

# Epitome

SPRING 2013

A publication of the Illinois State Veterinary Medical Association



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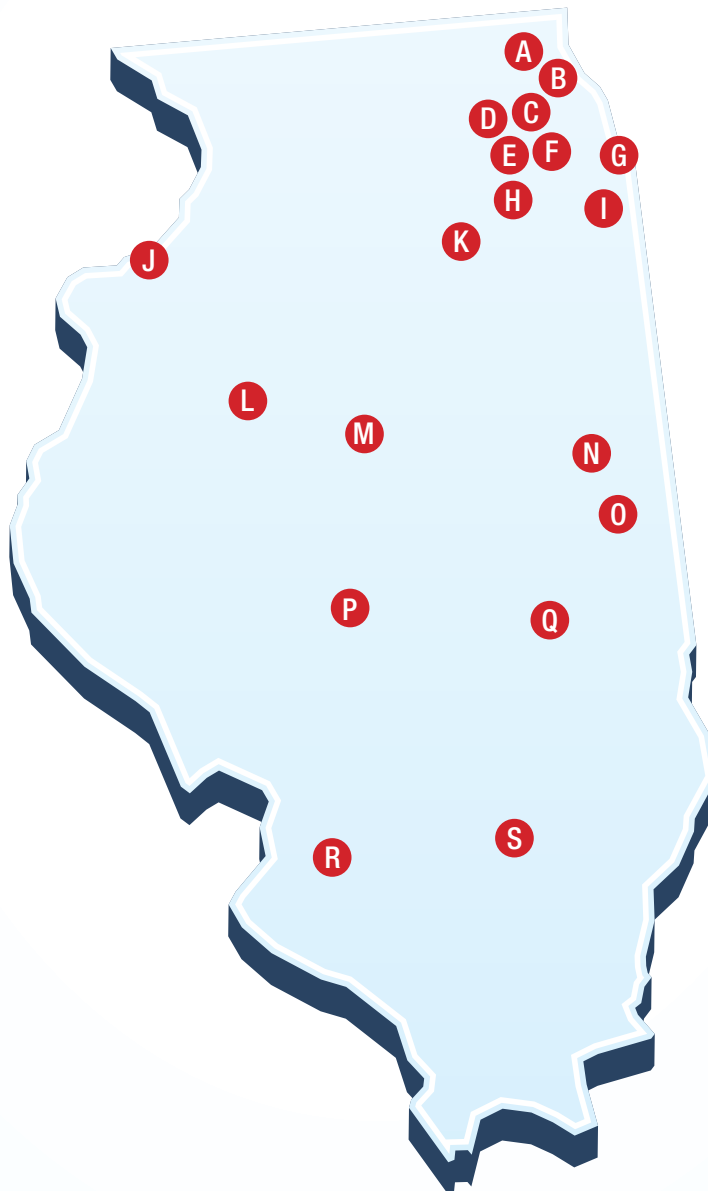
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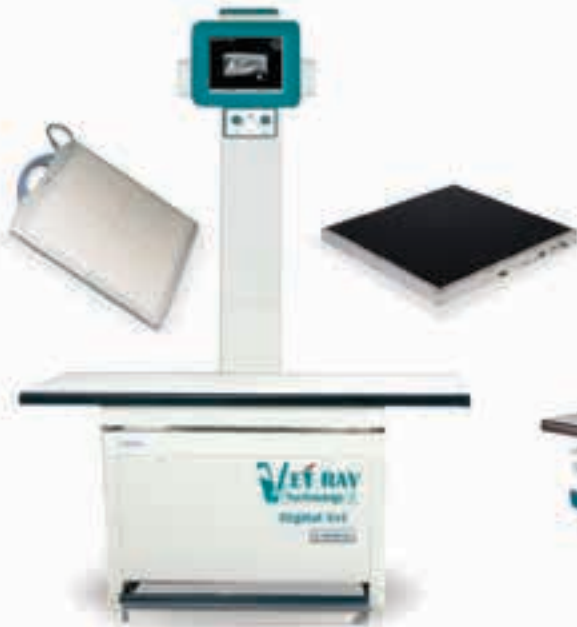




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# The Importance of Team-Building in Business and Life

by Clyde Dunphy, DVM



While attending the AVMA Veterinary Leadership Conference this past January in Chicago, I had the opportunity to attend the keynote address, "World-Class Teams: Adventures in Team Building" with Robyn Benincasa. Robyn is a world-class adventure racer and motivational speaker. Now I know you are probably asking, "What

does this have to do with veterinary medicine?" But I can assure you that your officers, your executive director and all the emerging leaders in attendance received some good information on team-building. Robyn's book, titled *How Winning Works*, is filled with real-life examples of how to take advantage of each team member's strengths and exploiting those strengths by showing members how amazing and important they are to the team. We all are involved with teams daily in our professional and personal lives.

Let's each of us take a critical look at our veterinary team, your practice, ISVMA or a committee. In your practice, are you delivering the best message possible to your clients through your team? How are you working to build a better team and help all team members be the best they can be? Exceptional team-building requires that you hire the inspired. "Motivation is for now, and inspiration is forever." We must all take time to work *on* our practices and not just *in* them. If you set aside time for team-building and customer-service training, it will pay large dividends, both professionally and personally.

At ISVMA, we have an excellent team of officers, committee members, staff members and you, the membership of our professional organization. Each of us has different strengths, and we must each rely on one another to get the task at hand accomplished. We can accomplish much more together as a team than any one of us can individually. We have just finished putting together our committee teams for 2013, and I want to take this

opportunity to thank each of you for your continued support of ISVMA by volunteering for a committee assignment. We are working to get all volunteers on a committee to spread out the work of each committee.

The Legislative Committee has been hard at work on a new bill, the Veterinary Medical Ownership Act of 2013, which will clearly define veterinary practice ownership in Illinois. This bill will be introduced this spring, as well as the renewal of the Veterinary Practice Act. Both of the bills are vital to protecting the pet-owning public and looking after the well-being of all animals in Illinois. We will keep you informed as to the progress of these two important issues.

I had the opportunity to attend the first Veterinary Outreach of the Ovarian Cancer Symptom Awareness (OCSA) organization at Gateway Veterinary Hospital in Saint Charles, Illinois, January 25, 2013. This was the first public event at a veterinary hospital in Illinois, and more information will be available in the near future about this important partnership with OCSA, ISVMA, One Health and your veterinary practice. The ISVMA Public Relations Committee will be working this year on public awareness for the veterinary outreach program: Project Breathe (providing pet oxygen masks to fire departments); and developing white papers to use in your practices, on your websites, in newsletters and to educate the public on a variety of veterinary topics.

In closing, I believe the ISVMA has an excellent team in place with your officers, the Board of Directors, the committee members and the staff. We are prepared to meet the challenges that may lie ahead. I would like to remind you to mark your calendars for the 2013 AVMA Convention in Chicago, celebrating 150 years since the formation of the AVMA in 1863. Illinois is the host state for this event and will be providing the Welcome Center at the July 19-23 convention. I hope you will save the date on your calendar for this historic event. I look forward to seeing you there. 🐾



# Veterinary Outreach Program – Veterinarians to Elevate Cancer Awareness

by Peter S. Weber, MS, CAE



To fight ovarian cancer, the Ovarian Cancer Symptom Awareness Organization (OCSA) is hoping that veterinarians and pets just might save the lives of their owners.

On January 25, a new Veterinary Outreach Program (VOP) was launched at Gateway Veterinary Clinic in St. Charles, and owner Dr. Kurt Klepitsch became the first member of the program, a joint effort that partners OCSA with the Illinois State Veterinary Medical Association.

...Many veterinarians report that pet owners who talk with them about their pets' health issues are often more forthcoming about their own health problems. I know that my veterinarians are familiar with almost every broken bone, surgery and pain symptom I have suffered in the last 25 years! Dr. Klepitsch confirmed pet owners frequently talk about health issues beyond those related to their animal.

"I've been here since 1990, and, over the course of time, you develop personal relationships with a lot of owners, and they tell you a lot of things about themselves and vice versa," Klepitsch said. "There is a lot of give and take, and I'd say conversations about someone's health or that of a child or relative are at least a weekly thing."

Klepitsch noted that a lot more women are getting involved in veterinary medicine, which might help female pet owners open up more about health issues.

"I never envisioned there being something like this today, but hopefully, a lot of people will join this program and help get the message out," he said. "My feeling is that this has to be a subtle thing. Veterinarians are very busy folks, but if we hear things, we want people to know where they can get more help, and if we just reach some of the people, that will be a positive thing. I hope this program will have some legs."

About 45 people gathered in the Gateway Veterinary Clinic waiting room as a number of officials connected with the program spoke. Dr. Brenda Jones represented Gov. Pat Quinn's office and offered the Governor's support for the program.

"We want to be part of this movement that helps women and makes them aware of this disease, and we support this initiative that gives an opportunity for education for women in the state of Illinois," Jones said.



Dr. Kurt Klepitsch, pictured here with Dr. Brenda Jones, deputy director for the Illinois Department of Public Health's Office of Women's Health, was the first veterinarian to volunteer for an innovative new approach to veterinarians advocating public health and bringing awareness to pet-owner health issues.

Another woman who expressed hope for the program was Vallie Szymanski of St. Charles, who serves as the executive director of OCSA and has been a client of Dr. Klepitsch for 20 years. She said Klepitsch has taken care of her cats and dogs and that she has had many conversations about human health issues with him during that time.

"I frequently have talked with Dr. Klepitsch about a number of issues after he was done examining one of my pets so as to not interrupt him, and, while he never pretended to be a medical doctor, he'd often suggest that I have certain things checked out," Szymanski said.

"My father was a veterinarian and lived in a rural area where there aren't a lot of doctors all the time, and veterinarians are often sought out for medical advice. But here, they can get help."

Symptom awareness is an important element in addressing ovarian cancer and a groundswell of support for the VOP program is already building. Veterinary practices are joining the program, there is strong support from the AVMA and the One Health Commission, and some large drug companies have initiated discussions with us to offer financial support and take the Veterinary Outreach Program national.

A number of those in attendance admitted their lives had been touched by ovarian cancer, including Dr. W. Ron DeHaven, chief executive officer of the American Veterinary Medical Association....



"My mother died of ovarian cancer, and this is an exciting program that we feel is quite natural given that human health and animal health are inseparable and are tied together," he said.

The above excerpt reprinted with permission from The Courier-News, Aurora

The Veterinary Outreach Program is consistent with the mission of the One Health Commission to establish closer professional interactions, collaborations, and educational and research opportunities across the health sciences professions, together with their related disciplines, to improve the health of people, animals, plants and our environment.

One Health is the collaborative effort of multiple health science professions, together with their related disciplines and institutions — working locally, nationally and globally — to attain optimal health for people, domestic animals, wildlife, plants and our environment.

ISVMA is proud to have joined OCSA in a new and unique approach to leverage the relationships that veterinary medical professionals have with their clients to improve the quality of their lives. Pet owners care about the health of their animals. Pets need healthy owners. ISVMA and OCSA are working together to make



Front: Cindy Hooper, DVM. Middle: Jennifer Wahlund, DVM; Rosemary Lo-Giudice, DVM, CCRT, CVA, VSMT; Joanne Carlson, DVM (ISVMA Board of Directors member); Kandice S. Norrell, DVM, BS, BVSc (ISVMA Public Relations Committee chair); Gail Novak, DVM; and Roger Mahr, DVM (president of the One Health Commission). Back: Peter Weber, MS, CAE (executive director of the ISVMA), Clyde Dunphy, DVM (president of the ISVMA); Kurt Klepitsch, DVM; and Ron DeHaven, DVM (CEO of the American Veterinary Medical Association).

sure that owners take care of their own health issues so that they can take care of their pets. Together, we will fight ovarian cancer with animal passion! 🐾

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# Welcome New Members

ISVMA would like to welcome the following new members who have joined from November 14, 2012, to February 8, 2013. Thank you for your support! Please help us spread the news about the many benefits of membership in ISVMA — where dues are an investment that pays tremendous dividends!

