



AMERICAN
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Division of Global Migration and Quarantine

Centers for Disease Control and Prevention

1600 Clifton Road, NE

MS H16-4

Atlanta, Georgia 30329

Control of Communicable Diseases; Foreign Quarantine: Importation of Dogs and Cats

United States Department of Health and Human Services

Centers for Disease Control and Prevention

Founded in 1884, the American Kennel Club (AKC) is America's only not-for-profit all-breed dog registry devoted to the study, breeding, exhibiting, and advancement of purebred dogs. AKC demonstrates its commitment to responsible dog ownership and breeding through a variety of educational, public service, animal welfare, and scientific programs; a multi-million-dollar commitment to canine health research through the AKC Canine Health Foundation; and by conducting thousands of private kennel inspections each year.

AKC recognizes the value of importing purebred dog breeding stock from overseas, freedom of choice in selecting a pet, and ensuring that people may travel with their pets with a minimum of disruption. However, we are also concerned about the increasing documented incidences of the importation of unhealthy random-source pets, particularly for retail rescue or transfer, where public and animal health may be inadequately protected. The majority of pet import regulations to address the public health threat were established prior to the exponential growth in the importation of pets for the rescue and retail sales channels. Unfortunately, they have been unable to prevent or protect against fraudulent or abusive import practices that threaten public and animal health.

AKC supports efforts to ensure that all dogs imported into the United States are fully immunized against dog-maintained rabies virus variant (DMRVV); free of infection, parasites, and contagious diseases; and are individually certified as such by a qualified veterinarian. AKC appreciates recent steps taken by the United States Centers for Disease Control and Prevention (CDC) toward meeting those goals by temporarily suspending dog imports from countries

classified as DMRVV high-risk, using standardized forms, requiring titer results that demonstrate the presence of rabies antibodies in dogs, and developing a reservation system for the quick quarantining of dogs coming from high-risk countries that arrive without an adequate proof of titers. Those steps have proven successful, as CDC has noted decreased instances of fraud, fewer dogs being denied entry into the United States, fewer sick or deceased dogs entering the country, and reduced governmental resources needed to address inadequately vaccinated dogs.¹

AKC lauds CDC's goal of providing additional clarity and safeguards to address the public health risks of DMRVV associated with the importation of dogs into the United States, as sought by the current Notice of Proposed Rulemaking (NPRM). We believe that developing quality permanent dog importation and quarantine oversight rules, standards, and procedures should take into account both data and real-world experiences, and strike an appropriate balance between personal, business, and public health interests. CDC's recognition of the value of stakeholder expertise in shaping reasonable, fair, and appropriate rules for implementing and insuring compliance with its foreign quarantine regulations is deeply appreciated.

AKC Urges Retaining Policy to Allow Personally-Owned Dogs That Have Not Spent Time in DMRVV High-Risk or -Restricted Countries to Be Imported into the U.S. Younger Than Six Months of Age If They Meet Health and Vaccination Requirements

Responsible purebred dog breeders are not strangers to international collaboration. For many decades, these practices—which may include export and import for breeding and whelping, and private transfer of promising show, working, performance, and breeding prospects—have not only helped ensure that the world's unique breeds are preserved and improved, but also that health benefits may be realized through genetic diversity.

International collaboration among responsible dog breeders is most often facilitated by commercial air travel, and is well supported through current CDC regulations, which permit dogs to enter the United States at any port of entry if they have not been in a DMRVV high-risk country during the past six months.² Such dogs must be healthy in appearance, and importers must provide a six-month travel history statement. For dogs under six months of age, the travel history statement will extend to the dog's birth (i.e., cover the dog's entire lifetime).

While we understand CDC's enforcement efficiency-rationale so that its rules align with current USDA importation requirements for commercial dog imports (i.e., dogs intended for resale) under the Animal Welfare Act,³ we respectfully disagree that it should apply to personally-owned dogs arriving in the United States by air. Not only would it take away opportunities currently available to a person to import a personally-owned dog under six months of age, but it would also reflect a failure of the NRPM to consider the difference in risk profiles between non-commercial importers of personally-owned dogs and commercial importers who import

¹ Federal Register, Vol. 88, No. 130 (July 10, 2023), page 43979.

² 42 C.F.R. §71.51, *Dogs and Cats*.

