

# Epitome

WINTER 2015

A publication of the Illinois State Veterinary Medical Association



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*Why I Tie-Dye My Lab Coats*

Rocky Mountain High





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# Epitome

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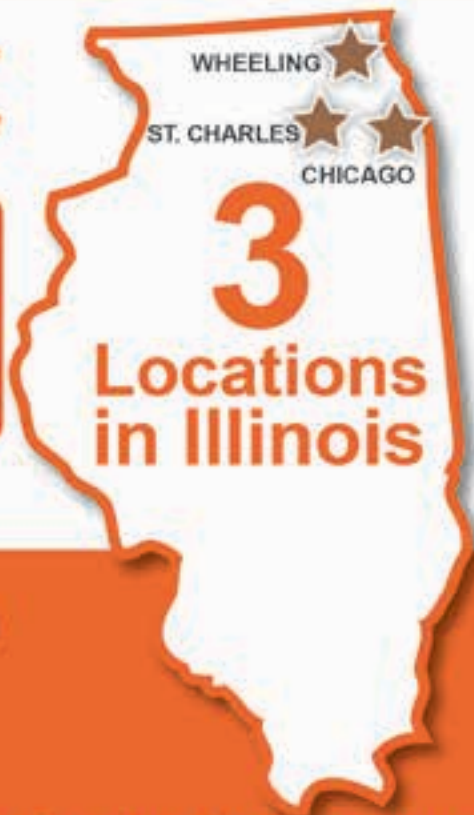
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## Taking the Reins

by Tracy Myers, DVM



2015 is here, and how in the world did this happen? Christmas decorations are packed away, and the kids are back in school, so it's time to consider those New Year's resolutions that we just made. Have you already forgotten about them in these few short weeks, or you can't think of any that would be easy to keep?

First, let's review 2014, which seemed to fly by, but in that time, ISVMA has seen big changes. On the legislative home front, there were several issues addressed, such as animal care and welfare issues and veterinary practice topics.

Our executive director of 11 years, Peter Weber, resigned in order to pursue another opportunity. Debbie Lakamp, as interim executive director, is prepared to continue to propel ISVMA into the future. Her first order of business was the 2014 Convention in Lombard, Illinois. The offered continuing education was stellar as usual! Total attendance reached was over 800 individuals.

Dr. Steve Cairo completed his term as president of ISVMA in fine fashion and handed the "reins" over to me. He leaves very large shoes to fill, but luckily, I have big feet. I have a wonderful support system of ISVMA members and staff members to help the advancement of veterinary medicine in 2015.

For those of you who don't know me, I grew up on a swine and row-crop farm in northwest Missouri. I was very involved in swine, cattle and horses in 4-H and FFA. I graduated from the University of Missouri College of Veterinary Medicine in 1998 and moved to Canton, Illinois, after finding a job through the American Veterinary Medical Association's (AVMA) placement service. I practiced mixed-animal medicine for six years. I am currently an associate veterinarian at Whitney Veterinary Hospital, where I practice canine and feline medicine. I am a member and past president of the Mississippi Valley Veterinary Medical Association.

I am married to Alan Myers, and we celebrated our 14th wedding anniversary this past summer. We have two boys: Connor, 11 years

old; and Liam, 8 years old, both of whom are very active in sports and school. They keep us hopping!

We are well into planning for the 2015 Convention, which will be held in Springfield at the Crown Plaza on October 23-25. A dinner at the Lincoln Presidential Museum is an event you do not want to miss either. The Illinois seven regional associations also continue to provide up-to-date and local continuing-educational opportunities. All of these dates and information can be found on the ISVMA website, [isvma.org](http://isvma.org).

I hope that one of the resolutions you made includes being more active in your ISVMA. There are numerous ways, most of which do not take up a large amount of time. Committees are being reformed, which include membership, education, legislative and public relations. Please do not hesitate to reach out to myself or the ISVMA office for more information.

You could also resolve to become more familiar with your area legislator; this is my first resolution for the new year. With the recent election, there are several new members in the House and Senate who may not have any agricultural or veterinary experience. It only takes a quick phone call to set up a meeting at their home office or even a trip to the Capitol to introduce oneself. Who better to educate them on veterinary medicine than a veterinarian? Our grassroots efforts at the Capitol have given us the ability to make important changes in numerous legislative issues in the past. These relationships are very important to continuing to protect and advance our profession, as we will be introducing a practice ownership bill in 2015. 🐾



## Changes and Introductions

by Deborah Lakamp, CAE, Interim Executive Director



Changes are in the air at ISVMA. Executive Director Peter S. Weber, CAE, completed his tenure with ISVMA this past fall, and at that time, I was appointed interim executive director. Your staff has continued to work hard and has completed a very successful Convention, represented you at the Illinois Department of Financial and Professional Regulation Board, met our annual membership drive goal and continued to answer your questions, among a multitude of other projects.

In answer to several questions by the membership of ISVMA, I would like to introduce myself and my staff. I am a certified association executive, a professional designation held by approximately 5 percent of individuals employed in association management, according to the American Society of Association Executives. I also hold a Bachelor of Science degree in agriculture from the University of Illinois. For the last 25 years, I have worked in association management at the national, state and local levels, as well as my own association management.

My husband and I both grew up on grain and livestock farms in central Illinois that are still operated by our siblings. Our "farm" consists of a small herd of shorthorn cattle and a quarter horse, which are my two children's 4-H and FFA projects.