## New Certified Veterinary Technician Members

---

Barnes, Adrea, CVT  
Bilski, Kathleen, CVT  
Headrick, Anna, BS, LVT  
Kopinski, Amy, CVT  
Palumbo, Stephanie, CVT  
Panozzo, Abby, CVT  
Schuh, Jessie, CVT  
Smith, Megan, CVT  
Valentine, Rachel, RVT

## New Veterinarian Members

---

Acebey, Lynne, DVM  
Arcaro, Isla, DVM  
Beebe, Terry, DVM  
Brown, Richard, DVM  
Eschmann, Rebecca, DVM  
Guild, Ayla, VMD  
Guzinski, Margaret, DVM, BS  
Jablanovic, Branko, DVM, MA  
Joy, Jeremy, DVM  
Klepitsch, Kurt, DVM  
Kuo, Sabrina, DVM, BS  
McManus, Cara, BVMS, MRCVS  
Nguyen, Lisa, DVM  
Pyatetsky, Talia, VMD  
Roessler, Michele, DVM  
Sisto, Lara, DVM  
Wahlund, Jennifer, DVM  
Yeley, Ericka, DVM

## New DVM Student Members

---

Borchardt, Cindy  
Bozelka, Frank  
Byles, Beth  
Byrum, Mark  
Childs, Brittany  
Clark, Andrew  
Collins, Jaclyn  
Coty, Tanya  
Daily, Laura  
Darcy, Shannon  
Dow, Michael

Drewno, Margaret  
Fehr, Justin  
Ferrara, Lauren  
Fiedler, Tess  
Field Gard, Sherri  
Fink, Amy  
Fischer, Tessa  
Foreman, Catherine  
Freed, Ryan  
Getty, Maureen  
Gillespie, Autumn  
Glenn, Ellen  
Goff, Stephanie  
Gould, Amelia  
Gunderson, Paige  
Hillenbrand, Maria  
Hooper, Julie  
Huang, Tzu Yun  
Humphrey, Jann  
Juna, Jillian  
Kane, Lauren  
Karnia, James  
Kazmi, Fatima  
Kelling, Mackenzie  
Kline, Zachary  
Koehler, Justine  
Kuhl, Amanda  
Kuhn, Jenny  
Kuntz, Kristin  
Lee, Eugene  
Leister, Katie  
Li, Joyce  
Luciano, Janina Paula  
Mallo, Christine  
Martin, Samantha  
Martychenko, Melody  
Mason, Brigitte  
Mettendorf, Kiley  
Milazzo, Daniele  
Mitas, Angela  
Mohus, Alyssa  
Molitor, Laure  
Morauw, Coralie  
Morton, Erica  
Moskop, Sarah  
Navrotski, Emily  
Netherton, Sarah

Niemiec, Nickolas  
Nix, Mara  
Nourie, Jessica  
Odyniec, Elizabeth  
Ortiz-Kofoed, Shannon  
Pasi, Hilary  
Piccione, Michelle  
Ponton, Jessica  
Rodriguez, Kayley  
Rupp, Natalie  
Rushing, Robert  
Ryan, Mark  
Santonacita, Paulette  
Sawa, Ashley  
Schanks, Jacob  
Schecker, Teresa  
Schneider, Lisa  
Seki, Mihoko  
Sloter, Nicole  
St. John, Kathryn  
Stoka, Julie  
Strong, Anne  
Sutton, Blake  
Swanson, Danielle  
Varvil, Mara  
Vignocchi, Alexandra  
Voelker, Julie  
Wagner, Jennifer  
Warren, Stephanie  
Weber, Lindsey  
Weil, Malka  
Welker, Lauren  
Wessels, Julianna  
Willenburg, Danielle  
Wisniewski, Marcus  
Wolsic, Cassandra  
Wright, Heather  
Yanik, Eliza  
Zachar, Steven  
Zary, Steven  
Zawisza, Amanda

## New CVT Student Members

---

Pawlus, Tierra, CVT  
Roberts, Gloria, CVT 🐾



**Q:** I have a question about performing acupuncture. I am a veterinarian in Illinois and just attended a daylong acupuncture course at the North American Veterinary Conference. I wanted to know about the legality of performing acupuncture based on this NAVC course, because I would have had some training but not be a certified acupuncturist.

**A:** It is always best to have some certification that demonstrates a level of experience and expertise with a medical modality before using it in practice. If you were to injure an animal or upset a client with something that occurs during the acupuncture treatment of his or her pet and the client were to file a complaint with the IDFPR, the Veterinary Licensing & Disciplinary Board would be much more likely to discipline you because of a lack of sufficient training in the modality.

**Q:** Is there any law that you are aware that requires clinics (new) to have a designated room for their X-ray? I have a clinic that is building a new location and had heard this from several people. However, neither my equipment rep nor I am aware of any such law.

**A:** The Illinois Emergency Management Association indicates that there is no requirement for a separate X-ray room.

**Q:** What is required to be included in our patient records?

**A:** The requirements for patient records in Illinois are defined in the Veterinary Medicine and Surgery Practice Act:

*(225 ILCS 115/25.17)*

*(c) Each person who provides veterinary medical services shall maintain appropriate patient records as defined by rule. The patient records are the property of the practice and the practice owner. Patient records shall, if applicable, include the following:*

- (1) patient identification,*
- (2) client identification,*

- (3) dated reason for visit and pertinent history;*
  - (4) physical exam findings;*
  - (5) diagnostic, medical, surgical or therapeutic procedures performed;*
  - (6) all medical treatment must include identification of each medication given in the practice, together with the date, dosage, and route of administration and frequency and duration of treatment;*
  - (7) all medicines dispensed or prescribed must be recorded, including directions for use and quantity;*
  - (8) any changes in medications or dosages, including telephonically or electronically initiated changes, must be recorded;*
  - (9) if a necropsy is performed, then the record must reflect the findings;*
  - (10) any written records and notes, radiographs, sonographic images, video recordings, photographs or other images, and laboratory reports;*
  - (11) other information received as the result of consultation;*
  - (12) identification of any designated agent of the client for the purpose of authorizing veterinary medical or animal health care decisions; and*
  - (13) any authorizations, releases, waivers, or other related documents.*
- (d) Patient records must be maintained for a minimum of 5 years from the date of the last known contact with an animal patient.*
- (e) Information and records related to patient care shall remain confidential except as provided in subsections (a) and (b) of this Section.*

*(Source: P.A. 96-1322, eff. 7-27-10.)*

**Q:** I know the ISVMA was involved in writing a veterinary sales-tax regulation in Illinois a few years ago. But, I need to be reminded of some of the requirements and how to become a non-retail veterinary practice. Do you have any resources available to me?

**A:** Yes! On the front page of the ISVMA website ([www.isvma.org](http://www.isvma.org)), there is a link in the *Highlights* section called "ISVMA Makes Resources Available to Help Implement the New Sales Tax Regulation." There are two links you should review: "1) a copy of the new regulation;" and "3) a PowerPoint overview of Illinois Sales Tax Issues for Veterinary Businesses." With these two files, you can review and easily understand the requirements for veterinary sales tax and how to avoid becoming a retail practice. 🐾



# Attitude and Perspective

by Caroline G. Miskell, CVT, ISVMA Board Member, Illinois NAVTA State Representative



Once upon a time, in a veterinary hospital, the work day begins. There are two technicians, both equally skilled and knowledgeable: Nadine and Polly. Polly is an optimist, and Nadine is a pessimist. Polly smiles and looks forward to what the day may bring, the opportunity to make a difference in the lives of the people and pets she will encounter. Nadine sighs and says, "I only hope today isn't as horrible as yesterday."

The first appointments arrive, Nadine and Polly go over wellness information, take histories and, as it is dental month, discuss their hospital's dental promotions. While waiting for the next round of appointments, Polly and Nadine are talking about how the day is going. Polly says, "I think I convinced Mrs. Brown to schedule a dental prophylaxis for Cotton." Nadine replies, "I don't know why we bother. We say the same thing over and over, and less than half the time do any of our clients actually listen."

It's time to begin the day's dental procedures. Nadine is leak-checking the anesthetic machine. There is a hole in the rebreathing bag. "It figures. Nothing ever works when you need it to!" she exclaims. "It's good we checked now instead of finding it with a patient attached," Polly says.

The last appointments are finishing up. Nadine and Polly both say goodbye to Mr. White and his yorkie Satin. Mr. White is carrying Satin and telling her what a good girl she was and how he loves "his little girl." Polly says, "It's so touching to see how much he loves his little dog." Nadine grumbles, "Sure, he loves her so much he only got two heartworm preventive pills!"

It is amazing the power of our attitudes to affect our lives and the lives of those around us. It becomes even more amazing when we realize that we choose our attitudes. Our days hold countless surprises and challenges which we can approach positively or negatively. I'm not

talking about Zippity Doo Da Suzie Sunshine but the ability to perceive the events in your life/day that focus on the good and gives you the strength to cope with difficulties. It is easy to get caught in a negative cycle, gossiping with a coworker, making assumptions about clients and under-your-breath comments about management. When this occurs, it contributes to an unhappy environment for the entire hospital. Our attitude and perception affect the way we treat others, the way we see the world, and the way others see us as friends, coworkers and mentors. You have the power to create an inspiring and energetic work environment when you choose your attitude. I hope you all take the opportunity every day to choose attitudes and perceptions that bring happiness and fulfillment to you, your coworkers, and the clients and pets in your care.

"When you change the way you look at things, the things you look at change." — Max Planck, Nobel Prize-winning physicist

"The problem is not the problem. The problem is your attitude about the problem." — Capt. Jack Sparrow, *Pirates of the Caribbean*

I'd like to send a hearty congratulation to ISVMA member Charlotte Waack, CVT, on being appointed the member at large to the NAVTA Board of Directors.

Thank you to all the faculty members, staff members and students at Joliet Junior College for graciously allowing me to speak to you about the importance of getting involved with ISVMA and how this improves our profession.

Remember to mark your calendars (and put in your request for time off) for the AVMA 150th Annual Convention in Chicago, July 19-23, 2013.

In conclusion, I thought it would be fun to survey our members on the strangest animal you have treated at your hospitals. Send your replies (and pictures if you have them) to [cgmluvspets@yahoo.com](mailto:cgmluvspets@yahoo.com), and I'll include the responses in our next edition of the *Epitome*. 🐾

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# Zoo Path Program Marks 20 Years of Service

by Herb Whiteley, Dean, College of Veterinary Medicine, University of Illinois



I'm proud to announce that the college's Zoological Pathology Program, founded in 1993, has grown from a two-person service focused on

the Chicago area to a six-person service with impact around the world.

"The program was started to provide comprehensive diagnostic services to three Chicago institutions — Brookfield Zoo, Lincoln Park Zoo and Shedd Aquarium — to assist them in managing the health of their animal populations," recalls program director Dr. Mike Kinsel, who was one of the program's first residents.

Today, the program serves these core institutions and a great many more, from federal wildlife agencies to zoos and conservation organizations on three continents.

"Our program has earned an international reputation for excellence in diagnostic service, education of residents and veterinary students, contribution to worldwide conservation efforts, and original scholarship," Dr. Kinsel says.