³ 9 C.F.R. § 2.150, *Importation of Live Dogs*, et. seq.

dogs for further distribution via shelters, rescues, or retail outlets. Beyond enforcement convenience, the NPRM does not provide sufficient justification beyond the already-achieved benefits for such a significant change in the treatment of importers of personally-owned dogs.

As noted in the NPRM, puppies may be effectively immunized for rabies by as early as four months of age.⁴ While we appreciate CDC's consideration of the interests of importers of personally-owned dogs as evidenced through the NPRM's proposed exception (to permit an owner to import a maximum of three individual personally-owned dogs under six months of age in the same calendar year if arriving in the United States via a land port through Canada or Mexico provided the dogs have not been in a DMRVV high-risk or -restricted country since birth), we believe the exception would create an unnecessary financial and logistical burden for importers of personally-owned dogs, shift enforcement burdens onto Canada and Mexico, and require increased CDC and U.S. Customs and Border Protection (CBP) enforcement at border land crossings.

A fairer, more efficient system that would still effectively protect the public and animal health from exposure or reintroduction of DMRVV would allow for the importation of personally-owned dogs if a dog is four months of age and is fully vaccinated, and the dog has not been in any DMRVV high-risk country during its lifetime/prior to importation. This option is noted as "*Option 2-less restrictive*" in Table 4 *Summary Table of Important Changes to Regulatory Requirements Based on the Provisions of This NPRM and Alternatives Considered* of the NPRM.⁵ Other requirements proposed by the NPRM impacting the importation of dogs from DMRVV low-risk or -free countries, including microchipping, importer submission of the *CDC Import Submission Form*, and airline requirements, should still be required and satisfied.

AKC Supports Other Proposed Requirements for All Importers, CDC

AKC agrees with CDC that a microchip and importer submission of the proposed *CDC Import Submission Form* and its included information should be required for all dog imports.

We believe that requiring dogs to be microchipped with an ISO-compatible chip prior to importation into the U.S., including for dogs returning to the U.S. after traveling abroad, will be an important step both in combating dog identification fraud and promoting better confidence in the information recorded on rabies vaccination reports and noted in the *CDC Import Submission Form*. Due to the already broad use of microchips as a means of identification and the low costs associated with implanting and registering new microchips, we agree that importers may at most be minimally impacted by this requirement.

We also strongly support the adoption and use of the proposed *CDC Import Submission Form*, and agree the information should be provided to the CDC via a free-to-use system prior to importing a dog to the U.S. Importers should be required to provide their contact information, specific information for each dog being imported, photographs of each dog, purpose of

⁴ Ibid., 1, page 43980.

⁵ Id., page 43999.

importation, travel information, country of departure, and a list of countries visited in the past six months. Importers should be required to present proof of paperwork submission upon their arrival at any U.S. port. Those traveling by air should also be required to present the confirmation to their carrier prior to boarding. We also agree that this requirement will best facilitate CDC's ability to track of the number of dogs imported into the U.S.

AKC Supports Proposed Uniquely-Tailored Arrival Processes Based on Dog's Six-Month Travel History

AKC believes that the proposed importation and arrival requirements, to be based on a dog's six-month travel history and DMRVV profile of countries visited, is a reasonable system that will better ensure efficient quarantine and other enforcement practices, if necessary, and will better mitigate public health risks. To those ends, we agree that:

- Dogs imported from DMRVV-free or low-risk countries should be permitted to arrive at any U.S. port of entry.
- Dogs that have been in a DMRVV high-risk country in the past six months and have a valid U.S.-issued rabies vaccination certificate should be required to arrive at one of the U.S. airports with a CDC quarantine station. Specifically, we agree that proper completion of the proposed *Certification of U.S.-issued Rabies Vaccination for Live Dog Re-entry into the US* by a USDA-accredited veterinarian and certification by a USDA Official Veterinarian will significantly decrease the chances of fraud or that the documents were falsified. In the interests of fairness and efficiency, we also believe that a dog arriving with this certification should not be subject to a veterinary examination upon arrival unless ill, injured, or determined to have been exposed to DMRVV while in transit. In the off chance such dogs arrive ill, injured, or determined to have been exposed, their required arrival at a U.S. airport with a CDC quarantine station will have the added public health benefit of keeping dogs within the arrival facility, not mingling among general human and animal populations as it is transported to another facility.
- Due to their highest risk profile, importers of dogs that have been in a DMRVV high-risk country in the past six months and were vaccinated in a foreign country should be required to provide a completed *CDC Import Certification of Rabies Vaccination and Microchip Required for Live Dog Importations in the US* form and obtain a rabies serologic test from a CDC-approved lab to demonstrate adequate titer levels, be required to arrive at one of the five U.S. airports with both a CDC quarantine station and a CDC registered Animal Care Facility, and have a reservation at the Animal Care Facility to undergo a vet exam or revaccination with a USDA-licensed vaccine at the facility. Moreover, we agree that those who cannot meet the heightened requirements of

