NEW MONTHLY

Solensia®
Frunevetmab

FELINE OSTEOARTHRITIS

Management Program



Personalised Osteoarthritis Treatment Plan for:

.....

zoetis

FELINE OA
Owner Checklist

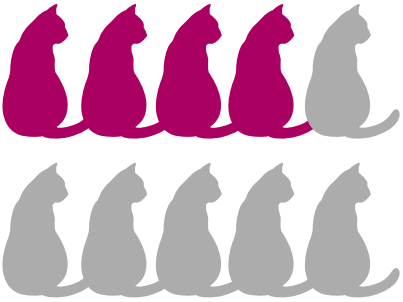
Does your cat...	yes	no
Have difficulty climbing up or down stairs?		
Have difficulty self-grooming?		
Have difficulty chasing moving objects?		
Have difficulty jumping up?		
Have difficulty jumping down?		
Have difficulty running?		

Is your cat...	My cat couldn't be less					My cat couldn't be more
Energetic & enthusiastic?	0	1	2	3	4	5
Happy & content?	0	1	2	3	4	5
Active & comfortable?	0	1	2	3	4	5
Calm & relaxed?	0	1	2	3	4	5

Quality of Life (QoL)

Additional History...	yes	no
Do you think your cat shows signs of pain?		
Have you noticed any changes in your cat's behaviour?		
Has your cat ever been injured?		
Have you ever given your cat medication for pain?		
Has your cat's weight changed over the past year?		

Solensia®
Frunevetmab



An estimated 40% of cats suffer from feline osteoarthritis[1]

A condition that causes painful joints and limits the cat's mobility.

Osteoarthritis can affect cats of all ages, breeds, shapes and sizes but it is more common in middle aged or older cats. Osteoarthritis in cats is caused by the deterioration of soft tissue, bone and cartilage in one or more of the cat's joints. Once this occurs, there is a general decline in mobility and, as a result, the cat's physical behaviour and overall quality of life are compromised.

The good news is that with proper management, the effects of osteoarthritis can be substantially reduced; enabling cats to live happier and more active lives. Working in partnership with your vet to devise a complete care program can improve the quality of life for your cat and ease the management of feline osteoarthritis.



1. Enomoto, M., Lascelles, B. D. X., & Gruen, M. E. (2020). Development of a checklist for the detection of degenerative joint disease-associated pain in cats. Journal of feline medicine and surgery, 22(12), 1137-1147.

zoetis

STAGE 1 | Diagnosis

Month	Ownership	Actions
1	Vet	1. OA diagnosis confirmed by a combination of physical examination, case history and additional tests, as required. 2. Weigh cat and record weight & body condition score. 3. Administer Solensia monthly injection. 4. Make 2nd month appointment: Date: ..... Vet
2	Vet	1. Assess progress. 2. Administer Solensia monthly injection. 3. Long-term management program — explanation and agreed plan. 4. Make 3rd month appointment: Date: ..... Nurse/Vet 5. Make 6th month appointment: Date: ..... Nurse/Vet

Solensia®
Frunevetmab

Pet Owner Pain Assessment

Month 1

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Month 2

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Notes:

STAGE 2 | Management Plan

Month	Ownership	Actions
3		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.
4		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.

Solensia®
Frunevetmab

Pet Owner Pain Assessment

Notes:

Month 3

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Month 4

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

STAGE 2 | Management Plan

Month	Ownership	Actions
5		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.
6	Vet	Vet/Nurse Name: ..... Appointment Date: ..... 1. Re-assess progress. 2. Administer Solensia monthly injection. 3. Review long-term plan and 6 month focus. 4. Make 6 monthly vet appointment: Date: ..... 5. Reaffirm and book next month's nurse/vet appointment: Date: .....

Solensia®
Frunevetmab

Pet Owner Pain Assessment

Notes:

Month 5

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Month 6

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

STAGE 2 | Management Plan

Month	Ownership	Actions
7		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.
8		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.

Solensia®
Frunevetmab

Pet Owner Pain Assessment

Notes:

Month 7

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Month 8

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

STAGE 2 | Management Plan

Month	Ownership	Actions
9		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.
10		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.

Solensia®
Frunevetmab

Pet Owner Pain Assessment

Notes:

Month 9

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Month 10

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

STAGE 2 | Management Plan

Month	Ownership	Actions
11		Vet/Nurse Name: ..... Appointment Date: ..... 1. Administer Solensia monthly injection. 2. Weigh cat and record weight & body condition score. 3. Agree the area(s) to focus on for the next month: ☐ Weight ☐ Diet ☐ Exercise ☐ Rehabilitation therapy ☐ Hydrotherapy 4. Schedule next month's appointment: Date: ..... Nurse/Vet 5. If a nurse recheck, then any clinical issues referred to vet.
12	Vet	Vet/Nurse Name: ..... Appointment Date: ..... 1. Re-assess progress. 2. Administer Solensia monthly injection. 3. Review long-term plan and 6 month focus. 4. Make 6 monthly vet appointment: Date: ..... 5. Reaffirm and book next month's nurse/vet appointment: Date: .....

Solensia®
Frunevetmab

Pet Owner Pain Assessment

Notes:

Month 11

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Month 12

Score of 0 (no pain) to 10 (severe pain)

1. At its worst, how severe has your cat's pain been in the last week? ☐
2. How much does your cat's pain interfere with their normal activities? ☐

Score of 0 (poor QoL) to 5 (great QoL)

3. What is your cat's quality of life? (refer to QoL scale page 2) ☐

Notes:

Solensia®
Frunevetmab

Notes:

zoetis

Dosing Record

Dose	Date Due	Date Given
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Solensia®
Frunevetmab

Physical Record

Date	Body Weight	Body Condition Score

zoetis



Solensia® is licensed for the alleviation of pain associated with osteoarthritis in cats.
Zoetis Australia Pty Ltd. Level 6, 5 Rider Boulevard, Rhodes NSW 2138.
© 2023 Zoetis Inc. All rights reserved. August 2023. MM-28117.

zoetis