• Crisis in Animal Welfare

• Animal Welfare and the Veterinarian

• CVMA PetCheck 2018
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CVMA
Colorado Veterinary Medical Association
PRESIDENT’S POST

Will French, DVM
CVMA President

Recently CVMA members, Chapter Representatives, Board of Directors, Leadership Council, and staff met in Golden at our bi-annual BIG Ideas gathering. The focus of this meeting was practice culture. How do we define culture? What is the impact of a positive or negative culture? What are some practical ways that we can improve culture in our practices? The forum was an excellent bird’s eye view of the importance of this topic, particularly when looking through the lens of how a positive culture can benefit individual wellbeing. As a side note, if you haven’t attended a BIG Ideas Forum, I would highly recommend you look into attending this fall or future gatherings. For me, BIG Ideas has provided a way to pull back from the day-to-day grind and gain perspective on our profession from a 14,000 foot level. Best of all, Core and Premium members get to attend at least one or both (respectively) BIG Ideas for free, included in their membership.

BIG Ideas started me thinking about CVMA’s culture. Adjectives that came quickly to mind were thoughtful, respected among peers, forward thinking, and more. But what I kept circling back to was community. For me, perhaps the defining aspect of the culture of CVMA is the community that it forms, protects, and fosters. Humans have always sought connectedness. Seeking community has traditionally taken the forms of family, faith, and local community. But now, for many, “community” is found online or through the swipe of an app.

I am a “lurker” on a few groups for veterinarians on Facebook. It strikes me how regularly members express gratitude for the “community” and being able to bounce ideas off of colleagues, for the support through the challenges of life, and the ability to share victories. One of the greatest lies that we are taught is that we can do it all alone. This happens in veterinary school, but also society at large. Rugged individualism is something to be admired, particularly in the Western tradition. Building our own empire is deemed to be the pinnacle of success. Even if we can achieve great success in a one-person practice by sheer grit, I would argue that somewhere on the road of most successful people, you will also find a strong community somewhere in their life.

I am convinced that one of the most important aims of CVMA is to create community among Colorado veterinary professionals. Your membership dues support the profession in many important ways, helping provide continuing education and advocacy. But, most importantly, this association, and organized veterinary medicine as a whole, can provide a space for, and different ways to find, much-needed community among colleagues.

Recently there has been an interesting look at the idea of localism. Localism is the idea that the best place to tackle challenges is not actually on the national level, but rather with the vibrant support and effort of a local community. Grady Olmstead recently wrote in the New York Times:

“This is localism, a bottom-up, practically oriented way of looking at today’s biggest policy dilemmas. Instead of always or only seeking to fix municipal issues through national policy, localism suggests that communities can and should find solutions to their own particular problems, within their own particular contexts.

Rediscovering our communal identities will require unplugging from our devices and returning to the local institutions that used to facilitate a “center,” like school boards, church soup kitchens, town hall meetings, and libraries. Disappearing bipartisanship may be rediscovered, as the journalist Sarah Smarsh puts it, “in direct communion, sharing a mission.”

President’s Post continued on page 8
Together. CVMA is all about “together.” The recent BIG Ideas Forum on Practice Culture, CVMA’s legislative work, the upcoming chapter visits—they each reflect CVMA’s emphasis on working together to advance and improve the veterinary profession in Colorado. Together, we can accomplish significant things that benefit the profession and CVMA members alike.

Legislative Teamwork
CVMA’s work over the past year in collaboration with the Colorado Chiropractic Association (CCA) is a case in point. At the end of the 2017 legislative session, CVMA and CCA were directed to work together in the wake of SB17-135—a bill that would have removed the medical release requirement for animal chiropractic, taking the veterinarian out of the equation—to bring a bill forward that both organizations could support. And together, CVMA and CCA fielded teams of members to collaborate on developing what became SB18-239, Animal Chiropractic Education and Reporting Requirements. There were more than 20 meetings between staff and members to propose this improved framework for protecting animal and animal industry health and public health. This incredible effort of teamwork paid off, and we are pleased to announce that the bill passed and was sent to the Governor on May 11. We are all deeply grateful to Drs. Will French, Stacee Santi, Kelly Walsh, and Alex Turner for their many hours of dedicated effort on behalf of CVMA and the profession.