ISVMA has two full-time staff members, Alicia Davis-Wade and Jill Blanton, and one part-time staff member, Dr. Michelle Gundlach. Alicia Davis-Wade is the interim assistant executive director/finance manager and has been with ISVMA since April 2013. However, many

of you may remember her helping at our annual conventions in registration and in the exhibit hall over the years. She is the daughter of Janet Davis, a previous finance manager of ISVMA. Alicia came to us after spending over 15 years in public health service. She brings not only strong fiscal-management skills but also knowledge in One Health and emergency preparedness.

Alicia and her husband, Kevin, have four children. They keep busy antiquing and taking care of their family's nine horses that compete on the trotter circuit in Indiana and Florida.

Jill Blanton, administrative assistant, has been with ISVMA since 2008. You have most likely heard Jill's cheery voice when you have called the ISVMA office. Jill brings a wealth of customer service and organizational history to our team. She has two daughters, and they are all animal lovers. Playing bingo and her golden retriever, Brody, are two of Jill's passions.

Michelle Gundlach, DVM, is our education coordinator and a previous member of the ISVMA Board of Directors. Dr. Gundlach works with the Education and Sponsorship committees so ISVMA members can have quality educational experiences at convention and throughout the year. She also practices small-animal medicine on a part-time basis. She and her husband have one daughter, who keeps them busy with her school, music and sports activities.

If we can be of service to you, please call us at (217) 546-8381 or email us at [info@isvma.org](mailto:info@isvma.org). 🐾

*Editor's Note: The ISVMA Board of Directors is doing its due diligence by conducting a full search for a permanent executive director.*

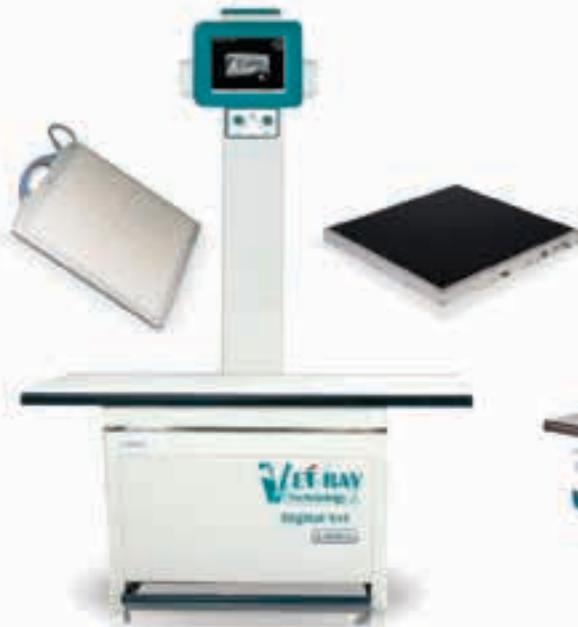




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# Continuing on the Path

by Charlotte Waack, CVT, RVT



This is an exciting time for certified veterinary technicians (CVTs) in the state of Illinois. I am honored to be your representative on the ISVMA Board and would like to thank all of those who have supported me in this venture.

Illinois is one of a handful of state veterinary medical associations that has a voting CVT member on the board. Caroline Miskell was our first representative, and she paved the path for CVTs in Illinois to contribute more to our association and become

involved. I hope to carry on in that path and encourage more CVTs to give back to our state association. Thank you, Caroline, for all of your hard work!

As I said, this is an exciting time for CVTs. We have worked hard on the creation of the tasks for CVTs and unlicensed personnel, which are currently in the rules process at the Illinois Department for Financial and Professional Regulation. The ISVMA and district veterinary associations are offering more hours of continuing education to veterinary technicians, and our veterinary technician students are now able to join the ISVMA. There are so many opportunities for technicians in our state to grow their careers and continue to learn more!

Please feel free to contact me if you have questions or concerns. You can reach me at [cwaack.cvt.rvt@gmail.com](mailto:cwaack.cvt.rvt@gmail.com). I look forward to the next three years on the ISVMA Board! 🐾





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# Welcome New Members

ISVMA would like to welcome the following new members who have joined the association from September 11, 2014, to November 26, 2014. Thank you for your support! Please help us spread the news about the many benefits of membership in ISVMA — where dues are investments that pay tremendous dividends!

## New Certified Veterinary Technician Members

Burgard, Emily, CVT  
Carretti, Taylor, CVT  
Efimetz, Leah, CVT  
Freed, Erin, CVT  
Katek, Meredith, CVT  
Kirschner, Jaime, CVT  
Long, Megan, CVT  
Lugo, Alicia, CVT  
Marrello, Trish, CVT  
Morris, Michelle, CVT

## New CVT Student Members

Bronski, Rebecca, CVT Student  
Brown, Alyssa, CVT Student  
David, Lauren, CVT Student  
Evans, Marie, CVT Student  
Glaum, Colleen, CVT Student  
Mortensen, Marcy, CVT Student

Partak, Michelle, CVT Student  
Payson, Lisa, CVT Student  
Rogowski, Brittany, CVT Student  
Rohm, Robyn, CVT Student

## New Veterinary Members

Bajuk, Paul, DVM  
Bajwa, Rachhpal, DVM  
Boland, Jennifer, DVM  
Clay, Stefanie, DVM  
Cohen, Jacob S., DVM  
Crownhart-Eales, Karren, DVM  
Dempsey, Lauren, DVM  
Doggett, Brandy, DVM  
Egan, Paul, DVM  
Emmel, Elizabeth, DVM  
Frett, Sean, DVM  
Geisler, Julia, DVM  
Henry, Nancy, DVM  
Hill, Jane, DVM  
Hopper, Samantha, DVM

