeks of age. • Cats should test FIV-antibody negative immediately prior to vaccination. • Permanent identification of vaccinated cats

(e.g., using a microchip) will help clarify vaccination status, but will not indicate that such cats are free of infection.

- This vaccine has been shown to provide protection from some, but not all, strains of FIV.

Feline Infectious Peritonitis (FIP) <ul style="list-style-type: none"> • MLV, non-adjuvanted • Intranasal 	If administered, give a single dose as early as 16 weeks of age, and a second dose 3-4 weeks later.	If administered, give 2 doses, 3-4 weeks apart.	Annual booster is recommended by the manufacturer.	Not Generally Recommended <ul style="list-style-type: none"> • According to the limited studies available, only cats known to be feline coronavirus antibody negative at the time of vaccination are likely to develop some level of protection. • Vaccination of cats living within households in which FIP is known to exist or cats that are known to be feline coronavirus antibody positive is not recommended.
Chlamydomydia felis <ul style="list-style-type: none"> • Avirulent live, non-adjuvanted • Or killed, adjuvanted • Injectable 	Administer the initial dose as early as 9 weeks of age; a second dose is administered 3-4 weeks later.	Administer 2 doses, 3-4 weeks apart.	Annual booster is indicated for cats with sustained exposure risk.	Non-Core <ul style="list-style-type: none"> • Vaccination reserved as part of a control regime for cats in multiple-cats environments where infections associated with clinical disease have been confirmed. • Inadvertent conjunctival inoculation of vaccine has been reported to cause clinical signs of infection.
Bordetella bronchiseptica <ul style="list-style-type: none"> • Avirulent live, non-adjuvanted • Intranasal 	Administer a single dose intranasally as early as 8 weeks of age.	Administer a single dose intranasally	Annual booster is indicated for cats with sustained risk.	Non-Core <ul style="list-style-type: none"> • Vaccination may be considered in cases where cats are likely to be at specific risk of infection. [V]
Feline Giardia <ul style="list-style-type: none"> • Killed, adjuvanted^a • Injectable 	Administer a single dose at 8 weeks of age; a second dose is administered 2-4 weeks later.	2 doses, 2-4 weeks apart.	Annual booster is recommended by the manufacturer.	Not Generally Recommended <ul style="list-style-type: none"> • There are insufficient studies available to support the role of <i>Giardia</i> vaccination in preventing clinical disease in cats. • Whether the <i>Giardia</i> vaccine is an effective therapeutic agent in naturally infected cats is currently unknown.

[\[i\]](#) Injectable adjuvanted vaccines have been associated with local inflammatory reactions at injection sites, with the degree of inflammation varying among products. The potential role of local inflammatory reactions in the genesis of vaccine-associated sarcomas remains controversial.

[\[ii\]](#) Cats allowed outdoors, cats residing in open multiple-cat environments, cat living with FeLV-infected cats, and cats residing in households with cats of unknown FeLV-infection status or where introduction of new cats is common. Booster inoculation is not generally recommended for cats housed strictly indoors.

[\[iii\]](#) A recombinant FeLV vaccine available in Europe is designed to be administered by subcutaneous injection; this product differs from the one licensed in the United States.

[\[iv\]](#) For example, outdoor fighting cats and FIV-uninfected cats living with FIV-infected cats.

[\[v\]](#) For example, prior to confinement in multiple-cat environments such as rescue shelters, boarding facilities or catteries where bordetellosis has been confirmed.