Industry Cooperation
In early May, CVMA’s AVMA Delegate Dr. Melanie Marsden, Alternate Delegate Dr. Rebecca Ruch-Gallie, and I attended a weekend conference of AVMA District 8 and 9 leaders. This regional veterinary leadership conference was reinvigorated after a multiple-year hiatus. The common challenges and benefits of building robust veterinary medical associations in large western and mid-western states was the focus. It was beneficial to learn from others’ experiences, and there was much talk about legislative initiatives in neighboring states. We are fortunate to have collaborative relationships among these districts! And, as a side note, we are ecstatic to announce that our own Dr. Marsden has been elected the new District 9 representative to the AVMA; she will be representing Arizona, Colorado, Kansas, New Mexico, Oklahoma, and Utah. Congratulations Dr. Marsden!

CVMA and YOU
CVMA works all year long, both locally and nationally, to fulfill our mission: To enhance animal and human health and welfare and advance the knowledge and wellbeing of Colorado veterinarians. It is our honor and privilege to serve the veterinary community of Colorado and work on your behalf to protect your practice and elevate the profession. One of the very best ways to assure we are meeting and serving your needs is through our annual CVMA Chapter Visits. As summer gets into full swing, so do we, and together, several members of the CVMA Board of Directors and I will hit the road to meet with every single CVMA Chapter and to have dinner and valuable conversations with veterinarians in 16 chapter locations around the state. This is the perfect opportunity for you to bring us your questions, concerns, ideas, and expectations. Tell us what you need from your state association to make your practice and professional life better. We want to meet you, talk with you, and, most importantly, to listen. Look to your mail and email for announcements about the date and time of your Chapter Visit and come join us for a few hours of food and conversation.

We’re looking forward to hearing from you, to building relationships, enjoying the company of colleagues, and advocating for the profession. Together!
PetCheck 2018 Helps 1,100+ Pets!

Katie Kethcart
CVMA Communications and Content Manager

The ninth annual PetCheck was held April 7 and 8 across the state of Colorado, and thanks to the generosity of CVMA members, more than 1,100 pets received a much-needed wellness exam and a rabies vaccination (if appropriate)!

With 54 clinics providing wellness exams and rabies vaccinations to more than 1,100 pets this year, CVMA members have a lot to be proud of! Pets helped with the PetCheck program belonged to financially disadvantaged pet owners. With PetCheck, these owners were able to access and receive needed care for their cat or dog that they may not have otherwise been able to obtain. Thank you to all the generous clinics that donated their time, staff, and resources.

Through the collective effort of PetCheck, we are afforded an unparalleled messaging opportunity that neither CVMA nor individual veterinarians could afford to undertake. Strategically, PetCheck affords a tremendous public relations opportunity for Colorado veterinarians to positively portray the profession and underscore the importance of preventive pet healthcare as well as the veterinarian’s crucial role in public health protection. The media coverage surrounding PetCheck—before, during, and after the event—puts veterinarians on the air and in the spotlight in a way we’ve only been able to dream about!

This year, we continued to have great media coverage about the event and the importance of preventive care, thanks to 9News, KOAA News 5, and print media outlets such as the Sterling Journal-Advocate and The Coloradoan. CVMA and participating clinics also increased our social media efforts for the ninth year of PetCheck, promoting their involvement in the program before, during, and after the event with posts and pictures as well as the inclusion of the PetCheck hashtag (#9PetCheck and/or #5PetCheck).

Through media coverage about PetCheck, CVMA is able to educate a large audience about preventive care, and not just those receiving exams through the program. Dr. Randa MacMillan, a CVMA past president, served as spokesperson for the event and appeared on Colorado & Company before the event and during the event outside the 9News studios.
Dr. MacMillan utilized her on-air time to discuss common health issues that often go undetected by pet owners, what veterinarians look for during an exam, and the importance of annual exams.

We are overjoyed to hear the response from the community members in need, who would not have been able to have their pets visit a veterinarian had PetCheck not been available to them. We heard
amazing stories from so many caring pet owners that have warmed our hearts and shown us how much this program means to so many.

“Thank you so much for doing this,” said one Pet-Check client. “We wouldn’t be able to afford to take our little fur babies to the vet so we appreciate this so much. Thank you, thank you, thank you!”

Clinics that participated were happy that they could participate in this wonderful community event.

“We met some wonderful people and dogs today!” said one participating clinic. “It feels great to give back to the community and help those in need.”