King, Brittany, DVM  
Kordell, Jeffrey, DVM  
Messamore, Denise, DVM  
Morlock, Sarah, DVM  
Murray, Lisa, DVM  
Mutz, Allisun, DVM  
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Rzechula, Dana, DVM  
Schlueter, Elissa, DVM  
Schmidt, Lacey, DVM  
Schnayer, Mara, DVM  
Schroeder, Jodi, DVM  
Siegler, Tracey, DVM  
Spiliopoulos, Natalie, DVM  
Stredney, Sarah, DVM  
Sweet, Laura, DVM  
VandeVenter, Lynette, DVM  
VandeVenter, Stuart, DVM  
Walker, Jason, DVM  
Winkler, Elizabeth, DVM  
Zimmerman, John, DVM 🐾

# IVMF Donations

The IVMF welcomes contributions that are to celebrate or honor the life of a pet 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.

## In Memory of

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

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# ISVMA Convention Highlights

## Education, Tradeshow and Networking

Some 800 attendees packed into the Westin Lombard Yorktown Center in early November for the Illinois State Veterinary Medical Association's 132nd Annual Convention. Most attendees state they come for the continuing education, the tradeshow and the networking.

The speaker lineup featured Temple Grandin, PhD, talking about livestock handling and Rolan Tripp, DVM, and his wife and business partner, Susan Tripp, MS, focusing on animal behavior and training. High-quality speakers from Illinois and across the nation presented small-animal lectures, vet tech topics, an equine session, and emergency medicine, surgery, practice management and grief subjects to the attendees.

The Convention trade show boasted over 80 companies selling everything from dog food to lasers, X-ray equipment and pharmaceuticals, and insurance. This gives veterinarians the ability to see product demonstrations, obtain samples and gain in-depth



Dr. Cairo (center) presents Maureen Mulhall and Terry Steczo of Governmental Strategy Associates the ISVMA President's Award.

information on items they may purchase for their clinics during convention or in the coming months.

ISVMA also holds its annual meeting and member recognition during the convention. Steve Cairo, DVM, VCA, Cairo Animal Hospital, Highland Park, completed his presidency and turned the leadership role over to incoming ISVMA President Tracy Myers, DVM, Whitney Veterinary Clinic, Peoria. Herbert Whiteley, DVM, University of Illinois College of Veterinary Medicine, Urbana, moved into the president-elect role; and Sandra Faeh, DVM, Elmhurst Animal Care Center, Elmhurst, was elected to the position of vice president. The Board re-elected Matt Nelson, DVM, Maple Ridge Veterinary Clinic, Geneseo, as treasurer. Retiring Board



Dr. Myers (right) congratulates and thanks Dr. Cairo for his leadership as the 2013-2014 ISVMA president.

members Jack Brar, DVM, Palos Hills Veterinary Clinic, Palos Hills; Caroline Miskell, CVT, VCA, Berwyn Animal Hospital, Berwyn; Susan Norris, the ISVMA student representative; and Clyde Dunphy, DVM, Capitol Illini Veterinary Services, Springfield, who completed his term as immediate past president, all received recognition plaques.

The Dr. Erwin Small First Decade Award recipient was Kelli Guedet, DVM. Kelli is a 2007 graduate of the University of Illinois College of Veterinary Medicine (UI-CVM). She has served on the ISVMA Convention Committee for five years and chaired the committee for three years. Her interest in organized veterinary medicine began as an ISVMA student leader who traveled to Illinois animal hospitals to teach veterinarians how to use the business benchmarking tools from the National Commission on Veterinary Economic Issues (NCVEI). She was chosen as an Emerging Leader for the 2010 American Veterinary Medical Association (AVMA) Veterinary Leadership Conference and has been an AVMA member for seven years. Since her recent move to Rockford, Illinois, she has joined the Greater Rockford Veterinary Medical Association (GRVMA) and become an active Board member of the NIVMA. Kelli is an instructor for the certified veterinary technician (CVT) program at Rockford Career College and provides relief veterinary services in Rockford and the Chicago suburbs. She is married to classmate Nick Guedet, DVM, who works at Perryville Pet Hospital and they have 2-year-old twin girls who keep their life quite adventurous.

The Dr. Cecil Ingmire First Decade CVT Award is given to one certified veterinary technician who has graduated within the last 10 years and has demonstrated a strong commitment to the profes-



Dr. Guedet (left) receives the Dr. Erwin Small First Decade Award from Dr. Cairo.

sion through involvement in organized veterinary medicine. This year's recipient is Charlotte Waack, CVT, RVT. Charlotte started in the field of veterinary medicine in 1990 as a second career. After working as a veterinary assistant for 12 years, Charlotte entered the distance learning program at St. Petersburg College, graduated in 2004 with an associate degree in veterinary technology, and earned her credentials in the states of Illinois and Missouri.

As the director of Veterinary Support Personnel Network, commonly known as VSPN, she oversees the online community and is the director of VSPN continuing education. Charlotte has been published in the *Veterinary Technician Journal* and the *National Association of Veterinary Technicians of American Journal*. She is active in the Illinois State Veterinary Medical Association, where she served on the CVT Rules Task Force, and is the past vice president of the Missouri Veterinary Technicians Association. Charlotte also serves as a Board member of the National Association of Veterinary Technicians in America and is a member of the Association of Veterinary Technician Educators. In addition, Charlotte is an adjunct instructor at John Wood Community College and San Juan College.

