THE ROLE OF VETERINARIANS IN IMPROVING ANIMAL WELFARE IN WILDLIFE REHABILITATION

Julia B. Ponder, DVM, MPH
The Raptor Center, College of Veterinary Medicine
University of Minnesota, St. Paul, MN, United States


Abstract: Ensuring the best possible animal welfare in wildlife rehabilitation requires a strong partnership between wildlife rehabilitators and the veterinarians they work with. The individuals in these groups run the gamut from incredibly knowledgeable and experienced to well-intentioned with limited knowledge. Veterinarians are often unaware of their role in the regulatory process and unfamiliar with where to find assistance in clinical wildlife medicine. This presentation will describe a model for improving welfare for wildlife in rehabilitation.

Key words: Wildlife rehabilitation, clinical wildlife medicine, captive wildlife

Introduction

Wildlife rehabilitation is the practice of caring for sick, injured or orphaned wild animals with the goal of releasing them back to the wild. Individuals wishing to practice wildlife rehabilitation are required to obtain a number of permits with specific requirements dependent on which species they wish to care for and what state they are in. Federal regulations require a rehabilitation permit to take, temporarily possess or transport any migratory bird for rehabilitation purposes. A complete listing of the federal permitting requirements can be found in Title 50 of the Code of Federal Regulations. In addition to federal permits, which are issued by the United States Fish and Wildlife Service (FWS), many states also require permits for birds, mammals and other wildlife taxa. These permits are typically managed by the agency overseeing the state’s wildlife and natural resources. In addition, there are some states where regulatory authority extends to the county or regional level. A key requirement that rehabilitators must meet for these permits is to have a relationship with a veterinarian, thereby establishing a decision-making triad between the rehabilitator, the veterinarian and the regulatory agency. Each component of this triad has some level of accountability for ensuring good welfare of the wild animals held in captivity for treatment, an important and emerging concept in wildlife rehabilitation.

According to the AVMA, animal welfare refers to “how the animal is coping with the conditions in which it lives.” The Five Domains model evaluates welfare status in light of either positive or negative experiences in each of five categories: Nutrition, environment, physical health, behavior and mental state. Ensuring good welfare for wildlife in captivity is a human responsibility that must take into account the minimization of negative (pain, distress) as well as promotion of positive welfare states. Veterinarians are uniquely qualified to provide support services and consultation related to animal health and welfare, which they commit to when they take the Veterinary Oath:

Being admitted to the profession of veterinary medicine, I solemnly swear to use my scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering, the conservation of animal resources, the promotion of public health, and the advancement of medical knowledge.
Whether actively involved with wildlife rehabilitation or not, veterinarians have an ethical commitment to provide, within their ability and at minimum, emergency care for suffering wildlife. This is reflected by the special privileges that the FWS accords to veterinarians, providing a permit exemption allowing for emergency veterinary care of wild birds with the expectation that the animal will be transferred to a licensed rehabilitator within 24 hours after it is considered stable. They must, however, meet the requirement of notifying the FWS within 24 hours of possession of an endangered or threatened migratory bird species. As state regulations may or may not allow for this exemption, it is recommended to check with local regulatory authorities.

Role of Veterinarian in Improving Animal Welfare

Medical and surgical care
Under federal migratory bird regulations, a veterinarian who agrees be part of the wildlife rehabilitation permitting process commits to providing medical care for the birds. Provision of veterinary care to maximize health is a key component of animal welfare. The veterinarian may provide or recommend medical or surgical treatment options for injured or ill wildlife. The decision to treat should be made on sound principles of veterinary medicine and take into consideration individual and population biology and ecology, nature of disease or injury, disease risks, legal requirements and animal welfare. With the wide variety in taxa and species seen in wildlife rehabilitation, the veterinarian must rely on a variety of resources to supplement their knowledge. In addition, the veterinarian’s skill level, facilities and resources (as well as the rehabilitator’s) must be taken into account during the decision-making process. For example, coaptation as a method of avian fracture repair rarely provides adequate restoration of flight for release back to the wild. Having the ability and resources to provide appropriate surgical intervention will result in a higher rate of positive outcomes.

Preventative medicine
While the first line of responsibility for patient welfare is usually the permitted rehabilitator, the veterinarian brings a strong background in preventative medicine and whole patient perspective, as well as a responsibility to prevent and relieve animal suffering (see Veterinarian’s Oath). Many medical issues may arise in the wild patient as a result of management issues. Appropriate facilities also play a crucial role in the long-term outcome for the animal as they can help prevent the development of health issues secondary to poor management. While the rehabilitator has primary accountability for management, the veterinarian should recognize when management is playing a role in pathology.

