

Cooperative Care: When to touch and poke?
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Introduction

Cooperative care involves teaching an animal to not only tolerate handling and husbandry procedures, but to be an active, willing participant in these experiences. The first step in the process is teaching a consent behavior that signals the dog is ready for touch or a procedure, but it can be tricky to know when to move on to the next step in your training plan. In this session, we will break down the beginning steps of cooperative care training and how to know when to add in touch and procedures.

The point of consent will be unique for each patient and possibly each procedure. Some of the most common consent cues to use are stationing or targetting, such as a chin rest. For this lecture I will be focusing on a chin rest behavior for consent since it is useful for many different procedures, including physical examination, vaccination, venipuncture, ear or eye medications, and more.

Teaching a chin rest

For the chin rest behavior, the dog will rest their chin on an object for a given amount of time. I prefer that the dog is in a standing position since it allows access to more areas of the body, but a sit or down position may be useful for some procedures.

What you will need to get started is a target item such as a towel, pillow or blanket and a platform for the target item such as a chair or stool.

To begin, start with the dog in a standing position. Using a lure encourage the animal to move their nose over the target item with a treat. Say "yes" or click to mark the behavior and follow with a treat. Continue to shape toward the dog moving more of his chin over the target. If the animal moves into a sit or down, use a food lure or toss a treat away to reset the dog back into a standing position.

Once the animal is placing their head over the target, continue to shape toward the dog resting their chin on the item by either marking downward movement of the head or using a food lure to encourage the dog to place their chin on top of the target.

Next begin to fade the lure. To fade the lure, start by holding your hand as if you have a treat (but with none inside) to lure into position, mark the behavior and feed treats with the other hand. Eventually the goal is to move your hand out view, continuing to reinforce for offering the chin resting on the target. Once offering the chin rest with as little prompting as possible, begin to increase duration by mixing in slightly longer durations with short durations.

Teaching consent – Adding in movement and touching

Once the dog is reliably offering the chin rest behavior it is time to teach them that they are in control of the interaction by using the chin rest for consent. Before touching I add in hand movement first. Start with raising your hand in view, then click/mark and treat. Continue to move your hand toward the patient a few inches at a time. During training, the dog may choose to move away from the chin rest at some point. When the dog opts out it is a good opportunity to for the dog to learn that no reinforcement is given for lifting head and/or moving away and that is how they opt out of something happening to them. If the dog chooses to lift his head, pause and reflect on what occurred just

beforehand. Did you reach toward them? Was there a noise or movement inside or outside the room? Have you been training for a while and the dog is mentally tired? Use what you learn to set the patient up for success going forward. Invite the dog to resume the behavior if they have moved away and if they return start with an easier rep before resuming where you left off. If the dog chooses to not return, give them a break or end the session. During a training session, if the dog opts out multiple times in a row or it is difficult to get them to reengage, slow down, return to the last successful step. Moving forward split the criteria down into smaller more achievable steps. You can also help create behavioral momentum by mixing known cues intermittently during training sessions. During training, the goal will be to keep a high rate of reinforcement to help keep the dog's confusion level low to be successful.

During training watch the dogs body language closely to know when you to move onto the next step in the training plan or if you should stay at your current step a little longer. Some things to look for are a relaxed body, readily accepts treats, keeping their body stationary/no avoidance behaviors (i.e., not shifting away), offering the chin rest with enthusiasm after resetting by tossing a treat and orientation of chin rest in proximity to you.

Once the dog is doing well with you reaching out, you can begin nonthreatening touches. I start with touching the shoulder. In some cases, the dog may move slightly when you first touch them. Mark and reinforce after touching, even if they move a little. As the dog becomes more familiar with the process the movement should become less and you will be able to mark/treat only when they keep their head down. If the patient continues to move or the movement becomes more fearful, slow down and return to approximations of reaching toward them.

Predictor cues

To help with predictability and reduce anxiety for the patient add in a cue to tell the patient what you are going to do. The ones I use often are - "shoulder," "pinch," and "poke." I will also add cues for other sensitive areas I may touch or if I am starting my touch at someplace besides the shoulder like the ear or hip. To do this, pair the action with the word. The process will look like: say "shoulder," touch shoulder, mark while touching shoulder, stop touching shoulder and give a treat.

Training for exam and other procedures

Once the dog is doing well with touching the shoulder gradually lengthen the duration of touching and begin to glide your hand to other parts of the body before marking and treating. When comfortable with one hand, add a second hand. Start by touching with each hand individually and then touching with both hands. Some dogs will find the movement and touching with two hands to be much more difficult than one. One hand means petting while two hands mean an exam or procedure. Proceed slowly and move at the pace the dog is comfortable with. You may need to break down the movement of the second hand into smaller steps and return to approximations of reaching before eventually touching.

If your goal is for a subcutaneous injection, then the next step is to add in a pinch/tent of the skin. Some cases you can add this step in quickly while others will require you to break down the pinch/tent into smaller steps, starting with a slight scratch/pinch and working up the full tenting of the skin. When pinch/tent is going well, introduce the syringe. Having the dog target the syringe with their nose or paw can help to reduce their anxiety with the item you are holding. If the dog is showing avoidance to the syringe in your hand you can place it in view during a training session to start. Once the dog is comfortable with the syringe in your hand begin approximations of moving the syringe toward the dog, a pretend poke with the capped needle and then pretend pokes with blunt tip needles.

For other items that may need to be introduced such as a stethoscope, nail trimmers, eye meds, etc. You will use a similar training plan for each item. Remembering to progress at a pace the dog is comfortable with.

Resources

1. Howell, A., and Feyrecilde, M. (2018) *Cooperative Veterinary Care*. John Wiley & Sons