The ISVMA Veterinary Service Award is given annually to an ISVMA member who has demonstrated outstanding work as a member of the Illinois State Veterinary Medical Association. This year's recipient, Dr. Jack Brar, has been a veterinarian for more than 50 years and has practiced the last 33 years on the southeast side of Chicago. After receiving his degree in veterinary medicine, he came to the University of Minnesota and earned his Master of Science degree in clinical medicine in 1979. His research in maternal immunity in bovine viral diarrhea (BVD) and infectious bovine rhinotracheitis (IBR) was published in *American Journal of Veterinary Research*. He was inducted into the Phi Zeta Gamma society during his graduate years.

Jack has served in many veterinary organizations over the last 15 years. He was president, vice president and secretary of the Chicago VMA and also served as a chair of Illinois Department of



The ISVMA Trade Show was a great place to meet with vendors and explore new products and services.



Dr. Brar (right) receives the ISVMA Veterinary Service Award for his outstanding work on behalf of the profession from Dr. Cairo.

Professional Regulation in 2013. Currently, he has been an active Board member of ISVMA for the last three years. He was a member of the Cook County Executive Council of the University of Illinois Extension from 2005 to 2013, and chaired the nomination committee for four years. He was honored with the Service Meritorious Award by the UI-CVM alumni and the Chicago VMA.

The ISVMA President's Award is given entirely at the sole discretion of the ISVMA president to a person or persons who have significantly advanced the interests of the veterinary profession, animals, the public and the environment. This year's award goes to Terry Steczo and Maureen Mulhall of Government Strategy Associates. They have clearly earned this year's President's Award.

Their relationship with the ISVMA began nearly 10 years ago as they developed relationships with legislators and administration officials in order to provide input regarding issues that may impact, positively or negatively, the veterinary profession. Terry is the principal of Government Strategy Associates (GSA), a lobbying/consulting firm that assists clients with assessing the impact of



The ISVMA Mystery Instrument is always an intriguing puzzle for convention attendees. This year's mystery instrument was a large animal hernia clamp.

proposed state governmental legislation and regulations, helping create advocacy strategies, and formulating legislative and regulatory policy responses. An 18-year member of the Illinois House of Representatives, Terry became known as a prolific and successful bill sponsor with an unparalleled expertise in legislative strategy development and was the recipient of numerous awards and commendations for his legislative endeavors and efforts.

Maureen has been an associate with GSA since 1995 and has served in various Illinois state government administrative capacities including state agency legislative liaison duties, regulatory administrator for the Illinois Medical Practice Act and project manager responsibilities.

*Please mark your calendars to attend the 133rd Annual ISVMA Convention October 23-25, 2015, at the Crowne Plaza Springfield, 3000 South Dirksen Parkway, Springfield, Illinois.*

Their list of accomplishments on behalf of the ISVMA is extensive and includes, but is not limited to:

- A 10-year extension of the Veterinary Medicine and Surgery Practice Act in 2013
- Legislation amending the Practice Act prior to the sunset year defining CVTs and clarifying the definition of the veterinary-client-patient relationships
- Successfully resolved a conflict regarding controlled substances and the University of Illinois Teaching Hospital via enactment of legislation
- Successfully secured legislation enacting Practice Pending Licensure
- Secured the inclusion of Dr. Dullard in task force and committee hearings related to the Pet Lemon Laws
- Have been able to stop the positive consideration of breed-specific bans through interaction with legislators and arranging for committee testimony
- Currently working on the appointment of an ISVMA representative to the governor's Pet Advocacy Task Force
- Expect to participate in upcoming discussions regarding anticipated changes in the Controlled Substances Act
- All of us and all residents of the state of Illinois are the recipients of their talents and energies

Please mark your calendars to attend the 133rd Annual ISVMA Convention October 23-25, 2015, at the Crowne Plaza Springfield, 3000 South Dirksen Parkway, Springfield, Illinois. Another great lineup of speakers, sponsors and exhibitors is in the planning stages. 🐾

# Thank You, Convention Sponsors!

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# MANAGEMENT OF A HIGH-RISK NEWBORN CALF

## A Case Report

by Chelsey Ramirez, DVM, and Brian Aldridge, CVSc, MS, PhD, DAVCIM, MRCVS, Integrated Food Animal Management Systems, Department of Veterinary Clinical Medicine, College of Veterinary Medicine, University of Illinois, Urbana, Illinois

### Introduction to High-Risk Neonates

Problems that arise in late gestation and the periparturient period contribute to a large percentage of neonatal illness. Approximately 60 percent of all perinatal calf mortalities occur within 24 hours after birth,<sup>1,2</sup> and those that survive perinatal difficulties are more likely to die from disease in the first month of life.<sup>3</sup> In human and equine medicine, significant reductions in neonatal morbidity and mortality rates have been achieved through understanding the factors associated with disease risk in the newborn. These advances have not only helped guide the development of prevention strategies during late gestation and parturition but have also highlighted the benefit of identifying pregnancies or births likely to produce high-risk offspring, i.e., those individuals with a greater than average chance of developing problems within the first 28 days of life.<sup>4</sup> The indicators that have been found useful in the determination of a high-risk neonate can be broken into three broad categories (1) maternal, (2) calving related and (3) neonatal (Table 1). The objective of this case report is to show the utility of this approach in identifying a high-risk bovine neonate and to highlight the key steps needed in applying this information in case management.

