

NEWBORN PUPPY

RESUSCITATION: FIRST RESPONSE

DRAFT FOR VETERINARY REVIEW - NOT YET VETERINARIAN-APPROVED

AT BIRTH - ACT PROMPTLY

Remove membranes from nose and mouth. Place puppy on clean, warm, dry towel; dry thoroughly and stimulate breathing with gentle, brisk rubbing. Keep airway aligned and prevent heat loss.

ASSESS: BREATHING / MOVEMENT & TONE / HEART RATE

VIGOROUS: moving, breathing and responding -> keep warm; monitor.

NOT BREATHING / GASPING: immediate assisted ventilation is the priority.

No detectable heartbeat: trained rescuer initiates newborn CPR immediately.

FIRST MINUTE - DECISION PATH

1 BREATHING WELL: dry, keep warm, observe closely. Do NOT suction routinely.

2 APNEA OR GASPING: request veterinary assistance and begin positive-pressure ventilation (PPV) as soon as possible, within the first minute. ONLY a person trained in neonatal bag-mask ventilation should perform it.

3 HEART RATE UNDER 120/min: urgent ventilation assessment/support is indicated, even if some breathing is present. Do not delay ventilation to complete other tasks.

WHILE ASSISTING - TRAINED RESPONDERS

Bag-mask PPV: use correctly fitted neonatal equipment, with the snout, neck and spine aligned. RECOVER suggests 20-30 breaths/min, approximately 1 second per breath, initially using room air. Look for gentle chest rise; reassess heart rate after 30-60 seconds.

No heartbeat -> newborn CPR now. Heart rate below 50/min despite 30-60 seconds of effective ventilation with oxygen -> trained newborn CPR and urgent veterinary escalation. These are not adult-dog CPR protocols.

DO NOT

Swing or shake puppy | Routinely suction a vigorous puppy | Delay ventilation for repeated suctioning | Use adult CPR ratios or unprescribed stimulants.

Breeder phone: _____ Veterinarian: _____

24-hour emergency hospital: _____ Phone: _____

PREPARE BEFORE WHELPING

Training, supplies, escalation and approval

WHEN SUCTION IS APPROPRIATE

Only when a non-vigorous puppy has excessive fluid obstructing the nose or mouth: brief, gentle bulb suction may be appropriate. Do not use repeated or deep suctioning as a substitute for respiratory support; transition promptly to PPV when indicated.

MAKE A WHELPING-ROOM KIT

- [] Clean warm towels, reliable gentle heat source and accurate thermometer
- [] Clock/timer, accurate gram scale, observation and birth record sheets
- [] Correctly sized neonatal masks and self-inflating resuscitation bag (training required)
- [] Puppy-safe warming surface; small suction bulb for selective use
- [] Stethoscope and heart-rate assessment plan (practice with your veterinarian)
- [] Printed directions, emergency contacts, transport carrier and backup helper

ESTABLISH YOUR VETERINARY PLAN

Before delivery, arrange hands-on instruction in neonatal heart-rate assessment, bag-mask ventilation, and neonatal CPR. Discuss emergency C-section access, advanced airway support, post-resuscitation examination, monitoring, and when immediate transfer is required.

AFTER ANY RESUSCITATION

Keep puppy warm without overheating; monitor breathing, heart rate, tone, temperature and nursing. A puppy that needed breathing support should be promptly evaluated by a veterinarian even if it initially improves. Record birth time, interventions and responses.

LOCAL EMERGENCY DETAILS - COMPLETE BEFORE THE LITTER

Primary veterinary clinic / phone: _____

24-hour emergency hospital / phone: _____

Address and route / backup driver: _____

VETERINARY REVIEW & SIGN-OFF [PENDING]

Reviewing veterinarian: _____

Clinic / license: _____

Signature: _____ Date: _____

SOURCE & SCOPE

Adapted in original wording from RECOVER newborn resuscitation guidance (2025).

Boller M, et al. J Vet Emerg Crit Care. 2025;35(S1):S60-S85.

DOI: 10.1111/vec.70013 | <https://pmc.ncbi.nlm.nih.gov/articles/PMC12374490/>

Companion breeder discussion: dremmanuelfontaine.com (February 16, 2026).

Clinical recommendations are directed to veterinary professionals; train before use.