“We participated in the ninth annual 9PetCheck! Our veterinarians and clinic team were able to provide preventative exams and rabies vaccinations at no cost to under privileged pet owners!” said another participating clinic. “It was a great time! Thanks to 9NEWS (KUSA) and Colorado Veterinary Medical Association for organizing such a wonderful event!”

In addition to the veterinarians, veterinary technicians, and administrative staff that made PetCheck possible, CVMA would like to thank our generous sponsor, BIAH-Merial—a global leader in veterinary rabies vaccines—who provided rabies vaccine trays to each participating clinic.

CVMA also owes a heartfelt thank you to our 14 volunteers, who donated their time for the phone bank on April 2, and in four hours had filled 972 appointments. This also could not have been a success without the wonderful assistance of the CVMA staff team, who all helped make the program run smoothly. We couldn’t have made the event successful without the help of our volunteers and team!

And a special shout out to the CSU students who came to Denver on Saturday to staff the clinic at PetAid Animal Hospital. Their enthusiasm was infectious and they served almost 100 pets in need. It was great to see the next generation of veterinary medicine in action and the pet owners were incredibly grateful for their service.

Last but not least, a big thank you to the news team at 9News KUSA, and the news team at KOAA News 5, for being our media sponsors. Both 9News and News 5 did a great job of highlighting the importance of wellness exams and rabies vaccinations for pets in need. Enrico Meyer and Jaime Berg at 9News, and David Reeve and Katie Lewis at News 5 were invaluable resources to our CVMA team, and they both did an amazing job coordinating 9PetCheck and 5PetCheck.

We hope you enjoyed participating in the Pet-Check program in 2018, and we are looking forward to the tenth annual PetCheck program in 2019!
Animal Welfare and the Veterinarian

Rebecca Ruch-Gallie DVM, MS

As veterinarians, we take an oath. We swear to protect animal welfare. We swear to relieve animal suffering. We swear to promote public health. At times, these feel conflicting. How often do you feel like you’ve done less than you could because of constraints in care delivery? Or thought, just because we can do it, does it mean we should? Is this decision the right one for this animal and this owner? Am I ensuring public health and safety with this treatment? These questions are not unique to veterinary medicine. These are also questions sheltering professionals grapple with every day.

Being admitted to the profession of veterinary medicine, I solemnly swear to use my scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering, the conservation of animal resources, the promotion of public health, and the advancement of medical knowledge.

I will practice my profession conscientiously, with dignity, and in keeping with the principles of veterinary medical ethics. I accept as a lifelong obligation the continual improvement of my professional knowledge and competence.

We know that Colorado is unique in so many ways: climate, topography, culture. Routinely ranked highly in places to retire, places to raise a family, and places that are very pet-friendly, we are proud of the state we call home. One unranked attribute is the quality of animal care and the collaboration between animal shelters and between animal welfare professionals and veterinary medicine. You may not realize this, but our established Colorado animal shelters have a reputation for doing amazing things in the name of animal welfare. As I travel nationally, people in both professions comment on how Colorado has accomplished what was thought nearly impossible: 90+% live release rates within communities; collaboration between shelters and with the veterinary medical profession to achieve high standards of care; outreach to minimize the number of animals relinquished by people in need; and reaching out to other regions to help with expertise and/or new forever homes. This success was not instantaneous. It has taken decades of work, of developing relationships, and of respectful listening. The result is what Dr. Steele and others call socially conscience sheltering (see page 9).

Advocacy, defined as public support for or recommendation of a particular cause or policy, is a key pillar of CVMA’s mission. Protecting animal health and welfare, preventing and relieving animal suffering, and promoting public health are causes every veterinarian supports. After all, we swore an oath. Policies and legislation are rarely created by veterinarians. Policies and legislation are rarely created with malicious intent. Policies and legislation created can impact our ability to support and advance causes we hold dear. Policies and legislation created that remove professional judgement and knowledge in animal welfare and public health are counter to those causes. We cannot support them.

The leadership of CVMA encourages members to reach out to animal welfare professionals in your community. Continue Colorado’s reputation as collaborative and relationship building with respectful listening. Open dialogue with community members to determine and address concerns with evidence-based solutions. Be diligent in promoting and supporting socially conscience sheltering.

CVMA invites you to advocate for animal welfare in your community. Talk to your clients and elected officials to share your valuable insight and concerns and help educate the public on vital issues such as this.