All faculty members in the program are engaged in teaching, research and service. Service encompasses fee-for-service diagnostics as well as service to the veterinary pathology profession and service on international Species Survival Plans and other programs that support the conservation of threatened or endangered species. Scholarly contributions of the program's faculty members and residents since its inception total more than 100 refereed publications and 80 meeting abstracts.

Although it is part of the college's Veterinary Diagnostic Laboratory, the Zoo Pathology Pro-

gram is headquartered at the Loyola University Medical Center in suburban Maywood — an unlikely location for a program involved in such a diverse range of zoo and wildlife species. In addition to standard pathology testing, a new and growing component of the program's service is its Molecular Diagnostic Laboratory, which offers 18 PCR-based assays to identify bacterial and fungal organisms in samples from birds, reptiles, fish and marine mammals.

Dr. Katie Colegrove focuses on those species, including researching diseases of wild pinnipeds — seals, sea lions and walruses. Dr. Kinsel also works extensively with marine mammals and most enjoys cetacean cases — whales, dolphins and porpoises. Both have served on investigative teams when the National Oceanic and Atmospheric Administration (NOAA) identifies an "unusual mortality event" among marine mammals, as happened when hundreds of dolphins were stranded along the northern Gulf Coast in the past several years.

Dr. Karen Terio has developed a research and diagnostic focus on exotic feline species and free-living primates. She was part of a multi-institutional research effort that enhanced understanding of AIDS-like immunopathology in naturally infected SIV-positive chimpanzees and served as a lead author on a resulting publication in *Nature*. She also serves on the American College of Veterinary Pathology examination committee, which she will chair this year.

Dr. Jaime Landolfi, who has a half-time appointment within the zoo path program, is investigating tuberculosis in elephants as part of her PhD degree. She has a joint appointment with the university's Chicago campus to conduct training for lab-animal residents.

The highly competitive, three-year zoo path residency program accepts a new resident

each year and boasts 11 program graduates who have gone on to positions in laboratories, zoos, and universities in Australia, England, France, Spain and the United States.

"Our training program enjoys an incredible diversity of species," Dr. Kinsel says. "Even though we're about as far from the ocean as you can be, we receive a large complement of fish cases from the Shedd Aquarium."

A new component of the residency program is the concomitant master's degree. Residents now spend their first two semesters in Urbana, where they complete coursework and see a large complement of domestic species on the necropsy floor of the college's Veterinary Diagnostic Laboratory.

"This provides the basis for comparative pathology," Dr. Kinsel notes, "as well as invaluable preparation for the board examination. To pass boards, residents need to know more than just snakes, fish and marine animals."

The zoo path program also offers an externship program that takes six veterinary students a year. Residents in the zoo medicine residency program jointly run by the college, Brookfield Zoo and Shedd Aquarium spend one month of training at the zoo path program.

What's next for this prestigious program with an international profile? Something a little closer to home.

"This year, we plan to expand our work with the Cook County Forest Preserve District and the Cook County Department of Animal and Rabies Control," Dr. Kinsel says, "studying disease in free-ranging wildlife locally."

Plans to recognize the 20-year anniversary are in the works, so stay tuned for more on this exciting program. 🐾



# DONATIONS TO ENDOWMENT

The year-to-date contributions for FY13 (from July 1, 2012, through December 31, 2012) to the Illinois State Veterinary Medical Foundation are \$5,800. This includes the pet memorial donations, silent auction proceeds and general donations. Also received was a \$750 donation from the Ovarian Cancer Symptom Awareness Organization (OCSA). The balance in the endowment fund as of December 31, 2012, is \$99,606. The ISVMF thanks those who have forwarded contributions.

To make a contribution to the IVMF, a 501(c)(3) charity, visit [www.isvma.org/about\\_us/resources](http://www.isvma.org/about_us/resources), or call the ISVMA/IVMF office at (217) 546-8381 for a donor form. Your tax-deductible donation should be made payable to the IVMF, c/o ISVMA, 1121 Chatham Road, Springfield, IL 62704. To make a contribution with a credit card, submit the IVMF donor form using your card information.

## In Memory of

The IVMF thanks the following veterinary clinics for their contributions in memory of the following pets:

From the Animal Medical Clinic of Springfield: Stone Holly Jett Mojo Atticus Snickers Sarah Rowdy Sunshine Pixie Baby Sweetie Sissy Ginny Lacey	Tiny Ann Buddy Chelsea Buster Shaka Merlin Ginger Ollivander Babe Inky Lady Dempsey Holmes Hans Molly Allie O.T.	Jack Austin Alfalfa Bennette Casper Padme Savage Lucy Chloe Gator Gracie Maggie Lexie Millie Tilly Misty Boo Boo	Pearl Cody Mini Max Gertie Snickers Ellie Maggie Ditter Blacky Scarlett Roland Quincy Abby Elliot Gray Buttons	Chester Lucky Kissy Rascal Bowzer Strider  From The Mt. Sterling/ Rushville Veterinary Clinic, P.C.: Tag Jasmine Willis Max
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The IVMF welcomes contributions that are to celebrate an honor or life milestone as well as to memorialize a loss. Download a donor form from the ISVMA website at [www.isvma.org/about\\_us/foundation.html](http://www.isvma.org/about_us/foundation.html) to submit your memorial. Indicate whom you are honoring on the form, and give an address where the memorial notification can be sent. 🐾

## ISVMA MEMBER SEATED ON NATIONAL ASSOCIATION OF VETERINARY TECHNICIANS OF AMERICA BOARD

ISVMA member Charlotte Waack, CVT, RVT, was recently seated on the National Association of Veterinary Technicians in America (NAVTA) Executive Board as a member at-large. During her two-year term, Charlotte will be serving on the Finance Committee. In addition, at the direction of the Executive Board, she would serve as president-elect in the event of a temporary absence of the president-elect.

The mission of NAVTA is to represent and promote the profession of veterinary technology. NAVTA provides direction, education, support and coordination for its members and works with other allied professional organizations for the competent care and humane treatment of animals. Charlotte will also be working with the student chapters and state associations during her tenure on the executive board.

Charlotte resides in Payson, Illinois, and has been an ISVMA member since 2011. She has served on the CVT Roles & Responsibilities Task Force for the ISVMA. Charlotte has served as vice president of the Missouri Veterinary Technicians Association, as president of Veterinary Technicians Association of Illinois and as the newsletter editor for the Association of Veterinary Technician Educators; she has spoken at national veterinary conferences, and she has been published in *The NAVTA Journal* and *Veterinary Technician* magazine. She is currently employed by Veterinary Information Network and works with the Veterinary Support Personnel Network CE and member services areas. She is also on the adjunct faculty staff at San Juan College's distance-learning veterinary technology program and John Wood Community College. Charlotte previously worked at Klingele Veterinary Clinic in Quincy, Illinois. 🐾

# BE THE CHANGE!

by Charlotte Waack, CVT, RVT

To quote Mahatma Gandhi, "You must be the change that you wish to see in the world."



As veterinary technicians, we have many challenges in trying to create change. How do we change the public's perception of who takes care of their pets? How can we be better utilized as technicians?

How do we change the laws to have better rules as to what tasks credentialed technicians can perform and what lay staff members can perform? The list is endless. To make those changes happen, you have to be a part of that process and help in making the change!

To be a part of the change, you need to become involved. At the state level, most states have veterinary technician associations. In my state, the membership organization is the Illinois State Veterinary Medical Association. How does one become involved in one's state association? Volunteer! Say yes when asked! There are many tasks that your state association may need help on. If you are good at talking to people, you may want to help at a booth for the association to help inform people about the organization and recruit members. Maybe you have great organizational skills and can assist with the meetings, legislative, education planning or even public relations. While many state association volunteers find themselves doing almost

as much work for their organization as they do for their clinic, there are tasks you can help with that will not consume your life. The more people that become involved and volunteer to help, the more readily you can spread around the work. Being a part of your state association can help you network with other technicians in your state, be involved in the veterinary technology programs in your area and even help to make changes in the practice act! It all starts with your own state. The first step is to join and become a member!

The next level is the National Association of Veterinary Technicians in America (NAVTA). This is OUR national organization, and it can only be as strong as its members. NAVTA has state representatives who report to them about what is going on at the state level. NAVTA can then see where their help is needed to support the state associations. They also support student NAVTA organizations with the veterinary technology programs. This helps to show our students how being a part of your national organization can help in their career. NAVTA now publishes *The NAVTA Journal* six times a year, and it is one of the few veterinary technology publications that still offer a real print journal. In *The NAVTA Journal*, you can find reports from the state associations, reports from the student chapters, professional development articles and scientific articles where you can earn CE credit.

This publication alone is well worth the cost of your membership dues. NAVTA also sponsors receptions at many national conferences, which gives you a chance to meet the leaders of NAVTA and network with other NAVTA members. Each year, NAVTA holds a conference that has, in the past, had stellar speakers with topics that can help you further your career. NAVTA has also developed a veterinary assistant certification program that will help give future veterinary assistants a formal education in the field and make a stronger team for the clinic to provide a higher level of medicine to your clients and patients.

NAVTA has developed the Committee on Veterinary Technician Specialties (CVTS) that provides a standardized list of criteria for those interested in specializing in a specific field of veterinary technology. The CVTS is recognized by the American Veterinary Medical Association, and candidates who complete the advanced pathway to their specialty can be designated the credential of Veterinary Technician Specialist (VTS). There are now 11 specialties that offer the VTS credential. By becoming a member of a specialty academy in the area you are interested in, you can pursue your VTS credential, develop a network of mentors and become involved in a higher level of veterinary technology.

*Continued on page 30*

## In Memoriam

*ISVMA's Members and Board of Directors Extend Condolences to the Families of the Following Veterinarians*

### **Dennis Keith Mann, DVM, PhD**

Dennis Keith Mann, DVM, PhD, was born to Franklin and Mattie Mann on November 11, 1929, in Wabash County, Illinois. He was the oldest boy in a family with four children — brother to Jean (Mann) Parks, Robert (Don) Mann and Franklin (Dean) Mann.

Dennis is survived by his wife, Mary, his daughter, Teresa Celia (Mann) Pilouras; his son John Morgan Mann; his son Eric Keith, his sister, Jean (Mann) Parks; and his brother Robert (Don).

### **Charles Scott Dickinson, DVM**

Dr. Scott Dickinson, age 83, died peacefully on January 5, 2013, at the Knox County Nursing Home.

He is survived by his wife, Margery (Oles), whom he married on March 20, 1954; a daughter, Susan, of Galesburg, Illinois; a son, Phil (Maureen), of Oneida, Illinois; one granddaughter, Maggie; a sister, Ellen McTammany, of Hingham, Massachusetts; a sister-in-law, Ruth Weber Dickinson, of San Diego, California; a brother-in-law, Knute Knudson, of Beaufort, South Carolina; and many nieces and nephews. He was preceded in death by his parents; a brother, Dr. Hugh Dickinson; and a sister, Dr. Ann Dickinson Knudson. 🐾





Dr. Kandi Norrell with Dutchess the cat and her rescuer and new owner, Toni Rose Day, a firefighter from Gibson City, and Chad Lowell, Invisible Fence of Mid-Illinois

## Dr. Kandi Norrell Donates Oxygen Masks for Pets to Fire Department That Rescued Cat

After a four-month stay at the University of Illinois Veterinary Teaching Hospital, Dutchess is going home. And, to mark Dutchess' recovery, Dr. Kandi Norrell is donating a set of oxygen masks to the Gibson City Fire Department, the unit that rescued Dutchess, to help pets that may be caught in house fires in the future.

Dr. Norrell is a primary care veterinarian at the University of Illinois clinic. Although she was not involved in Dutchess' treatment, she decided to make the donation through a partnership with the Illinois State Veterinary Medical Association's foundation and Invisible Fence Brand.