### Case History

In this case, a 2-year-old Angus heifer was presented at pasture, in poor body condition, and apparently unable to rise from sternal recumbency. After the initial examination, the owner declined hospitalization and float-tank therapy and instead opted for on-farm supportive care consisting of antibiotics, NSAIDs, B vitamins, oral fluids and recumbency management.

Four days after initial contact, the ambulatory service revisited the farm and observed a marked deterioration in the heifer's demeanor. She was depressed and unresponsive to external stimuli, anorectic, agalactic and still recumbent. Rectal palpation revealed a live, active, late-term calf of unknown gestational age.



Due to the history of progressive weight loss over several weeks, signs suggestive of systemic disease, prolonged recumbency, and failure to respond to symptomatic treatment, a poor prognosis for recovery of the dam was communicated to the

owner. The high-risk status of the fetus was also discussed (Table 2). The owner agreed to an elective Caesarian section, immediately prior to euthanasia of the dam, in attempt to recover a live calf.

Following delivery via c-section, the calf was positioned in sternal recumbency, the airways were cleared of mucus, and the calf was rubbed vigorously with towels to stimulate respiration. The calf was alive but appeared weak and depressed and unable to maintain itself in a sternal position. Physical exam revealed tachycardia (increased heart rate) and tachypnea (increased respiratory rate), but no body system-specific abnormalities were identified.

Due to the identification of multiple maternal and calf risk factors (Table 2), the owner elected to take the calf to the University of Illinois Veterinary Teaching Hospital for further assessment and supportive care.

### Physical Exam Findings

Upon presentation to the hospital, the calf was quiet, alert and responsive; however, he was hypothermic (rectal temperature equaled 97.5 degrees Fahrenheit), he was unable to rise, and he had no detectable suckle reflex. The calf was tachypnic (80 breaths per minute) with harsh lung sounds and a marked increase in inspiratory effort. Auscultation of the heart revealed a grade II/IV right-sided systolic murmur and a heart rate of 110 beats per minute.

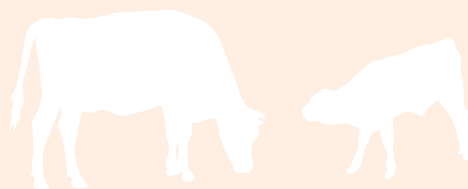
**Table 1:** Bovine-Specific Factors Associated with a High-Risk Neonate<sup>5,6</sup>

Maternal Factors	Calving Related Factors	Neonatal Factors
Parity (e.g., calves born to heifers) <sup>5,6</sup>	Dystocia	Birth weight
Gestation length (less than 275 days) <sup>5</sup>		Gender
Perinatal mortality at previous calving <sup>6</sup>		Colostrum management
Season (greatest in winter)		
Ratio of calf to cow weight (both small calves from big cows and big calves from small cows show increased risk)		
Twins		



**Table 2:** Summary of the Case-Specific Factors Used to Classify Calf as High-Risk

Risk Factor	Potential Mechanism of Negative Impact on Fetus
<b>MATERNAL</b> First-calf heifer Weight loss Systemic illness Drug administration Abdominal straining	Various (including colostrum quality) Nutrient deficiency Systemic compromise Various Change in uterine blood flow
<b>PARTURIENT</b> Cesarean section	Respiratory distress, shock, hypovolemia
<b>CALF</b> Low birth weight  Failure to rise Tachycardia Tachypnea	<i>In utero</i> growth retardation Prematurity Evidence of failure to adapt to extra-uterine environment (e.g., lungs, thermoregulation, metabolism) Cardiac defect or stimulation of sympathetic nervous system (e.g., pain, sepsis) Hypoxemia, hypercapnia, metabolic acidosis or stimulation of sympathetic nervous system (e.g., pain, sepsis)



*Day 1: Risk and Problem-Based Intervention*

In view of the high-risk profile and the clinical problem list, the following therapies were instituted:

- Hypothermia:** Placed under blankets and heated externally with a Bair Hugger®
- Tachypnea:** Nasal cannula was placed for supplemental oxygen delivery
- Failure to receive colostrum:** Nasoesophageal feeding tube was placed, and good-quality, frozen colostrum was administered at 10 percent of the calf's body weight (30.5 kg) divided into multiple feedings over six hours
- Possible sepsis:** 18 g intravenous catheter was placed in the right jugular vein, and the calf was started on ampicillin (10 mg/kg q 6 hrs IV) and flunixin meglumine (0.5 mg/kg IV)
- Immunological support:** Administered 1 unit (500 mLs) of frozen plasma intravenously
- Volume support:** Intravenous plasmalyte fluids at a maintenance rate of 2 ml/kg/hr

*Day 2*

The calf appeared stable, but because of its high-risk status, blood samples were obtained and evaluated for sepsis and blood gas/electrolyte disorders. Venous blood gas and electrolytes were within normal limits. A complete blood count (CBC) revealed a mild leukopenia (decrease in white blood cells) with a neutropenia and degenerative left shift (2 percent band neutrophils). The presence of a left shift and bands, or immature neutrophils, is highly suggestive of infection or inflammation.