Patient advocate:
In addition to the licensed rehabilitator and state officials, members of the public and media often become involved with wildlife cases. Emotions may run high and pressure from external stakeholders may be brought to bear. The veterinarian is uniquely positioned in this situation. As the patient’s advocate, he/she should ensure that decisions are based on animal welfare and good medical judgment. Decisions should be in the best interest of the animal and not a response to human emotional pressure.

Ethics and decision-making in clinical wildlife medicine

Decisions on whether to treat
The primary goal of wildlife rehabilitation is the release back to the wild of a healthy animal that is able to thrive and survive in its natural habitat. The prognosis for the animal to be restored to this level of health should be a major consideration in the decision to treat. Successful release potential is predicated on several criteria:
• Complete recovery from its injuries
• Capacity for normal or full physical function
• Ability to find and acquire food in the wild
• Presence of species-typical behavior

Consideration of whether or not to treat an injured or ill wild animal begins with initial triage. The extent or severity of an injury may dictate whether it can be repaired adequately for normal function. If an animal is unlikely to survive, has a poor prognosis, or if it has injuries that are treatable but will result in a permanent disability, euthanasia should be considered to relieve suffering. For birds, the treatment for some conditions is clearly addressed in the FWS Federal Migratory Bird Rehabilitation Permit requirements:

“You must euthanize any bird that cannot feed itself, perch upright, or ambulate without inflicting additional injuries to itself where medical and/or rehabilitative care will not reverse such conditions. You must euthanize any bird that is completely blind, and any bird that has sustained injuries that would require amputation of a leg, a foot, or a wing at the elbow or above (humero-ulnar joint) rather than performing such surgery...”

The regulations continue to say that an exemption can be made with a written recommendation from a veterinarian with a commitment to provide medical care for the bird for the duration of its life. These statements reflect FWS’s confidence that the veterinarian involved in a case understands the impacts of what he/she is recommending and is committed to the welfare of the animal.

Decisions on outcome
When there is no realistic expectation of a successful outcome for a patient (normal recovery and release back to the wild), a secondary option such as placement or euthanasia is considered. It is at this point that the veterinarian’s role often becomes more critical and less clear. In order for a wild animal to be placed in an education or display facility, it must be transferred from a rehabilitation permit to an education permit—a process typically requiring a letter signed by the veterinarian of record stating the reason the animal cannot be released to the wild, confirming that it is appropriate for placement and identifying a permitted facility for the animal’s management. It is in this decision that the regulatory agencies are most dependent on the veterinarian’s ethical and sound judgment. The veterinarian’s obligation is to the animal’s welfare and there are many factors that should influence the decision. The question to be asked is, “should this animal be kept in permanent captivity”, not “can it be kept?” What is the purpose of keeping it in captivity? Can it be expected to adapt and tolerate captivity well? Will it accept the housing situation, captivity, training and feeding required? The responses to these questions must take into consideration all aspects of good animal welfare and prospect of meeting an adequate level of well-being.

The requirement that a native wild animal must have a permanent injury and be non-releasable in order to be kept in captivity means that all the permanent residents of wildlife facilities have a special need or disability. Prior to committing an animal to a lifetime in captivity, the veterinarian should thoroughly evaluate its condition and consider how its disability will impact day-to-day care and management in a display or education facility. Conditions recognized to result in significant chronic pain and/or complete blindness should likewise be considered as reasons not to place a bird in permanent captivity.

Euthanasia as an outcome is one of wildlife medicine’s strongest realities. It should be considered not as a sign of failure, but as “an act of ethics and compassion.” Veterinarians must recognize and respect
that agency regulations may dictate what they may or may not do relative to treatment or euthanasia. While euthanasia to end suffering is always appropriate and may be done without additional permits, getting permission should be considered where possible, especially when dealing with endangered or threatened species. Veterinarians must also meet their obligation to the animal’s welfare in addition to the processes of the regulatory agencies. Unfortunately, veterinarians are often unaware of the magnitude of their responsibility. The FWS relies on the sound scientific judgment and expertise of the veterinarian in the decision-making process, while veterinarians often consider their role more perfunctory. As mentioned earlier, some conditions such as blindness or amputation require euthanasia unless special provisions are made. Those special provisions require a veterinary certificate for exemption. As with recommending permanent placement of a wild bird in an education facility, the request for exemption requires careful consideration. Understanding the full implications of the decision is important – it is not whether the procedure can be done, but if it should be done.

References