"The Project Breathe program allows local veterinarians to show their community that they care about the health and safety of their patients even when it comes to safety in the home," Dr. Norrell says. "These kits will aid firefighters in administering lifesaving care for pets that suffer smoke inhalation."

Dr. Norrell encourages other veterinarians to contact the state veterinary association to

find out how they can participate in Project Breathe for their own community.

### More About Dutchess

Dutchess was just 6 months old when, on September 19, a house fire claimed all her family's possessions, their Saybrook, Illinois, home, and the life of the family dog.

Dutchess was rescued by firefighter Toni Rose Day, but the cat had second- and third-degree burns. An initial grant from the college helped cover the cost of immediate care for Dutchess, but it was clear that she would need much more time and money to complete her recovery.

That's when Toni created a Facebook page, "The Dutchess Burn Fund." Within weeks, more than 3,000 followers around the world were cheering for Dutchess. Donations from Sweden, Canada, the United Kingdom, Turkey and Dubai, as well as dozens of states, were sent to assist with the costs of Dutchess' care. 🐾

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 \*Meng QJ, et al. Dept. of Ortho Surg, Chengde University, March 2011.



# 25 Vets to Watch in Our 25th Year



Amber Labelle, DVM, MS, Dipl. ACVO, University of Illinois College of Veterinary Medicine, Urbana-Champaign, Illinois, has been named in *Veterinary Practice News'* article "25 Vets to Watch in Our 25th Year" by Lou Anne Epperley. In observance of that milestone, the publication staff decided to identify 25 up-and-coming veterinarians who, through skill, talent and perseverance, are poised to do great things for veterinary medicine.

Amber Labelle is an accomplished equine veterinarian. When she's finished horsing around, Labelle is also a darned good veterinary ophthalmologist. It all started with her DVM from the UC Davis College of Veterinary Medicine, followed by an equine internship at BW Furlong and Associates in New Jersey.

While working in an equine ambulatory practice in Long Island, New York, for the next two years, Labelle was also completing an ophthalmology internship at the Animal Eye Clinic in Norwalk, Connecticut. Talk about a balancing act!

Putting the icing on the cake, Labelle in 2010 completed a residency and master's program in comparative veterinary ophthalmology at the University of Illinois, where she now teaches. Her heart still has plenty of room for horses, too. An active member of the American Association of Equine Practitioners, she has numerous convention presentations to her credit, including an ophthalmology dry lab last December.

The 25 veterinarians recognized were:

- Chris Adolph, DVM, Southpark Veterinary Hospital, Broken Arrow, Oklahoma
- Karen Burns Grogan, DVM, MS, DACPV, Dacula, Georgia
- Robin Downing, DVM, The Downing Center for Animal Pain Management, Windsor, Colorado
- Karen E. Felsted, CPA, MS, DVM, CVPM, Felsted Veterinary Consultants Inc., Dallas
- Daniel A. Franklin, DVM, Mid-Atlantic Veterinary Hospital, Hagerstown, Maryland
- Lisa M. Freeman, DVM, PhD, Dipl. ACVN, Cummings School of Veterinary Medicine, Tufts University, North Grafton, Massachusetts
- Katherine Garrett, DVM, Dipl. ACVS, Rood & Riddle Equine Hospital, Lexington, Kentucky
- Dan and Rachel Goehl, DVMs, Canton Veterinary Clinic LLC, Canton, Missouri
- Emilia Gordon, DVM, Arbutus West Animal Clinic, Vancouver, British Columbia, Canada
- Jennifer Hatcher, DVM, Hatcher Family Dairy, College Grove, Tennessee
- Jason Johnson, DVM, Ross University School of Veterinary Medicine, St. Kitts, West Indies
- Micah Kohles, DVM, MPA, technical services director, Oxbow Animal Health, Murdock, Nebraska
- Patty Khuly, VMD, MBA, Sunset Animal Clinic, Miami, Florida
- Kate Knutson, DVM, Pet Crossing Animal Hospital and Dental Clinic, Bloomington, Minnesota
- Amber Labelle, DVM, MS, Dipl. ACVO, University of Illinois College of Veterinary Medicine, Urbana-Champaign, Illinois
- Deborah Murray, DVM, New Fashion Pork, Jackson, Minnesota
- Jennifer Olson, DVM, Alamo Feline Health Center, San Antonio
- Jeff Nichol, DVM, Veterinary Emergency and Specialty Hospital, Albuquerque, New Mexico
- Andy Roark, DVM, MS, Cleveland Park Animal Hospital, Greenville, South Carolina
- Jessica Rychel DVM, cVMA, CCRP, Fort Collins Veterinary Emergency Hospital, Fort Collins, Colorado
- Jodi Westropp, DVM, PhD, Dipl. ACVIM, University of California, Davis, School of Veterinary Medicine, Davis, California
- Michael J. White, second-year student, Kansas State University College of Veterinary Medicine, Manhattan, Kansas
- Lisa A. Willis, DVM, Mid-Texas Veterinary Associates PC, Gustine, Texas
- Angela L. Witzel Lusby, DVM, PhD, Dipl. ACVN, University of Tennessee College of Veterinary Medicine, Knoxville
- Ashley M. Zehnder, DVM, Dipl. ABVP (Avian), exotic animal practitioner, Stanford, California 🐾





# Thinking About Heartworm Prevention

With Sheldon Rubin, DVM, Emeritus Director, Blum Animal Hospital, Chicago Past President, American Heartworm Society

The Midwest with its frigid winters may seem like a region where the risk of heartworm disease is reduced. The real risk, says Dr. Sheldon Rubin, a longtime Chicago resident, is that owners will try to guess when their pets are "safe" from heartworm transmission.

The incidence of heartworm disease has been on the rise in Illinois, thanks to warmer winters, a large reservoir of wildlife vectors, the transfer of homeless pets from the South for adoption and urban microclimates that allow mosquitoes to survive cold weather.

Rubin is happy to share a few of the tips he developed over the years.

**1. Use visuals.** Pull out that dusty jar of heartworms and place it on the reception desk to stimulate questions.

**2. Talk and listen.** Have staff place a "not current on heartworm medication" note in a patient's record so the veterinarian can have a discussion with the client. This is also a good time to remind pet owners that most heartworm preventives also protect pets against intestinal parasites.

**3. Don't be shy.** Don't hesitate to discuss cost as part of your "prevention is important" message. Let clients know that your prices are competitive with online pharmacies.

**4. Send reminders.** Program your practice management software to automatically remind clients to repurchase heartworm preventives when needed, based on the type and quantity they were originally dispensed.

**5. Keep it simple.** The easier it is for pet owners to purchase the medication, the better (e.g., provide online ordering and mail items at no charge). And have clients sign up for an online reminder service to help them remember to give preventives year-round. 🐾

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# Pheromones for a Fast Anxiety Fix

by Sally J. Foote, DVM

Dogs and cats come into our offices in a variety of moods. Those moods range from happy go lucky to downright petrified. It's so easy to examine and treat a pet when they are happy — but when they are tense or frightened it is a lot more difficult. Relatively fast acting anti-anxiety products are essential to less stressful handling. The analog pet pheromones can help the tense animal to relax in a relatively short period of time. Using these products in the right way, at the right times can help a dog or cat relax at your office, leading to a less stressful exam.

There are two pheromone products that I feel every exam and treatment area should have available and ready to use. Adaptil is the analog mother dog pheromone and Feliway is the analog feline marking pheromone. Both products come in a plug in or spray form and are manufactured by CEVA. Both can help reduce anxiety, yet there are benefits to using a spray over the plug in and visa versa. Understanding how the products work will help you to use these products to give you and your patients the best advantage of them.

Adaptil is the mother dog pheromone analog. It is inhaled by the dog and is absorbed up the roof of the mouth to reach the calming area of the brain. All dogs have the receptors for this product no matter what age they are. How well activated those receptors are and how much calming the product can give can vary on an individual basis. The amount of time it takes for a dog to show they are calming can vary also. The greater the concentration of the product inhaled, the better the calming. So, spraying the Adaptil (at least 5 pumps) on a bandana or rubbed on the chest will allow the body heat to evaporate the product up to the face for inhalation. This action has more impact than the plug in for the room. Many dogs will show some degree of calming within five minutes and a maximum effect in about 20 minutes with the spray. So for the nervous dog in the waiting area — get a bandana on them right away! Use the waiting time and history-taking time to allow the Adaptil to work. You

can also spritz more on your own smock or above the dog so they will inhale the droplets, which will add to more calming. The insert does not describe these applications but they have worked in our office to really help decrease fear and even aggression.

Feliway is the analog to the facial marking scent of cats. For a cat, when they smell the Feliway on objects they think they have already claimed this as home so they feel less anxious. The spray primarily needs to go on the exam table, staff's hands, lab coats, cages and the carrier. Some cats may not like the alcohol smell at first so let it air a bit. Many cats will calm within the first 10 minutes of recognizing the Feliway but some cats may need more time. I have found putting the Feliway on a bandana for travel to the clinic very helpful to decrease anxiety. While cats rub on objects they also groom themselves which would transfer some of their own scent on their body. In my opinion the bandana with Feliway is increasing the self-scenting, which is limited when a cat is nervous since they are less likely to groom.

Adaptil spray will last 4 hours. Feliway spray will last 24 hours. The plug ins work all the time. In the kennel areas, plug ins placed near the cages of upset animals can be a way to give constant help. Be sure the plug in is not blocked, or far away from the pets who need it. Spraying the cage really increases the concentration of the Adaptil or Feliway and can give some fast effect.

When I speak at veterinary conferences and schools, I find those who have not been satisfied with the results of these products have been using them in a very limited way. Some of the most common misuse has been only using the plug ins for the exam areas; not using the products on bandanas or misting around the animal early when anxiety first starts; and expecting immediate profound results. I am not employed or supported by Ceva; their products are the only ones that I have had any experience using in office for anxiety reduction.

Anxiety is additive. Waiting to use anti-anxiety products will require more time and product to decrease the fear. Pheromones will never hurt anything, so why not use them early and often? The cost is relatively low, and it creates an educational opportunity about pet behavior. We have sold a lot of these products for home use when we tell the client what we are doing and they see the results. It is surprising the different ways a pet may have some kind of fear at home that is not a big problem but a client would appreciate help with it. There are over the counter versions of Adaptil (Comfort Zone) and Feliway if you do not wish to stock them.

If you have used these products in other ways with success, please write to me and tell me. I am very interested in the ways that clinics are using anti-anxiety products to help their patients. My email is [drsally@drsallyjfoote.com](mailto:drsally@drsallyjfoote.com). 🐾

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# Preparation Needed to Comply with Revised OSHA Labeling Requirements

The Occupational Safety and Health Administration (OSHA) has made changes to its labeling requirements for hazardous materials, revising guidelines that have been around since 1994.

Deadlines for training employees and implementing the changes are not yet urgent, with employee training required by December 2013 and full compliance by June 2015. Even so, many hospitals have not yet even learned of the upcoming changes, according to Laurie Miller, AAHA practice consultant.

Miller, who evaluates several veterinary practices each week, said she estimates only about half of the hospitals she has visited recently have been aware of the changes.

To prevent hospitals from being caught off-guard, *NEWStat* took a closer look at the new requirements and how practices can prepare for compliance.

## Details of labeling requirement modifications

The new OSHA requirements state that as of June 1, 2015, all hazardous materials labels — both primary and secondary — will need to feature:

- Pictograms
- A signal word
- Hazard and precautionary statements
- Product identifier
- Supplier identification

A sample image of the new label can be viewed on the OSHA website at [www.osha.gov/Publications/HazComm\\_QuickCard\\_Labels.html](http://www.osha.gov/Publications/HazComm_QuickCard_Labels.html).