President’s Post continued from page 4

This idea rings true, particularly for CVMA. As I started on the Board, I worried that we wouldn’t have all the right answers to pressing national questions. I’ve heard people say not to worry about a particular issue because it’s “AVMA’s job on the national level.” And for those larger issues, that might be true. But localism, as it relates to CVMA, works both to provide specific solutions that fit our unique situation, right here in the Colorado communities we live and work in, and to make our local veterinary community more vibrant. Your state veterinary medical association is localism on display, in its truest form.

By definition, if you are reading this, I am preaching to the choir. You are a CVMA member, and at least interested enough to have read this far in the VOICE. You understand the importance of organized veterinary medicine, and of being informed and involved. So consider this your call to action. Reinvest in your local veterinary community. Look for ways to strengthen the connective tissue in your professional relationships. This could mean engaging in a CVMA committee, organizing a gathering for your local Chapter, or simply reaching out to a colleague you have lost touch with and reconnecting. A renewed sense of community with a local emphasis makes us stronger together.
Animal welfare is changing at an unbelievable pace. Change creates opportunity—it allows for thoughtful, collaborative, and effective methods of ensuring all animals are respected. It also allows for zealots to promote their agendas as they manipulate well-meaning, compassionate people into promoting policies that result in suffering and death. As a result, a crisis is happening in animal welfare. No veterinarian, no shelter professional, and no community member has the luxury of being unaware of the agenda that a well-funded faction is impressing on a passionate segment of the animal-loving population, on policymakers, and on our communities. We must be informed, and it is urgent that we educate colleagues, friends, family, policymakers, and neighbors. The penalty for failure is too great to be complacent.

Socially Conscience Sheltering

It is difficult to understand the destructive movement that is becoming insidious in communities across the United States without first understanding what is at stake. It has taken decades to achieve the level of success that is happening in animal welfare—and in Colorado, especially, this intense work has led to statewide outcomes that were unimaginable only 30 years ago. This success has been made possible by thoughtful leadership, by people in our community, by veterinarians, by thousands of shelter workers and volunteers, by many rescue groups, and by collaboration. It is through “Socially Conscience Sheltering” that this has been achieved.

Socially conscience sheltering is a model that has developed organically. Its fundamental goal is to create best outcomes for all animals, which is achieved through:

• Ensuring every unwanted or homeless animal has a safe place to go for shelter and food
• Placing every healthy animal and not making euthanasia decisions based solely on time and space
• Assessing the medical and behavioral needs of homeless pets and ensuring these needs are thoughtfully addressed
• Preventing suffering and making appropriate euthanasia decisions
• Aligning shelter policy with the paradigm of the community
• Enhancing the human-animal bond through safe, thoughtful placement of animals
• Ethically transferring animals so animal welfare challenges in the source community are addressed while the health of animals in the receiving community is protected

The lens through which the above are viewed is that of the “Five Freedoms” which were developed in the United Kingdom in 1965. These are:

1. Freedom from hunger or thirst by ready access to fresh water and a diet to maintain full health
2. Freedom from discomfort by providing an appropriate environment including shelter and a comfortable resting area
3. Freedom from pain, injury, or disease by prevention or rapid diagnosis and treatment
4. Freedom to express (most) normal behavior by providing sufficient space, proper facilities, and company of the animal’s own kind
5. Freedom from fear and distress by ensuring conditions and treatment that avoid mental suffering (this is very difficult to achieve in a sheltering environment but each shelter should work towards this goal)

Socially Conscience Sheltering Is Being Slaughtered by the “No Kill” Movement

The propaganda is compelling—stop “killing” animals in shelters. Place at least 90 percent of animals that come to shelters, or 95 percent, or 98 percent . . . This arbitrary number constantly changes. The no-kill messaging states “We know that shelters can get to 90% save rate virtually overnight. But that is not what no kill is. It is saving EVERY healthy and treatable pet.”

If a shelter is to manage to a single statistic, and not to the best interest of animals, it is true that every shelter could save 98 percent of the animals that come to them. At least animals in the shelter, the ones we can count, will be alive in a facility. However, there is a bigger picture that cannot be ignored.

Imagine a law that stated that 98 percent of all animals that enter your critical care unit must not be euthanized. This could be accomplished in one of two ways. First, you could accept only animals that have a great chance of surviving into your hospital. Dogs with GDV, cats hit by a car,
those with endocrine crises, any animal with a guarded or poor prognosis would be turned away at your door. How is this humane?