Throughout the day, the calf began to suckle on his own; therefore, the nasoesophageal tube was removed, and the fluid rates were decreased to 1 ml/kg/hr (half maintenance).

*Day 4*

The blood work was repeated, and the values obtained showed a resolution of the leukopenia and left shift (no band neutrophils detected).

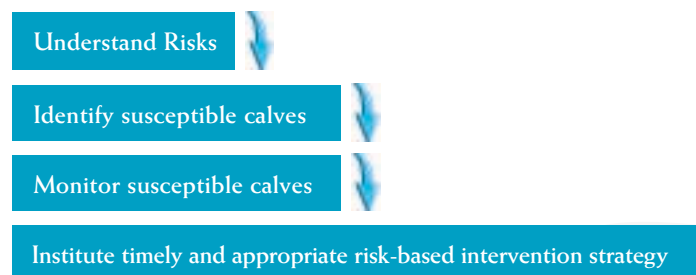
Based on bloodwork results and clinical evaluation, fluids and NSAIDs were discontinued, the jugular catheter was removed, and the calf was discharged from the hospital. Follow-up phone calls indicate that the calf has suffered no additional setbacks and continues to thrive four months later.

**Discussion**

This case illustrates the practical application of a risk-based approach to the management of newborn calves. In this instance, the dam had a chronic, severe, debilitating disease that led to weight loss, weakness and recumbency. Instead of allowing this flawed pregnancy to progress, the attending clinician adopted a risk-based approach to case management and calf care. The criteria for defining the high-risk status of the calf were both maternal and neonatal and are summarized in Table 2. Together, they warranted early removal of the calf from the uterus and assistance for the calf post-parturiently. A combination of timely and appropriate supportive care along with sepsis prophylaxis ensured a favorable outcome for this owner.

It is clear from this case that the system of risk analysis used in human and equine medicine can be successfully applied in care of the bovine neonate.

**Figure 1:** Prevention of Perinatal Morbidity and Mortality Risk



Adoption of this approach requires an understanding of the risk factors and indicators of potential problem pregnancies (Figure 1). Specific problem definitions can also be useful in triggering and guiding early and specific management interventions that enhance maternal and neonatal health, survival and well-being (Table 2 on previous page).

Once the high-risk pregnancy has been identified, close observation of birth is very important. Similarly, it is paramount to examine the neonate as early as possible, observe for normal post-parturient behavior and monitor for any change over time. Prognostic indicators of viability include presence of a suckle reflex, time to sternal recumbency, time to standing and time to suckle. Specific, rapid and aggressive supportive care is essential when managing a high-risk neonate and usually involves one or more of the following:

- Immunological (colostrum or plasma) support
- Respiratory (intranasal oxygen) support
- Thermoregulatory and circulatory (intravenous fluids) support
- Metabolic (glucose) support
- Nutritional support 🐾

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## Author Notes

The Integrated Food Animal Medicine Systems (IFAMS) @Illinois is multidisciplinary team that develops creative solutions for challenges in the food supply chain by integrating expertise in basic and clinical sciences. We have developed a collaborative approach in the care of individual cases and herd problems with colleagues from disciplines across the college and university to serve those who supply food for the world. Our strong relationships with industry stakeholders allow us to facilitate the translation and application of knowledge, skills and activities to the industry at multiple levels. For more information, contact [jlowe@illinois.edu](mailto:jlowe@illinois.edu) or [vetmed.illinois.edu/ifams](http://vetmed.illinois.edu/ifams).



## Dr. Cecil Ingmire, DVM, Retired Veterinarian Susan H. Wood Hall of Fame Award

Dr. Cecil Ingmire was recently honored with the Susan H. Wood Hall of Fame Award from Joliet Junior College (JJC). Dr. Ingmire's association with JJC began in the late 1940s, when JJC classes were still being held at the Joliet Township High School. He worked with the Students of Medical Science Club, mentoring students who were interested in veterinary medicine. Countless numbers of students observed his veterinary practice. Dr. Ingmire also enjoyed having students ride along with him when he made calls to farms and stables, treating animals in Will and the surrounding counties.

In 1967, Dr. Ingmire was elected to the Board of Trustees of the new Joliet Junior College District 525. As a trustee, Dr. Ingmire was influential in the decision to acquire the land on which JJC's Main Campus now sits. Ingmire also played a role in establishing the Veterinary Medical Technology Program at JJC.

Dr. Ingmire devoted almost 50 years to practicing veterinary medicine in the Joliet area, with the primary focus on food, animals and horses. From 1971 to 1988, he served as the chief veterinarian for the Chicago-Joliet Livestock Marketing Center. Early in his career, he served as a captain in the U.S. Army Veterinary Corps. He has also served as the president of the Illinois State Veterinary Medical Association, and the

certified veterinary technician Cecil Ingmire First Decade Award is named after him.

Dr. Ingmire and his wife, Mary, have been married for more than 67 years, and they currently reside in Orland Park. They have one son, Wayne, and three daughters, Linda Graham, Celia Fitzgerald and Jann Ingmire. They also have seven grandchildren and four great-grandchildren.

## Information About the Susan H. Wood Award

This award was established to recognize a non-alumna/alumnus of Joliet Junior College who is a current or former faculty member, administrator or friend who has served Joliet Junior College in an exceptional way.