According to OSHA, the changes are intended to more closely align the Hazard Communication Standard with the United Nations' Globally Harmonized System of Classification and Labeling of Chemicals.

Benefits of implementing a globally standardized labeling system include safer handling of chemicals, less confusion in the workplace, and enhanced worker comprehension of hazards, OSHA said on its website.

While compliance will initially mean an adjustment period for veterinary practices, ultimately it will help all employees be on the same page when it comes to dealing with hazardous materials, according to Miller.

"Part of the rationale behind the new rules is to have a more consistent look both to the Material Safety Data Sheets (which will change to the term 'Safety Data Sheets') and the secondary labeling," Miller said. "The new rules were implemented not to make a veterinary practice's life miserable, but to state affirmatively that part of the purpose is to harmonize with international requirements."

## Tips for preparing for the requirement changes

Miller shared a few helpful tips for practices so they aren't unprepared when the changes are officially implemented:

- **Avoid procrastination** — "While the training must take place by December next year (2013) and full compliance must happen by June 2015, we tend to procrastinate, and the sooner a veterinary team takes care of this the easier the compliance will be with the new program," Miller said.
- **Put someone in charge** — Practices should pass the information about the labeling changes along to the person who is in charge of ensuring compliance, such as a safety officer or manager, Miller said. That person can then be responsible for ensuring that employee training and other steps toward compliance are completed on time.
- **Check for updates** — "Keep checking the OSHA website frequently for more updated information. I am finding that they are updating on a fairly regular basis with new training information and definitions," Miller said. 🐾

*Originally published in NEWStat*





# The Truth About “Superbugs”

AVMA’S DR. HOANG PARTICIPATES IN WEBCAST ON ANTIBIOTIC USE IN LIVESTOCK

**Dr. Christine Hoang, DVM, MPH, CPH, assistant director of scientific activities at the American Veterinary Medical Association (AVMA) and an expert on antimicrobial resistance, shed light on the use of antibiotics in livestock during a recent U.S. Farmers & Ranchers Alliance (USFRA) panel discussion ([www.fooddialogues.com/ny-food-dialogues/antibiotics-and-your-food](http://www.fooddialogues.com/ny-food-dialogues/antibiotics-and-your-food)).**

One of the most common criticisms about the use of antibiotics on farms is that it might lead to the creation of resistant human pathogens, such as MRSA and *C. difficile*. Dr. Hoang stated that these fears are unfounded, because studies have shown that these “superbugs” are not related to farming. “They’re human-related resistant infections that are in no way related to antibiotic use in livestock production,” she said.

She also explained that the AVMA has been working tirelessly to ensure that antibiotic use on farms is brought under the direct control of veterinarians. Today, many antibiotics can be purchased by farmers over the counter. Dr. Hoang explained that efforts to bring all agricultural antibiotic applications under the control of veterinarians will help ensure that antibiotics are used judiciously.

“The AVMA is working very hard with the Food and Drug Administration to establish veterinary oversight over how antibiotics are being used,” Dr. Hoang said. “The goal of veterinary medicine has al-

ways been to achieve a system where these drugs are used judiciously for the benefit of both animal and human health.”

The prevention of antibiotic resistance in humans is one of the reasons why veterinarians support the continued use of preventive applications of antibiotics in the practice of herd medicine on farms. Dr. Hoang explained to the listening audience that waiting until an animal is sick to use antibiotics could, in fact, make it more likely these “superbugs” will develop, because veterinarians will be forced to treat sick animals with more powerful antibiotics that are more commonly used in human medicine and use them at higher doses.

Dr. Hoang explained that there are other benefits of preventive applications of antibiotics on farms. Preventive antibiotic use reduces the transmission of foodborne illnesses into our food supply, and there are substantial animal welfare benefits. “Because you are preventing the disease before it occurs, there is benefit to the animals because they are not getting sick and suffering,” she said.

Dr. Hoang also explained the benefits of including antibiotics in animal feed, which is something that has drawn criticism in the media. Including preventive medications in livestock feed is simply safer and more humane, reducing the need for injections or manual oral dosing of animals.

To learn more about this important issue, the AVMA encourages people to view the complete webcast ([www.fooddialogues.com/ny-food-dialogues/antibiotics-and-your-food](http://www.fooddialogues.com/ny-food-dialogues/antibiotics-and-your-food)) entitled “Antibiotics and Your Food,” which was webcast live on November 15, 2012. For more information about the AVMA and the Association’s policies concerning this issue, visit [www.avma.org](http://www.avma.org). 🐾



# Central Illinois Vet Requests Behavior Referrals

Studies have shown that the primary reason pets are relinquished to animal shelters is due to behavior problems. The majority of new pets that do not remain in their original home for more than one year are reported to exhibit behavior problems, according to their owners, who cite this as the primary reason for relinquishing them.

Veterinarians throughout Illinois now have a new referral option for animal behavioral consultations. Colleen Koch, a 1990 graduate of the University of Illinois College of Veterinary Medicine, is in the initial stages of a program that leads to board certification in the specialty of veterinary behavior medicine. She has focused her passion for animal behavior medicine and concentrated her continuing education experience in this area for more than six years. Dr. Koch will

be mentored in her nontraditional residency program by Dr. Valarie Tynes, DVM, a diplomate of the American College of Veterinary Behaviorists for the last 10 years. Dr. Tynes will directly supervise her first 75 cases and indirectly supervise the following 375 cases by phone and e-mail.

Dr. Koch's behavioral services can be an extension of the services you provide at your hospital. Initially, behavioral cases are identified by you or the client and evaluated through a questionnaire completed by the owner. To identify any medical conditions that may contribute to the animal's behavior problem, it is helpful to have a current medical history, from your clinic, with a medical workup including bloodwork (CBC, chemistry, thyroid) and urinalysis. After reviewing these items, Dr. Koch will then meet with

the owner and pet. The client is counseled and provided a written report regarding the specific protocol for behavior modification. The referring veterinarian will receive a copy for his or her records. All clients will be sent back to the referring veterinarian for any additional recommended diagnostics and medication unless the referring veterinarian indicates otherwise. Clients will be coached through the process of behavior modification as needed by Dr. Koch, and she will communicate the patient's progress to you.

If you have any questions regarding behavioral referrals or to refer a client, please contact Colleen S. Koch, DVM, KPA-CTP, 1150 Tendick, Jacksonville, IL 62650, phone (217) 245-9508, fax (217) 245-0380, or e-mail [lanimalclinic@yahoo.com](mailto:lanimalclinic@yahoo.com). 🐾

## ALDF Ranks Territories with Best, Worst Animal Protection Laws

The Animal Legal Defense Fund (ALDF) recently released its seventh annual rankings report of animal protection laws in all U.S. states and territories.

According to the ALDF, the top five states with the most effective animal protection laws are:

1. Illinois
2. Maine
3. California
4. Michigan
5. Oregon

The states that found their way to the bottom of the ALDF's list are:

1. New Mexico
2. South Dakota
3. Iowa
4. North Dakota
5. Kentucky

According to the ALDF, the top five list includes the same states as last year, al-

beit in a slightly different order. California jumped from fifth to third by strengthening its forfeiture and seizure laws, the ALDF report said.

The bottom five states also had some familiar faces, as Kentucky maintained the last spot on the list for the sixth straight year. North Dakota and South Dakota also stayed in the bottom five due to their distinction as the only states without felony penalties for animal abusers.

Additional highlights from the report include:

- Idaho was the most-improved state. Idaho jumped eight spots and moved out of the bottom five due to its establishment of felony provisions for cruelty, neglect, abandonment and cockfighting.
- Iowa and Utah joined Kansas, Montana, and North Dakota as states that have passed "ag gag" laws. These laws make it illegal to take photographs or record video at agricultural facilities, which the

ALDF says conceals "animal abuse, food safety risks, and illegal working conditions from consumers."

- In a sign of progress, since 2006, seven jurisdictions have added felony penalties (for the first time) for extreme animal cruelty or torture: Alaska, Arkansas, Guam, Hawaii, Idaho, Mississippi, and Utah. 🐾

*Originally published in NEWStat*



# ADULT EDUCATION

## Communicating with Gen X

by Thomas E. Catanzaro, DVM, MHA, LFACHE, Diplomate, American College of Healthcare Executives, CEO, Veterinary Consulting International

*"To hear is to forget; to see is to remember; to do is to understand."*

— modified from the Chinese proverb by Dr. Tom Cat

**Factoid:** Adult education does NOT exist on a bell curve, nor does health care competency. The teachers of your past were happy to place your efforts on a bell curve and blame the lack of learning on the student. In health care, competency is excellence, and there are no lesser positions for the learner. Clients and our patients will not benefit from a "C"-average provider. A few basic facts need to be shared to start this discussion:

1. Adults learn only when they are ready to learn (the "teachable moment")
2. Adults learn best in one-on-one situations (tailored development)
3. Adults learn in 20-minute windows — if longer, their minds drift.
4. Adults need to review the key points at least seven times in the 21 days following the "education points" to retain the concepts.
5. Baby boomers learned for loyalty; Gen X-ers learn for self-development.

The educators in your past were concerned that you learned the material; you remember your educators with a fond feeling, while teachers were a dime a dozen and easily forgotten. In health care, leaders ensure learning occurs with meaningful application phases, measured against known standards of competency. Many managers are happy "teaching" and "grading" staff members on some arbitrary 1-to-10 scale; leaders want to develop people through work and strive for developing competency that drives a trust in the learner. So let's look at the learners more closely.

### Peculiarities of Adult Learning

The veterinary practice staff is most often a very diverse group of highly committed people. They were trained in a school system that had a bell-curve mentality, and

many settled for being in the major part of the bell curve.

In veterinary medicine, or any health care profession, we do not have that luxury — it is a "go" or "no-go" world of curative medicine. Either you have the IV in the vein, or you do not. Either you have re-established an airway in an anesthetic misadventure, or you bury your patient. Either you have stopped the bright red blood from spurting across the room, or your trauma case will exsanguinate, and you can bury your mistake. There is no such thing as a partial pregnancy — it is all or nothing!

The Gen-X practice staff will not make it any easier on the trainer:

#### They Say:

I'm an individual!  
Don't hassle me!  
Give me direction!  
Tell me the information!  
Learning's cool!  
Don't give me history!  
Make it quick!

#### They Respond:

We want teams.  
Challenge us.  
Leave us alone.  
Let us try it.  
Learning is boring.  
Tell us why.  
Make it fun.

Many adults fear learning environments because of past experiences:

- Bad memories
- Lack of confidence
- Fear of comparisons
- Social unease
- Suspicion

"They" are not out to get you. "They" are usually just individuals who have never had the opportunity for competency-based learning; but, then again, most trainers in veterinary practice have never learned how to be effective educators. That is the thesis of this presentation, understanding who the learners are, and how they learn best.

*"What we learn with pleasure we never forget."*

— Alfred Mercier

### Emotion and Gender

(generalities — not guarantees)

#### Men Tend to:

Hide emotions  
Seem unaware  
Miss emotional cues  
Ignore social approval  
Answer the question  
Forget and move on

#### Women Tend to:

Display emotions  
Relate to others  
Read others well  
Seek approval  
Want a discussion  
Carry a vendetta

The adult educators have determined there are four basic learning preferences in the current American/Australian population (at least they have classified four types for this general discussion):

**Talkers (emote/relate)** — learn best through sharing, relating and discussing; they seek attention, like working in groups and enjoy roleplaying

**Thinkers (reflect/relate)** — learn best through logic and fact-gathering; they want to hear from experts, want the science shared, explore the principles, analyze ideas, theorize, read and desire the one-on-one time

**Testers (react/reflect)** — learn through testing and objective assessment of examples; they are problem-solvers, they seek results, and they enjoy experimenting and tinkering

**Tryers (react/emote)** — learn through impulsive trial and error; it must make sense; action-oriented, decide and apply, connecting ideas, need to stay productively active

Significant learning combines the logical and the intuitive, the intellect and the feelings, the concept and the experience, and the idea and the meaning!