Could you reach this arbitrary number of animals not being euthanized even if you accepted all animals that come through your door? Sure, but you just have to let them die naturally; and depending on the method used to calculate your “save rate,” natural death doesn’t count against your statistics.

By creating policy based on an arbitrary percentage of animals being “saved” the following unintended and unacceptable consequences happen:

- **Animals in need are turned away from the shelter.** These are pets that are suffering from disease and injury. These are animals that are dangerous to our community, that are aggressive and threaten the safety of people and pets as well as diminish the human-animal bond. These are animals that go somewhere else to die, often without a kind word and the “good death” of euthanasia. The no-kill movement has stated that these turned-away animals will be taken care of by people in the community who will just “do the right thing.” This may be true—but the suffering that ensues if it is not true is too great a risk for a compassionate community.

- **Animals could languish in a cage until they die.** The Five Freedoms cannot be accomplished when an extremely anxious animal is kept in a cage for years because no one will adopt him. One can visit shelters that are “no-kill” and watch these animals constantly circling in their cages, attacking walls, and self-mutilating.

- **Statistics could be manipulated (or falsified) to make the public believe the percentage is being achieved when it is not.** The Pet Animals Care Facilities Act (PACFA) collects and publishes statistics from rescues and shelters in Colorado. A quick perusal of one “no-kill” shelter in Southern Colorado has indicators that statistical manipulation may be occurring. For example, for several years the number of animals in the shelter at the end of a calendar year is significantly different than the number at the beginning of the next calendar year.

- **This type of policy also promotes the acquisition of “highly adoptable” animals from other communities.** If the local community relinquishes 100 dogs to the community shelter, and 15 of those dogs have serious health or behavior challenges resulting in euthanasia, then that shelter has an 85 percent live release rate. However, if that shelter imports 100 healthy puppies from another state, and they are all placed, the total live release rate increases to 92.5 percent. This practice is ethical unless the shelter won’t accept all animals from their own community. Managing local admissions while importing “highly adoptable” animals from other communities fills local homes with imported animals while the local animals are either denied admission to the shelter altogether or left with fewer potential homes.

- **Dangerous dogs are placed in the community.** This issue represents the largest divide between the no-kill movement and Socially Conscience Sheltering. No-kill promotes that if anyone is willing to take a dog, regardless of the risk to the community, it is the shelter or rescue’s obligation to release that dog to that person or group. What if the dog has a history of killing another dog or cat? What if the dog has severely mauled a child? What if the dog lunges and attempts uninhibited bites towards people? None of that matters with many No Kill groups—if there is someone who wants to take the dog then it must be released to them. Socially conscience sheltering disagrees with this. It is the responsibility of socially conscience sheltering to protect our communities and to promote the inherent value of animals in our society. Is this black and white? No. Every organization must determine the level of risk they are willing to accept. This level differs between organizations; it changes over time, must be thoughtful, and should be transparent. Making these decisions is very difficult. Animal welfare professionals who are tasked with making these decisions regularly receive death threats and are bullied on social media by no-kill groups. This is unacceptable.

- **Shelters can no longer accept lost or homeless animals from the community.** If a shelter has 100 kennels and the average dog stays in the shelter 10 days, then each year 3,650 dogs can be housed and given a second chance. If 10 percent of the dogs that come to the shelter are so behaviorally or medically challenged that they are not being adopted, these kennels will fill with these suffering animals very quickly. Within six months, virtually every housing space in every shelter would be filled with animals that are suffering, just waiting to die. Homeless pets from the community will not have the opportunity to heal or become behaviorally sound because they won’t have access to the shelter’s veterinary and behavior teams.

- **Owned pets that are at their end of life will not have euthanasia services available when they cannot afford this service by a veterinarian.** It is heartbreaking to imagine the thousands of animals that are brought to shelters by caring owners, animals that are dying, having to suffer because shelters are being criticized for their euthanasia numbers. No-kill Colorado has created messaging that incorporates owner-requested euthanasia in the negative outcome story of the shelter.