Selection criteria:

- Nomination required
- Individual cannot be an alumna/alumnus of Joliet Junior College
- Must be a current or former faculty member, administrator or friend
- Must have served Joliet Junior College in an exceptional way
- Must be active in professional and community organizations
- Must be a dedicated, caring, compassionate and accomplished professional 🐾



# Why I Tie-Dye My Lab Coats

by Sally J. Foote, DVM, CFBC-IAABC,  
Okaw Veterinary Clinic, Tuscola, Illinois

Have you ever seen white-coat syndrome with pets at the veterinary clinic? You know what I mean — the pet is calm, relaxed or even happy with the staff until the doctor walks in with the white coat. I have seen this at my office, although the pets that have come in since puppy- or kittenhood are so used to rewards at the clinic from me, as well as the staff, that my uniform does not affect them much. For other pets, the white coat means trouble. Time for needles and poking around that is not fun. When you remove your coat, the animal is less anxious.

At my clinic, we note on the medical record what pets have white-coat anxiety so I can remove my lab coat before I come into the room. This has helped a lot to keep the pet less anxious. The problem is, now my clothes get hairy or dirty. I also like the lab coat for the doctor. It distinguishes the doctor from the rest of the staff. One practice manager pointed out that clients will follow the recommendation more often when the doctor is in a lab coat. So here is the quandary — how do I get the lab coat look without it being white? Would just a different color make a difference to these white-coat syndrome pets?

In my search for non-white lab coats, I found some solid-colored ones, and even



rainbow tie-dyed ones. They were too bold for my taste. My tech suggested that I tie-dye my old white coats to experiment and make it kind of fun. I have never tie-dyed anything, but after reading a few crafting blogs on dyeing, it did not seem too complicated. I actually had fun doing it.

I wanted to keep things as neat as possible and not have a too intense dyeing effect. The first coat I wetted down, and then, using a paintbrush, I just brushed the dye onto the coat. I worked on this in a Rubbermaid under-the-bed storage box so the mess would be contained. After I brushed the dye on, I let it sit in the covered tub for eight hours and then rinsed it clean. I had a neat, watercolor effect to my coat that everyone liked. The second coat I used rubber bands to make the typical tie-dye effect. I used the same tub and a small squirt bottle to control applying the dye. This one had more pattern but was still subtle.

I started wearing these coats, which took a little time for me to get used to. I guess I am a traditionalist when it comes to lab coats. I persevered, and one day, a dog that is usually nervous for exams was acting much better. I was wearing the tie-dyed coat, and I noticed on the record this dog did not like white coats. That was one time I did not look at the record for his exam notes. The dog usually gets nervous with my white coat, but with my tie-dyed coat, he was much better. I have made an effort to wear the tie-dyed coats with white-coat



syndrome dogs, and they are all acting a lot better. So now I have my solution — a lab coat that protects me and does not trigger anxiety in the pets as much.

If you have some white lab coats, try dyeing them. Let your kids do it for you if you don't want to do it yourself. There is nothing to lose, and your clients will be impressed you went to this effort to make their pet's exam much easier on them. I have posted some pictures on my blog at [drsallyjfoote.com](http://drsallyjfoote.com) — take a peek, and see what you think! Send me your photos too — maybe we will start a new practice fashion trend! 🐾



# ROCKY MOUNTAIN HIGH

## ISVMA MEMBERS GAIN A UNIQUE PERSPECTIVE

by Michael Adkins

Most of the time, Philip Fassler, DVM, and Sarah Fassler, DVM, have enough to keep them busy at River Ridge Animal Hospital in Dixon, Illinois, which Philip owns and where he and Sarah both practice veterinary medicine. But in the late summer, the spouses enjoy making trips to — and up — the Rocky Mountains.

"We started rock climbing in 1994," Philip said. "Our brother-in-law was raised in Jackson Hole, Wyoming, and has been mountain climbing since he was young. He started teaching us the basics during trips visiting Sarah's sister and him in Texas. We started with basic rock climbing, rope work and rappelling in Texas, and then started planning trips to the Rocky Mountains."

The Fasslers' first such trip was to the Wind River Range in western Wyoming, a roughly 100-mile-long range. After camping and climbing small peaks in the area for a week to practice their skills, the two hiked into the Cirque of the Towers to climb Overhanging Tower, a mountain on the Continental Divide that is more than 12,000 feet — or a little more than 2.3 miles — tall.

"It overlooked a remote pristine alpine valley like we had never seen before," Sarah recalled. "The most memorable parts were the physical difficulty and the beauty of the area."

Another particularly memorable climb for the Fasslers was Grand Teton, the highest mountain in Grand Teton National Park in northwest Wyoming. Grand Teton is 13,775 feet, or just over 2.6 miles, in height.

According to [summitpost.org](http://summitpost.org), a website for climbing enthusiasts, "Climbers have been drawn



to 'The Grand' for over 100 years and continue to make pilgrimages from all over the world." But, as is cautioned in the same paragraph: "Even the easiest route, the Owen-Spalding, is a technical endeavor and should not be taken lightly."



### Do You Have a Hobby to Share?

Do you go skydiving? Are you a mixed martial artist on the weekends? Do you write poetry? Whatever you're into, we want to hear from you!

We'd love to share more of our members' interests in future *Epitome* articles. If you have an interesting or unique hobby that you'd like to share with your fellow ISVMA members, we want to hear from you! Contact Debbie Lakamp in the ISVMA office at (217) 546-8381 or [debbie@isvma.org](mailto:debbie@isvma.org). We might feature you and your hobby in a future article!