There are titles and positions provided in the balance of this article, and the source document is *The Practice Success Prescription: Team-Based Veterinary Healthcare Delivery*, VIN Press, circa 2008; it is available for FREE DOWNLOAD from the VIN Library, [www.vin.com](http://www.vin.com).

The trainers in a practice should be subject-matter experts, and no one can be a trainer of everything; people are intelligent at different things. Learners who start with their own interest areas seem to learn more effectively. The training coordinator of a practice knows who is the best trainer for which subject, ensures that he or she is recognized in public as the trainer for that subject, and schedules topics into the training plan to support the practice initiatives and mission focus. This is explained in detail in the VCI Signature Series monograph *Staff Orientation & Training*, which has zone-specific four-phase development programs and the electronic Tool Kit (available from VIN Bookstore, [www.vin.com](http://www.vin.com)).

The hiring team (discussed at length in *Building the Successful Veterinary Practice: Innovations & Creativity* (Volume 3)), published by Blackwell/Wiley & Sons, becomes the training mentors, and men-



tors ensure the trainers are causing the appropriate learning to be occurring with the candidate(s) or staff members. As a practice trainer is developing his or her "effective teaching" lesson plan, he or she needs to think about the learner(s) as well as the subject matter. They must remember the five factors of adult learning discussed earlier in this article, and ensure the subject matter is broken down into easy-to-digest segments. All too often, the trainer tries to put too much into too long a training period, and most adult learners phase out after about 20 minutes' time; there

must be a change of pace, and/or practical application, to mark each segment for EFFECTIVE TEACHING to be evaluated.

When doing one-on-one, it is best if the trainer meets the learner's preferred learning style; but, in groups, trainers must use multiple methods to balance their approach to a diverse group of learners. The matrix below allows the trainer to address the different styles of delivery to balance his or her presentation(s):

## Trainers "Lesson Plan" Matrix

Method	wt	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8	Step 9	Step 10
experiment	10										
paired demo	9										
individual assessment	8										
small-group discussion	7										
role play	6										
case study	5										
large-group discussion	4										
video presentation	3										
interactive seminar	2										
lecture	1										
<b>Timeline</b>	<30 sec										
<b>Learning Objectives (outcomes):</b>											



The effective teaching sequence is: capture attention (discovery), set up the need, determine competency, ensure teaching/learning, targeted application, evaluation by L.O.s.

## Leadership Skills for Trainers

**Planning** — The core of a successful practice is effective planning. As the leader, you must do it with them when no one else can, but please don't do it for the team for very long. As soon as possible, train your team to do the planning. When the staff members assume the responsibility for the planning process, they also assume the operational activities of daily practice. When the team is doing its job, health care delivery becomes fun again.

**"Done by the staff members for their programs."**

### Remember Always, the Roots of Planning Include:

- Patient advocacy
- Client-centered service
- Practice philosophy and core values
- Mission focus and standards of care
- Continuous quality improvement (CQI)
- The power of the entire health care delivery team

Planning allows more than one plan to be written for achieving a similar outcome, so the team hitting operational roadblocks and speed bumps always has alternatives that can be tried without going back to the boss with a failure.

The bottom line of planning is actually exciting for most teams. It has been shown time after time, for every 15 minutes of dedicated planning, the user usually gains at least an hour back during the implementation process.

**Effective Teaching** — Every practice needs in-service training, but no one has been taught how to be a trainer. Just because you have been through some school, it does not mean you understand adult education. Adults only learn when they are ready, and we call those rare points in time "teachable moments." In the real world, we must often construct "discovery" events (or be ready to grab a naturally occurring one) to initiate educational moments.



*Effective teaching is more than talking at people. Don't assume staff members have learned something just because you've written a protocol manual or taught it once. The proof lies in what they can do.*

The trick is to put them into a position where they see the need for the skill or knowledge you wish them to learn, then offer the help they need to learn it. After they think they have learned the skill, let them try it by themselves, but monitored by someone who knows what the predetermined standards are for the practice.

**Replication is learning; improvement reflects knowledge application(s).**

### Learning Objectives (Three to Five)

- **Learning objectives** are for the trainer, not the participants; they are usually outcome/action-oriented and kept to only three to five elements for any session. If the learner replicates the learning objectives (without being told) after teaching/learning, then effective teaching has occurred.
- **Discoveries** are opportunities (artificial or actual) to have the team ask to know more, often called "teachable moments." *Mini-discoveries should recur continuously during teaching/learning with the facilitated-discussion method of sharing knowledge.*
- **Teaching/learning** means competency of performance is the application expectation. When a team member does not adequately learn, it is the trainer's concern to find an alternative teaching method that will work better.

- **Application** is the demonstration of the competency — the train-to-trust level of practice performance.
- **Evaluation is based on the outcomes set in the learning objectives and that have not changed during teaching/learning or application.** Recycling means the trainer did not get the concept/skill across in an adequate manner for replication.

Evaluating is more than keeping a score-card; everyone assesses events both during and after they happen. For the evaluation process to work, you must have a goal for each activity; a set of expectations that everyone can understand is the measuring standard BEFORE the event occurs. The practice philosophy, its core values and the mission statement are the guidelines that should form the evaluation expectations.

**Evaluation** is a basic leadership skill in itself, although, in the other two basic group skills, we just skimmed the surface. This is because the decision was made to use the term "evaluation" and allow the misperceptions to remain ... then we would ask the reader to learn about a complete evaluation process. After grasping "the balance" between group and individual needs required for appropriate *evaluation* in team-based health care delivery, we ask you, the reader, to go back and read up on basic leadership skills; assess what you read, assumed and surmised; *then* recalibrate your concepts to the new definition. 🐾

# LACK OF A TRAINING PLAN CAN PUT YOUR HOSPITAL AT RISK FOR BIG BUCKS!

## *A Veterinary Attorney's View*

by Dr. Sophia Yin, DVM, MS

**Case 1:** Kennel worker at hospital A walked into the wards to take an American Bulldog out of its run. The dog bites the employee, who experienced serious damage to the arm. The employee is seeking damages not only from the dog owner but also from the veterinary hospital for failing to provide adequate training on handling.

**Case 2:** Client B boards her American Bull Terrier at boarding kennel B for a month. The dog has a history of aggression to other dogs and starts fence fighting with a dog in an adjacent run. He grabs hold of the other dog through the fence. The owner of the kennel is bitten on the hand while breaking up the fight. The injury required surgery and the owner lost some function in that hand. He is suing Client B. Client B alleges that boarding kennel B staff were not adequately trained in low stress handling techniques and as a result they were negligent in their handling skills.

Dr. James Wilson, veterinary attorney and author of *Law and Ethics of the Veterinary Profession* (<http://www.amazon.com/Ethics-Veterinary-Profession-James-Wilson/dp/0962100706>) knows these types of cases all too well. Wilson states,

*"What the courts are going to look for in cases involving negligent training and management of a veterinary practice, kennel or daycare center where a staff member or client is injured by an aggressive animal will be:*

1. A determination of the resources available for use by these businesses,
2. Whether or not the hospital, kennel or daycare owner possesses those resources,
3. How much effort has gone into using them, or any materials, to train staff members at the defendant's location with information they have in place (records of training will be important here)
4. How much effort was made to integrate information and training from outside sources into their materials developed by veterinary behaviorists and other credentialed behaviorists, and
5. What type of ongoing training and retraining is provided by the business.

*In the end, a court will look for expert witnesses to address each of the above points and determine what resources are available in the marketplace and used by others, and how close the defendant's business came to meeting the "standard of care for other reasonably prudent businesses under the same or similar circumstances."*

So, just what is that standard of care? Well, according to the 2012 American Veterinary Medical Association (AVMA) guidelines on physical restraint of animals (<https://www.avma.org/KB/Policies/Pages/Physical-Restraint-of-Animals.aspx>), one standard is that veterinary hospitals do need to provide staff training on handling techniques that minimize fear and stress. The guidelines state:

*"The method used should provide the least restraint [of an animal] required to allow the specific procedure(s) to be performed properly, should minimize fear, pain, stress and suffering for the animal, and should protect both the animal and personnel from harm. Every effort should be made to ensure adequate and ongoing training in animal handling and behavior by all parties involved, so that distress and physical restraint are minimized."*

Furthermore, the number of resources available to meet this standard has been increasing steadily over the last five years.

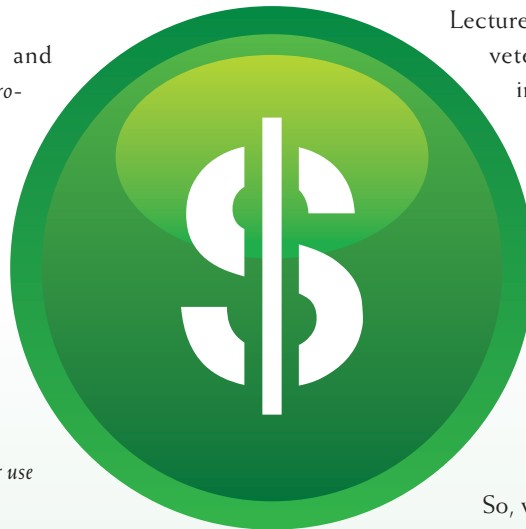
Lectures on low stress handling occur at many veterinary conferences and lab sessions too, including at the North American Veterinary Conference and Western Veterinary Conference. The American Association of Feline Practitioners has published guidelines on how to set up a Feline Friendly Practice <http://catvets.com/uploads/PDF/Nov2009HandlingCats.pdf>. In addition to the *Low Stress Handling, Restraint and Behavior Modification of Dogs & Cats* (book and DVD), CattleDog Publishing has released a seminar DVD on the topic.

So, while the cases listed above may seem foreign or extreme, due to the improving standards of care for handling of animals, the liability to veterinary hospital and daycare owners for not providing a good handling training program will increase. Best to take preventative action and be well prepared. 🐾

### References and additional resources:

- AVMA Guidelines for Low Stress Handling <https://www.avma.org/KB/Policies/Pages/Physical-Restraint-of-Animals.aspx>
- NAVC Hands-On Labs and Workshops (<http://navc.com/navc-conference/program/bands-on-labs.html>)
- Law and Ethics of the Veterinary Profession (<http://www.amazon.com/Ethics-Veterinary-Profession-James-Wilson/dp/0962100706>)
- Priority Veterinary Management Consultants (<http://www.pvmc.net/>)
- Dr. Yin's Upcoming Speaking Engagements (<http://drsophiayin.com/speaking-engagements/speaking-schedule>)

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# Beware the Emperor's New Clothes!

## Why Putting All Your Eggs in the Social-Media Basket May Leave Your Practice Feeling Naked!



by Dean Biggs

As a young child, you probably came across the tale of "The Emperor's New Clothes" by the famous Danish children's fairy tale writer Hans Christian Andersen. You may remember that the tale was about a vain emperor who hired two tailors to make him the finest suit of clothes the world had ever seen. Well, it turned out that the tailors were really two swindlers who "made" the suit from a fabric invisible to anyone who was unfit for his position or "hopelessly stupid."