**No Kill Is Slow Kill**

This is where the manipulation is most obvious. No-kill groups are telling their supporters that they are only promoting that all healthy and treatable animals be placed, that they believe in euthanasia of animals with irredeemable pain, and that in very rare situations extreme behavior is a reason for euthanasia. These groups get passionate...
OF NOTE: Animal Welfare

Continued from previous page

community members to actively promote the no-kill agenda. They rally public contempt for animal welfare organizations that don’t subscribe to their platform. But they don’t tell these groups these important truths:

• As a state, Colorado has a live release rate hovering around 90 percent for all cats and dogs. This is result of years of socially conscience sheltering, and not a result of illogical no-kill policies.

• Healthy, behaviorally sound, adoptable animals are not being euthanized in Colorado shelters. Period.

• Legislation that is being promoted as “animal protection acts” actually make it impossible for shelters to euthanize suffering animals. While the model ordinance No Kill Colorado is promoting has a provision enabling a veterinarian to document when an animal is irremediably suffering so that it can legally be euthanized, the ordinance contradicts itself, also stating that no animal can be euthanized for any reason if there is an open cage in the shelter. As far-fetched as this seems, this legislation actually passed in Pueblo, Colorado with an enactment date of January 1, 2019. At the city council meeting where this was debated, it was incredibly sad to hear so many citizens, people who care deeply about animals, testify that this bill applied only to healthy animals and they believe that all healthy animals should be placed. All healthy animals are placed in Colorado, and this bill was not specific to healthy animals. These people had clearly been misled, and what they were inadvertently fighting for will cause more animals to suffer and to die.

• Pets who cannot enter a shelter because it is full will die. Pets that are attacked by dangerous dogs that are allowed to enter the community will die. Cats left outside in extreme weather because the shelter is full may die. Homeless animals with critical medical needs will not make their way into the shelter and some will die. The animals that are warehoused in shelters because no one will adopt them will suffer and eventually die. It is hard to imagine that kind people in support of the no-kill movement understand this reality.

• Collaboration will die. In many Colorado communities, shelters work together for best outcomes for all animals. For example, a municipal shelter confiscated 30 cats from a hoarding situation, and it was clear that many of these cats were so behaviorally altered from living in this situation that they could not adapt to a home or a working cat placement. The municipal shelter had no behavior resources, and was faced with euthanizing all of these cats. They called a private shelter that has a behavior team, explained the situation, and all involved understood that many of these cats had a grave prognosis but some could possibly respond to behavior modification. If the private shelter was managing to an arbitrary percentage, those cats would have been denied admittance and all of them would have been euthanized. However, when this scenario happened last year “the best outcome for all animals” was the motivation used and these cats were accepted. More than 75 percent of the cats responded to behavior therapy and were successfully placed. Those that could not live a life free of major distress were euthanized. In this situation, 22 more cats would have died if the no-kill philosophy had directed this decision.

Educated, thoughtful animal advocates must find the courage to educate clients, policy makers, colleagues, and the public on the truth about the no-kill movement. We can fear retribution for speaking against the no-kill agenda, but we cannot let that fear paralyze us from action. We must protect the animals, the very animals that unsuspecting no-kill advocates believe they are protecting. We must work together to create best outcomes for all animals, promote safe communities, and nurture the human-animal bond. Please join us in being brave.

**Note:** The authors’ use of “conscience” in this context is thoughtful and deliberate, to emphasize the concept of conscience as it relates to the awareness of right and wrong.
OF NOTE: Animal Welfare

No-kill movement seeks to kill collaborative animal welfare efforts

Anna Stout

This editorial is reprinted with permission from the Mar 25, 2018 Grand Junction Daily Sentinel (online).

Last month, an activist group based primarily in southern Colorado called No Kill Colorado (NKCO) disseminated a list of statewide animal “save rates.” This list was based on numbers reported annually by Colorado animal shelters to the Pet Animal Care Facilities Act and calculated using a self-serving method that wantonly ignores reality. In its crosshairs was our own Mesa County Animal Services (MCAS), an agency that has been exemplary in its efforts to save animals’ lives in our community.

We all should be appalled by this myopic, ignorant, and uninformed attack on our community by an extremist group that has no real concept of how our shelters operate. By publishing a list of individual agency statistics and assuming some kind of conclusion can be drawn from those numbers, NKCO is missing a glaring detail: we work together. To have a true picture of how many lives are being saved, we must be measured as a community. MCAS statistics cannot be viewed or interpreted in a vacuum; the decisions made at one organization affect the statistics at another.