obtaining serologic test results before importation should be required to have their dog remain under quarantine at the facility for 28 days after revaccination or until verification of adequate rabies serologic test is obtained.

AKC Supports Proposed Requirements for Airlines

Airlines also play a key role in protecting public health and ensuring the health and safety of animals imported into the U.S. via air. Airlines should be required to incorporate reasonable standard operating procedures to ensure that dogs arriving from the DMRVV high-risk countries are adequately protected against rabies and do not pose a public health threat. Such requirements should include:

- Confirmation that imported dogs possess all required documentation based on their country of origin.
- Ensuring that dogs from high-risk countries only enter the U.S. through an airport with a CDC quarantine station (if US-vaccinated) or an airport with both a CDC quarantine station and a CDC-registered Animal Care Facility (if foreign-vaccinated).
- Ensuring that, if required, the importer possesses a reservation with the CDC-registered Animal Care Facility for examination, vaccination, and quarantine.

To address unfortunate instances where airlines have left dogs languishing in cargo warehouses without proper care, AKC supports requiring airlines to return dogs denied admission to their country of departure within 72 hours, and to arrange for care and transportation until the animal is either returned to its country of departure or is cleared for entry.

To address tragic cases involving the death of a dog *en route* to the U.S. or that die while detained pending determination of admissibility into the U.S., AKC supports requiring airlines to transport deceased dogs (regardless of vaccination status and country of origin) to a CDC-registered Animal Care Facility or, under certain conditions, to other CDC- or USDA-approved veterinary clinic within six hours of arrival, and arrange for necropsy and any subsequent infectious disease testing needed based on the findings. AKC supports assigning responsibility for the costs of a necropsy and testing to the importer, not the airline. To help the agency rule out foreign animal diseases of public health concern as a cause of an animal's death and protect both animal and human health, AKC agrees with requiring airlines to notify the CDC quarantine station of its jurisdiction prior to transporting a dead dog for a necropsy and provide the quarantine station with the final necropsy report and all test results.

AKC Supports Narrow Exception for Service Dogs Described Under 14 C.F.R. § 382.3 That Have Been in a High-Risk Country During Past Six Months

AKC strongly supports the training and use of dogs by humans whose lives are enriched by dogs' performance of essential services, including by service dogs. Service dogs can be taken anywhere their user goes, including on cruise ships, which often sail from American ports to ports in DMRVV high-risk countries. AKC appreciates CDC's consideration of a narrowly-tailored exception for such dogs that have been in a DMRVV high-risk country within the last six months by allowing them to enter the U.S. at a U.S. seaport if the dog is at least six months of age; is microchipped; has either a completed, accurate, and valid *Certification of U.S.-issued Rabies Vaccination for Live Dog Re-entry into the US* or *CDC Import Certification of Rabies Vaccination and Microchip Required for Live Dog Importations in the US* form; and, if foreign-vaccinated, has sufficient and valid titer results from a CDC-approved lab.

AKC Supports Formalizing Requirements for Businesses That Wish to Become CDC-Registered Animal Care Facilities

To ensure dogs receive appropriate veterinary care and are housed in a way that promotes public health and animal safety, AKC supports CDC's proposed requirements for businesses that wish to become a CDC-registered Animal Care Facility, including acquiring a USDA intermediate handlers license and approval by CBP to act as a bonded facility with an active Facilities Information and Resource Management System (FIRMS) code.

The American Kennel Club thanks the Department of Health and Human Services and the Centers for Disease Control and Prevention for their consideration of these comments. Questions may be addressed to:

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