Detailed ER Triage Guide for Dogs & Cats

For staff, fosters, facilities, events and transport teams

RECOGNIZE URGENCY • ACT WITHIN TRAINING • DO NOT DELAY TRUE EMERGENCIES

Implementation Edition • July 2026

FIELD TRIAGE ONLY

This guide helps personnel recognize urgency and choose the next action. It does not replace veterinary diagnosis or treatment. If an animal appears critically ill, do not delay departure to complete a prolonged assessment.

RED • CRITICAL — LEAVE FOR THE ER NOW

Airway & breathing

Gasping; struggling; abdominal effort; neck extended; cannot settle; choking; blue/gray/purple gums; severe airway noise; any open-mouth breathing in a cat; calm resting respiratory rate over about 40/min with effort.

Collapse / shock

Unconscious; sudden collapse; cannot stand; severe weakness with pale gums; minimally responsive; rapid deterioration; suspected internal bleeding.

Major trauma

Vehicle strike; significant fall; crush injury; major attack; deep bite; penetrating injury; suspected fracture; chest/abdominal/head/spinal trauma; large open wound; uncontrolled bleeding.

Seizure / neurologic

Seizure about five minutes; repeated seizures; no normal recovery; sudden inability to walk; paralysis; severe disorientation.

Heat emergency

Uncontrolled panting; extreme drooling; abnormal gums; staggering; vomiting/diarrhea; confusion; collapse; seizure.

Bloat / urinary / allergy

Dry-heaving with swollen painful abdomen; male cat repeatedly straining with little/no urine; facial, tongue, or throat swelling; breathing changes; collapse.

Poison / eye

Symptomatic toxin exposure; severe drooling, tremors, seizure or collapse; eye protrusion, penetration, major trauma, sudden blindness, chemical exposure or severe swelling.

ORANGE • EMERGENT — CARE GENERALLY WITHIN 1–2 HOURS

Signs

Repeated vomiting; diarrhea with lethargy; significant blood; dehydration; painful abdomen; moderate bite wound; wound needing closure; stable suspected fracture; significant pain; persistent coughing with distress; possible foreign body; weak/cold puppy or kitten; incision opening; inability to keep water down.

YELLOW • URGENT — SAME-DAY VETERINARY CONTACT

Signs

Persistent cough without distress; weight-bearing limp; minor puncture; eye redness/discharge; ear pain; vomiting with continued abnormal behavior; persistent diarrhea; reduced appetite with lethargy; mild dehydration; painful swelling; persistent abnormal behavior.

GREEN • MONITOR — DOCUMENT & REASSESS

Signs

Small superficial scrape; isolated vomit with immediate return to normal; mild soft stool; temporary transport anxiety; minor appetite change without lethargy; mild skin irritation.

60-SECOND EMERGENCY CHECK	
A — AIRWAY	Is the airway open? Is the animal choking?
B — BREATHING	Is breathing easy and quiet, or struggling?
C — CIRCULATION	Is there major bleeding? What color are the gums?
D — DISABILITY	Is the animal alert? Can it stand? Is it seizing or severely disoriented?
E — EXPOSURE	Is there trauma, heat, toxin exposure, severe swelling, or another obvious cause?

Could this animal become significantly worse during the next 30 minutes if we do nothing?
YES — or UNSURE — call the veterinary ER and prepare to transport.

Escalate sooner

Puppies, kittens, seniors, brachycephalic animals, and animals with known medical conditions may deteriorate faster and should be escalated sooner.

After-hours / weekend chain

AFTER HOURS / WEEKENDS
CANINE OR FELINE COORDINATOR FIRST → COORDINATOR CONTACTS DIRECTOR → DIRECTOR MAKES FINAL MEDICAL DECISION → COORDINATOR SCHEDULES / COORDINATES APPROVED CARE

RED emergency exception: begin emergency response and go. Notify the appropriate coordinator immediately or as soon as safely possible. The coordinator notifies the Director.

ASPCA Animal Poison Control Center: 888-426-4435 • Fee may apply