Of course, the emperor couldn't see the cloth himself but pretended that he could, for fear of appearing unfit for his position; his ministers did the same. When the swindlers reported that the suit was finished, they mimed dressing him, and the emperor marched in procession before his subjects. Despite the emperor appearing naked, everyone played along with the pretense, until a child in the crowd, too young to understand the desirability of keeping up the pretense, blurted out that the emperor was, in fact, wearing nothing at all! The cry was taken up by others, but, despite cringing and suspecting the assertion was true, the emperor continued the procession.

So what has this famous Hans Christian Andersen tale got to do with your veterinary business?

Well, it is my assertion that, every day, veterinary practice owners are being sold their very own set of "Emperor's New Clothes" in the form of social media. As a veterinary business owner, what you need are proven, systematic ways to grow your business. However, what you may be attracted to is the latest, brightest, shiniest idea to get new clients. Of course, there are lots of "tailors" out there who will be only too pleased to furnish your practice with their social-media management services, whose results are invisible to anyone who doesn't understand the world of "likes" and "tweets." Of course, sometimes the tailors come from within your own practice, and sometimes you may even try to make your own set of social-media clothes!



Now, don't get me wrong — social media has an important part to play in your business, and you would be foolish to ignore it completely. In fact, we have written many articles for our Veterinary Insiders Club members on how to use social-media sites such as Facebook and Pinterest within their veterinary business. But here's the thing: **social media is just one small activity that should be taking place in your veterinary practice.** If you focus all of your practice-growing efforts on social media, you will find yourself feeling bare ... of new clients ... sooner rather than later.

I've said before that "Veterinarians who are better at marketing — and who create better systems — will have more success than veterinarians who are more clinically skilled!" Well, having a Facebook page isn't marketing! It's just another media for getting your message out.

### The Three Pillars of Veterinary Practice Growth

The fact is that there are three areas that you should be focusing on every day in order to grow your practice. When ANY veterinary practice systematically focuses on these areas, the result is sustainable and profitable growth. We call these areas "The Three Fundamental and Irrefutable Pillars of Veterinary Practice Growth." They're not rocket science, but we see far too many practices ignoring them while hoping their new suits of "social-media clothes" will give them everything they want.

#### **Pillar 1 – Client Attraction**

You must do things every day to increase the number of clients in your practice. It sounds obvious, but few practices can point to something they do every day that systematically brings in new clients. Don't forget, you've got to bring in as many pets this month as you lose just to stay still! Bringing 40 new clients in this month means nothing if you euthanize 20, lose 10 to natural causes and 10 move out of town.

Client attraction starts with having an effective referral system in place. After all, if you could get each of your clients to refer just one new client ... your practice would double in size! Don't tell me you want to spend money on social media if you haven't got an effective referral system in place!

That's not to say you can't use Facebook to attract new clients, but consider Facebook ads targeted to the demographic



of your ideal client as a more measurable alternative to the social side of Facebook.

### **Pillar 2 – Client Retention**

You must do things every day to decrease the number of clients leaving to go to other practices or taking the option to keep their pet at home. It is estimated that, on average, veterinary practices lose 10 percent of their client bases every year. Far too many practices give up on inactive clients too quickly and don't do enough to keep in touch between visits. Frequent quality communication with your clients is essential to client retention.

By the way, if you think that Facebook is an effective way to communicate with your clients, you may be mistaken. In fact, Facebook itself has admitted that, on average, only 16 percent of an individual's friends will see a post that person shares on Facebook. The same is true of a company's fans. In other words, when you post something on your practice's Facebook business page, on average, only 16 percent of the people who have "liked" your page will actually see the post!

This is by design, not accident, and Facebook is now in the process of introducing a "pay-to-play" post generator. In other words, you will soon be given the option to extend the reach of your post to more of your fans by paying a fee! So Facebook is not the free marketing tool that most people think.

### **Pillar 3 – Client Revenue**

You must do things every day to increase the value of each client to your practice. This means effectively working at two things:

1. Coming up with ethical ways to get your clients to visit your practice more often
2. Coming up with ethical ways to get your clients to spend more on each visit

You can get your clients to come in more often by frequently educating them about preventive wellness and promoting your preventive services to them. That doesn't mean promoting all of your services to all of your clients. For example, your practice



management system can tell you who has senior pets, who has pets that haven't had a dental cleaning in the past 12 months, who has pets who aren't on a heartworm preventative and much more besides.

You can get your clients to spend more on each visit just by offering them things they need and by making them more aware of what you have to offer. Previously, I have revealed how the "entrepreneurial veterinarian" did the most for his clients by offering pet-related products and services that they would otherwise have to buy elsewhere.

### **The Compound Effect**

This is a deceptively simple but remarkably powerful framework. We quantify these elements and combine them into a formula that we can apply scientifically in all of our coaching and product development. To see how it works, let's look at an example, simplifying the math for the demonstration.

Suppose a veterinary practice has 2,000 active clients and normally adds 20 percent new clients each year (i.e., 400) but also loses 10 percent of existing clients each year (i.e., 200). For the sake of simplicity, let's assume that each client has an annual average value of \$300.

This means that the practice's revenue can be calculated roughly as follows:

$$\begin{aligned} \text{Revenue} &= (\text{Existing Customers} + \text{New Customers} - \text{Lost Customers}) \times \text{Average Value} \\ \text{Revenue} &= (2,000 + 400 - 200) \times \$300 \\ \text{Revenue} &= \$660,000 \end{aligned}$$

Now let's see what would happen if we improved each factor by a conservative 5

percentage points. This means that there are now 25 percent more new clients, only 5 percent are lost, and each client is now worth \$315 per year.

$$\begin{aligned} \text{Revenue} &= (2,000 + 500 - 100) \times \$315 \\ \text{Revenue} &= \$756,000 \end{aligned}$$

The 5 percent adjustment of each pillar produced a cumulative effect of 15 percent, an increase in revenue that clearly demonstrates the power of applying the Three Pillars of Veterinary Practice Growth. But it doesn't stop there, because the bigger the increase, the bigger the cumulative effect. For example, a 10 percent swing in each pillar results in a 31 percent increase in revenue! Not only that, but, if you achieved this 10-percent-point improvement to each pillar in your practice every year, you would double your practice size in less than three years!

By the way, we're not suggesting for one moment that companies who provide social-media services are swindlers. In fact, many provide a good service at managing social-media services for veterinary practices. However, here are a couple of things to bear in mind if you're thinking of hiring one:

1. Can it provide you with measurable results?
2. Can it really be the social voice of your practice? Social media is all about personal relationships and sharing real-life experiences as they happen. Can a third party really do that for your practice? I would suggest that a personal message about the Labrador you just saved would be more relevant than some generic message from an outsider.

So, yes, by all means, invest in social media. But please don't make it the only investment in growing your practice. Otherwise, just like the emperor, it you could be you who is putting on a convincing smile while feeling decidedly exposed. 🐾

*Dean Biggs is a veterinary marketing strategist and co-author of the book *Secrets To Growing Your Veterinary Practice In The New Economy*, available from Amazon.com and good bookstores. To download a free chapter of the book, visit [www.vetbook-is.com](http://www.vetbook-is.com).*



## SEEKING EMPLOYMENT

- Highly experienced CVT available for relief or full-time employment. 2001 graduate of Los Angeles Pierce College, Woodland Hills, California; experience in private practice, Humane Society and animal control environments as well as in academia. Please call (773) 308-4841 OR e-mail for full résumé and references at carla\_hubbs@yahoo.com.
- Experienced veterinarian with excellent diagnostic and interpersonal skills relocating to the west northwest suburbs of Chicago. Would prefer full-time position in a small-animal practice. I can be reached at jmpetdoc90@comcast.net or (281) 333-3420.
- Experienced in small, large and equine practice. Interested in a position in northern Illinois or southern Wisconsin. Will consider full-time, part-time or relief. Please contact me by e-mail: trh\_dvm@yahoo.com.

## VETERINARY RELIEF

- Relief ambulatory equine practitioner available with services available to the Chicagoland area and northern Illinois. Résumé available, available seven days per week. Please contact Dr. Abby Reising at (847) 610-0469 or e-mail ACRESdvm@gmail.com.
- Small-animal medicine/surgery/emergency relief veterinarian available for DuPage and Cook counties. Will also consider other areas in the state. Available seven days per week. Please contact Dr. Rosemarie A. Niznik at cell number: (630) 915-0156 or drroseniznik@gmail.com.

## In-State Opportunities

### SEEKING VETERINARIANS

- Full-time associate needed for AAHA-member small-animal hospital in Peoria area. Experienced veterinarian

preferred. We focus on client education, preventive health care, diagnostic medicine, soft-tissue and orthopedic surgery. Will consider committed new graduate. Send résumé: 2323 Eureka Road, Washington, IL 61571 or e-mail [tvc@telstar-online.net](mailto:tvc@telstar-online.net). Web: [www.tvcvet.com](http://www.tvcvet.com).

- Chicago Veterinary Emergency and Specialty Center, located near downtown Chicago, is one of the largest and fastest-growing specialty hospitals in the Chicagoland area. We are looking for a full-time veterinary physiotherapist to join our group of specialists and provide therapy and rehabilitation services to our patients. Qualified applicants should be a DVM and be certified by an authorized physiotherapy training program. Our physiotherapist will have access to a new state-of-the art facility, which will include a swimming pool, water and land treadmills, and other necessary equipment. Interested applicants should contact Dr. Michael Podell at [mpodell@comcast.net](mailto:mpodell@comcast.net).
- Lincolnway Animal Hospital seeks an enthusiastic, caring veterinarian to be our chief of staff. Our hospital has long-established roots in our community and a reputation for combining high-quality medicine with exceptional client service. The ideal candidate has at least five years of experience, strong surgical and dental skills and must be a team player with excellent communication skills, a great work ethic and a fun-loving personality. Rehab certification is highly preferred. Applicants must be committed to providing outstanding patient and client care in a progressive environment. Our veterinarians receive compensation, family-friendly benefits and CE above the industry average. Contact Stephanie Ragsdale at [sragsdale@vetcor.com](mailto:sragsdale@vetcor.com).

- Full-time friendly, energetic veterinarian sought for a busy, exotic and companion animal practice in northeastern Illinois. We are a modern, well-equipped, friendly, client-oriented hospital with a wonderful and varied clientele and great support staff. Avian/exotic experience beneficial. Salary commensurate with experience plus benefits. Contact Animal Care and Medical Center, 438 Peterson Road, Libertyville, IL 60048: phone 847-362-5954, or visit [animalcarelibertyville.com](http://animalcarelibertyville.com).
- Full-time veterinarian wanted for busy, progressive, client-oriented, four-doctor practice located in growing north central Illinois Valley region (60 miles from Chicago area). Seeking dedicated, enthusiastic, motivated team player looking for an excellent career opportunity. ABVP-certified practitioner and four certified technicians on staff. Brand-new well-equipped, modern facility with excellent support staff offers environment to grow professionally, intellectually and financially. Excellent compensation and benefits package. Contact Dr. Steve Dullard, Ancare Veterinary Clinic PC, 1205 6th Avenue, Mendota, IL 61342, phone (815) 539-3844, e-mail [sdullarddvm@gmail.com](mailto:sdullarddvm@gmail.com), or visit our website at [www.ancarevet.com](http://www.ancarevet.com) or our Facebook page to see many of our services.
- Associate veterinarian wanted for busy, full-service, well-equipped, small-animal, four hospital group practice located one hour southwest of Chicago, Illinois. We offer a large variety of progressive services ranging from preventive care to advanced orthopedic and soft-tissue surgery. We promote a constant learning environment and encourage professional development. This is an excellent opportunity for a new graduate or experienced veterinarian who is client-oriented and has

a genuine dedication to practicing high-quality medicine and outstanding patient care. Our support staff is highly qualified and motivated. We offer a competitive compensation and benefit package. We provide additional compensation for rotating emergency-call duties. Future partnership buy-in or buyout potential available. For additional information about us, see our website at [www.vet4me.com](http://www.vet4me.com). Please e-mail résumé to [dwrightvet@mchsi.com](mailto:dwrightvet@mchsi.com), fax to (815) 584-9688 or phone Deb Dunlap at (815) 584-2732.