At the beginning of their trip to the Teton Range, Philip and Sarah spent three days taking classes to improve their climbing skills. "Then we climbed Symmetry Spire, our most physically demanding climb," Philip explained. "The guides call it Cemetery Spire, as many people have died every year — mostly on the descent as fatigue sets in.

"The climax of the trip was the Grand Teton," Philip continued. "The route we took to the peak was one of the most technical climbs we had ever done. We initially hiked to a base camp at an area called the saddle, about three-fourths of the way up the mountain. At about 4 a.m. . . . we started for the summit of the Grand Teton. There were several roped pitches that were very challenging for us, not to mention the cold!"

After Philip and Sarah reached the mountain's summit in the mid-morning, Philip said one of the most exciting parts of the climb was the descent. "It was a free-hanging rappel off the back of the mountain," he explained. "At this point, there is a several-thousand-foot



drop back to the saddle of the mountain with breathtaking views."

Philip and Sarah are avid fans of the outdoors, and they also enjoy scuba diving together. "We find that the people we meet [while climbing] are often very interesting and are nature lovers also," Sarah said — though she noted that their loved ones don't necessarily share that opinion. "Our family thinks we are crazy," Sarah confirmed.



Crazy or not, the Fasslers continue to climb — and Philip offered some advice for his fellow ISVMA members who might be interested in taking up the sport of rock climbing. "Plan a trip where you can take classes with a professional before you climb," he said. "Guided trips are a great way to start. The classes are often as fun and exciting as climbing, especially since you are climbing smaller rocks and peaks in the same beautiful area." 🐾



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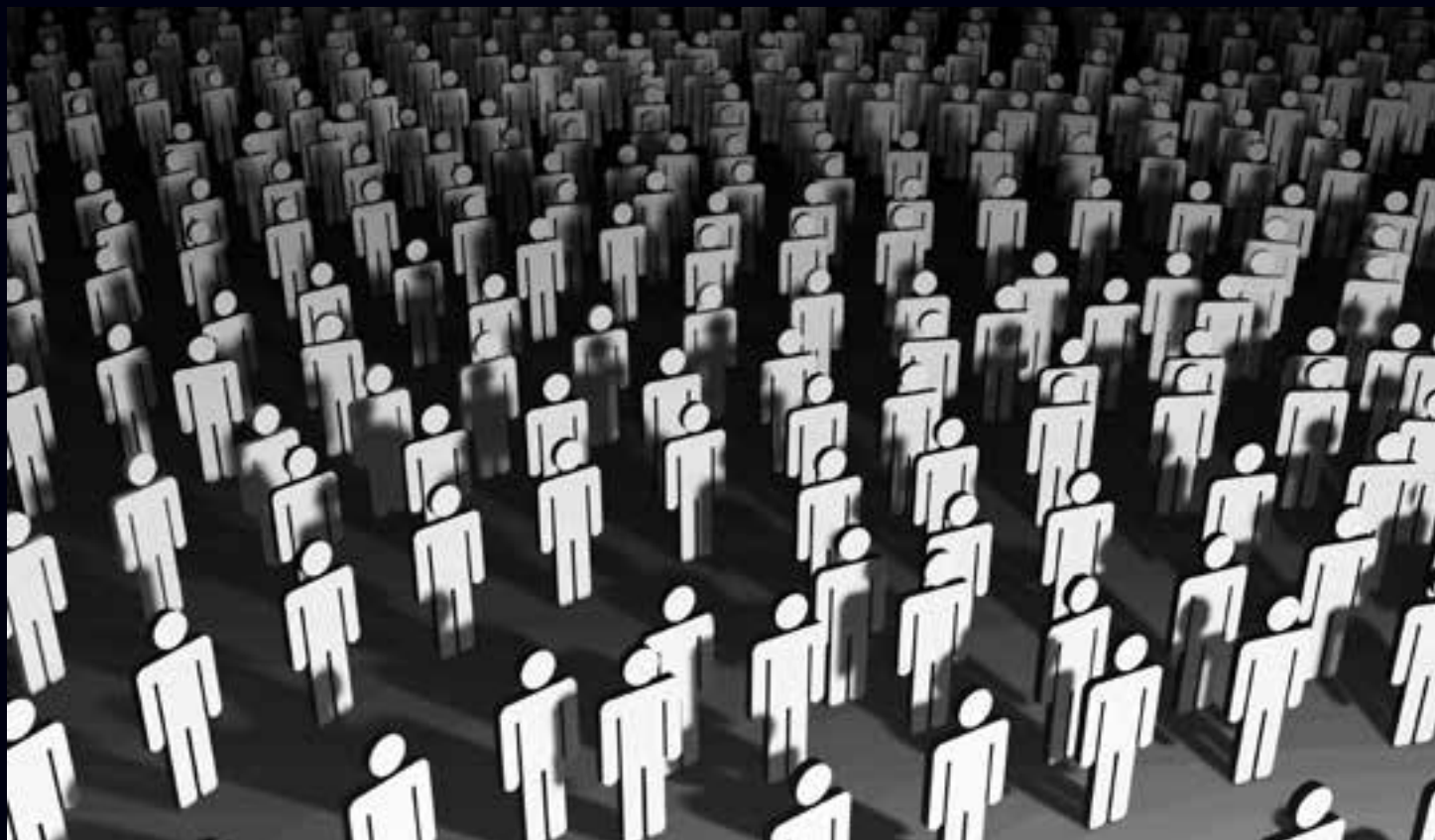
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