- Well-established small-animal clinic in Illinois western suburbs is seeking an associate veterinarian. We are looking for a compassionate, personable team player that loves working with people as well as pets. We offer a well-equipped facility, competitive salary, great hours and an exceptional support staff and clientele. Send résumé to [paravets1@sbcglobal.net](mailto:paravets1@sbcglobal.net).
- Small-animal emergency veterinarian needed for our growing 24-hour hospital. We are interviewing for a full- and/or part-time associate with a strong desire to practice high-quality emergency medicine. Overnights/weekends/holidays will be required. Animal Emergency of McHenry County is a progressive emergency and referral hospital located in the far northwest suburbs of Chicago. We continue to expand with medicine, surgery and canine rehabilitation departments. We believe in teamwork, communication and exceptional patient care. If you would like to learn more about joining our team, please send your résumé by e-mail to Mike Hochman, DVM, at [m.hochman@aemc911.com](mailto:m.hochman@aemc911.com).
- Full-time associate wanted for an established veterinary practice located in a growing community in the far northwest suburbs of Chicago. We are a full-service mixed-animal practice looking for a doctor who wants to build strong relationships with our clients and their pets. Approximately 10

to 15 percent of our business is equine or small-ruminant-related. We also make house calls for our small animal clients' convenience. We are looking for someone who is a good communicator, has a strong work ethic, is energetic and is dedicated to practicing high-quality medicine. Ideally, the candidate has three to five years of experience. Please call (847) 669-6635 for more information.

- Looking for a veterinarian with a positive attitude, a strong work ethic and great communication skills for a high-volume multi-doctor practice in the south suburbs of Chicago. The practice is well-equipped and paper-light with a strong support staff. Interest in any of the following is desired: surgical, endoscopic, chiropractic, acupuncture or rehabilitation. Please contact Dr. John Coyne at [jacdm55@aol.com](mailto:jacdm55@aol.com).
- Banfield Pet Hospital of East Peoria offers the opportunity to practice quality medicine with the right tools, knowledgeable teams and nationwide support. Apply online at [www.banfield.com/careers](http://www.banfield.com/careers) or, for additional questions, e-mail our medical directors at [cindy.makofski@banfield.net](mailto:cindy.makofski@banfield.net).
- Progressive, three-doctor, full-service small-animal practice located in the south suburbs of Chicago is searching for a full-time associate veterinarian who is a caring, motivated professional with good people skills to be part of our team-oriented staff. Hospital has latest ISO anesthetic, digital X-ray unit, latest anesthesia monitoring, cryosurgery, digital in-house lab unit and a fully equipped dental suite. We offer competitive salary, full benefits, paid vacation, optional retirement funds and family environment. Please call (708) 758-2400, fax résumé to (708) 758-2950 or e-mail résumé to [info@gvph.com](mailto:info@gvph.com).
- Full-time position in after-hours emergency clinic in Elgin, Illinois. Well-equipped, steadily growing clinic

with terrifically dedicated support staff. Thirteen shifts per month; compensation package based on experience. New graduates encouraged to apply. Contact A. Ragni, DVM, at [a.dvm@sbcglobal.net](mailto:a.dvm@sbcglobal.net).

- Capitol Illini Veterinary Services Ltd., with 50 years of caring for pets in Springfield and Chatham, Illinois, has a position for a new or recent graduate beginning in June 2013. We are committed to mentoring our veterinarians. Client communication, education and customer service are our top priorities. Our motto is "Healthy Pets Make Happy People." At Capitol Illini, we emphasize patient wellness and best medicine first. Our practices are AAHA-Certified, with ultrasound, endoscopy, dentistry including digital dental, digital radiology, in-house blood analyzers, Class IV laser therapy and orthopedic services. We have five full-time DVMs with a staff of 24, including four full-time CVTs. The position available is full-time with no emergency call. Benefits include: five days CE with \$2,000 expenses, health insurance, malpractice- and license-defense insurance, dues to four professional organizations and two weeks' vacation. Salary: negotiable, base with percentage of gross (ProSal) or guaranteed base. Visit our website, [www.capitolillinivet.com](http://www.capitolillinivet.com), for more information and a tour of our practice. Send résumés to Clyde E. Dunphy, DVM, [bisk9@earthlink.net](mailto:bisk9@earthlink.net), (217) 691-4950.
- Full-time associate veterinarian wanted in northwestern Illinois. Twenty percent large-animal, 80 percent small-animal, two certified technicians, four veterinarians, emergency duties shared equally. Contact Dr. Ryan Zinke at the Morrison Veterinary Clinic, 14993 Lyndon Road, Morrison, IL 61270, (815) 772-4047.
- We invite you to join our progressive, busy small-animal practice in central Illinois. Teaming with dedicated assistants, you will perform surgery and



use digital X-ray, ultrasound and state-of-the-art dental equipment in a new building. Competitive salary, reasonable hours and opportunity to grow in your field of interest. For more information, call (309) 262-5225.

- Animal Emergency Clinic in Bloomington is seeking a full-time DVM. (Part-time position may be considered.) Salary plus production bonuses. Comprehensive benefits package. Three shifts per week — nights, weekends and holidays. We love our patients, and our practice enjoys a high level of community involvement. Bloomington/Normal offers big-city activities with a hometown feel. To join our team, please contact Dr. Patti Niehm via e-mail at [niehm.hph@gmail.com](mailto:niehm.hph@gmail.com) or fax résumé to (309) 828-5836, tel: (309) 828-5836.

### Out-of-State Opportunities SEEKING VETERINARIANS

- Small-animal emergency veterinarian — northern Indiana — our mixed animal clinic is adding an eighth doctor to our growing staff. Fully equipped clinic with 16 lay personnel. A 3.5-day work week, 40 percent of gross paid for small-animal emergencies, 32 percent of gross for small-animal appointments with \$50,000-per-year minimum base salary. Some equine/LA available only if desired. Corporate matching SIRA retirement, up to one-month-per-year paid vacation, health insurance allowance, liability insurance, vehicle allowance and \$2,000-per-year continuing education fund. Great earning potential with time

off to have a life outside of veterinary medicine. Digital radiography, digital ultrasound units, in-house lab shock-wave unit and thermography camera are included in the large clinic's equipment. Practice quality veterinary medicine with a great mentoring staff. Please apply at Dr. Weldy's Assoc., Inc., Dr. Jerry Sellon, 114 North Elkhart Street, Box 527, Wakarusa, IN 46573, e-mail [Eqvet1111@aol.com](mailto:Eqvet1111@aol.com), or call (573) 536-0496.

### PRACTICE PERSONNEL

- Auburn Veterinary Service, located on Richland Ranch in Auburn, Illinois, is seeking a certified veterinary technician or an experienced veterinary assistant to join our growing small-animal practice. We pride ourselves in practicing high-quality medicine for a wonderful clientele. Interested parties should e-mail [klmdvm32@yahoo.com](mailto:klmdvm32@yahoo.com) or mail résumé to PO Box 92, Pawnee, IL 62558.

### PRACTICES FOR SALE

- SA Px For Sale: southern Illinois, progressive established 33 years in Carbondale with great clientele and visibility; satellite clinic, gross more than \$1 million with ongoing growth. Will help with financing. Great opportunity. Call (618) 446-3263 or (618) 203-9278.
- Naperville, Illinois, small-animal practice/building available for purchase. Attractive, modern facility has three exam rooms plus one surgical suite, ample parking and beautiful grounds. Annual collections \$920,000-plus. For more information, please contact

Wendy at (773) 502-6000 or e-mail to [wendy@chicagopracticesales.com](mailto:wendy@chicagopracticesales.com).

- Northern Illinois! One-veterinarian small-animal practice, attractive real estate. Excellent cash to new buyer; priced to sell! Contact: Dr. Ken Ehlen, Simmons & Assoc. Midwest, (877) 322-6465; [simmons@simmonsmidwest.com](mailto:simmons@simmonsmidwest.com).

### EQUIPMENT FOR SALE

- Simon DR Digital Radiography System, 13 MP CCD Sensor. New in December 2008. Upgraded for exotic and orthopedic requirements. Universal 400mA table, DelMedical Controls, Standalone acquisition/server PC. Asking \$28,000. (815) 282-3371.

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- Veterinary hospital design and construction to start? We can help answer these questions with: facility planning, including complete cost budgets; site evaluation to determine feasibility and cost; and design and construction. Renovations, additions, tenant build-outs and new construction. For a complementary consultation, contact: JF McCarthy, MBA, CFM, (708) 547-5096. 🐾

"Be the Change," continued from page 14

If you do not have time to participate and volunteer your time to your state or national organizations, remember that there is strength in numbers! Life is constantly changing, and, if you do not have time to help now, you may find you have the time two years from now. By being a member, you still receive benefits such as a newsletter, e-mail updates of what is going on in legislation that could affect what you do in your job, networking opportunities and even continuing education opportunities. Some state associations

offer free CE events to their full members. Others offer discounts to state-sponsored CE events.

I joined my state associations and NAVTA when I was a student and have continued those memberships during the past 10 years. While I was in school, my time was very limited to help. But I made a point to get involved as soon as I had time, and it has been very satisfying and has helped me to move forward in my career. My dream has always been to have a national

credential. While I understand this would involve many state practice acts, take more years than I may have left in my career and have to have a great many people involved in helping make this change, I am still optimistic that it can happen one day! But I had to get involved to help this change happen.

Be a part of the change. Get involved. Join your state and national organizations, and become a part of the change you wish to see! 🐾

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## AVMA GHLIT to Support Members Impacted by Changes to Medical Insurance in 2014

New York Life Insurance Company (NYL), the underwriter of the American Veterinary Medical Association (AVMA) Group Health and Life Insurance Trust (GHLIT), has notified the GHLIT Trustees of its intent to discontinue offering medical insurance to bona fide association plans after 2013.

The decision by NYL impacts only the GHLIT medical insurance policy. Current medical insurance will continue for GHLIT members throughout 2013, provided premiums are paid in a timely manner. Any life, disability income or other nonmedical coverage will be unaffected by this change.

NYL indicated that the evolving market conditions and regulatory environment created by the Patient Protection and Affordable Care Act will ultimately prevent it from offering competitive medical insurance for association plans such as the GHLIT's. To that end, the GHLIT is working with its business partners to establish a program to help assist its medical-plan par-

ticipants with the transition to other medical insurance coverage effective January 1, 2014. The GHLIT and NYL will continue to offer life, disability income and other insurance products as a member benefit to AVMA members.

"For the past 56 years, the Trust has protected its members through numerous industry changes with an array of quality coverage. This will be no different," said James H. Brandt, DVM, GHLIT chair. "While we are saddened at the prospect of ending medical insurance as a benefit to our members, our top priority is ensuring that they do not experience any gaps in coverage.

"The Trust understands the significance of this change and the confusion it may cause. We want to assure all our members that we remain dedicated to their protection and are working diligently to ensure that they continue to have access to the coverage they are accustomed to through the GHLIT," Dr. Brandt said. "Members can expect to receive regular communications from us over the coming months, including progress updates and information to assist them through this transition."

**For more information, members are encouraged to contact the GHLIT at (800) 621-6360 or visit the website at [www.avmaghlit.org](http://www.avmaghlit.org).** 🐾