NKCO’s calculation, the “RAW method” as they tout it, counts “each animal in and each animal out.” However, this method does not account for the condition of animals when they are admitted, such as an animal that is so sick, injured, or aggressive that it cannot be saved. It also counts animals that are euthanized at the owner’s request when the animal is incurably sick or suffering. The NKCO method, therefore, is a skewed and misleading calculation of what is really happening inside Colorado’s shelters.

Roice-Hurst Humane Society, by NKCO’s calculation, has a save rate of greater than 96 percent. In the organization’s leader’s own words, it is a “commendable save rate.” But Roice-Hurst could not have that save rate if it weren’t for our partnership with MCAS, and what is actually commendable is the relationship between the two agencies, not the number by itself.

Our organizations have distinct but overlapping missions: MCAS exists to ensure public health and safety and animal welfare. Roice-Hurst works to promote the bonds between pets and people through sheltering, adoptions and providing resources for our community’s animals. This necessarily means MCAS deals with more animals that pose threats to health and safety, animals that were subject to abuse, and animals that have not received proper care, while the more adoptable and treatable animals come to Roice-Hurst. By taking on those animals that are less likely to be rehabilitatable or curable, and by making humane euthanasia affordable, MCAS does an invaluable service to Roice-Hurst and to our community.

NKCO will have you believe that virtually every animal is rehabilitatable or curable, but I can tell you from working in this industry, this romantic ideal is naive at best and dangerous at worst. There are animals for which euthanasia is the only humane option. And believe me, there are worse fates than euthanasia.

The activists at NKCO have it as their stated mission “to make Colorado the safest state for homeless pets.” Well, NKCO, it’s time to shutter your doors because Colorado is already the national leader in animal welfare with one of the highest statewide save rates in the country (ranking first or second, depending on which calculations you rely on). Mission accomplished—and without cumbersome laws dictating arbitrary goals for shelters that do nothing more than tie the hands of shelter workers, encourage dishonesty in reporting, and discourage collaboration among agencies.

NKCO wants our state to pass laws mandating shelters abide by their “no-kill equation,” and in the meantime is working to undermine the efforts of communities like Mesa County. This kind of pitchfork-yielding crusader approach pits people against what no-kill groups like NKCO paint as “bad guys” who, in reality, are good, caring humans making the difficult and sickening decisions that I cannot imagine having to shoulder. Movements like No Kill Colorado don’t help the cause of homeless pets and, in fact, villainize agencies like MCAS that truly go to every length possible not to euthanize.

This is about more than an uninformed attack on one agency; this is about reinforcing the pillars that sustain the heavy burden of animal welfare—a load that can only be borne by collaborating across agencies and strengthening each other through our partnerships.

NKCO will not use Western Colorado as its poster child. We are a different animal (pun intended) than they have come across before, and true to our “wild west” spirit, we do not need outsiders dictating how we address and solve our community’s unique problems. We as citizens are proud to have collaborative agencies that have made our region a leader in animal welfare. Mesa County is a great place to be a pet.

Anna Stout is the executive director of the Roice-Hurst Humane Society in Grand Junction.
OF NOTE: Animal Welfare

Unmet Needs in Colorado: Opportunities for Collaboration

Matthew Levien  
Director, Buddy Center of Dumb Friends League  
Sloane M. Hawes, MSW  
Strategic Initiatives Coordinator, Dumb Friends League

In a recent survey of 149 Colorado veterinarians conducted by the Dumb Friends League, respondents identified a variety of program areas that could support improvements in health for cats and dogs in Colorado. The survey asked respondents to identify cases they have observed in their communities in which they believed the cat or dogs needs were unmet. Additionally, the survey asked respondents to identify current service gaps in their community. Note: 98 (65.8%) of the respondents were either clinical practice associates or clinical practice owners, and 90 (60.4%) of the respondents were in the senior stage of their career at 20 or more years post-graduation. For both species, clients declining services due to cost, use of preventive services, and the prevalence of medical issues around dentistry, obesity, and pain management were identified as the primary areas in which companion animals’ needs are not currently being met. For cats, diabetes, urinary disease, and respiratory issues were also mentioned, while for dogs, arthritis, treatment of orthopedic issues, and allergies were additional areas of concern.

These identified gaps reflect that a portion of the pet-owning population in Colorado may be experiencing barriers to veterinary services such as the cost of care, differences in culture or language, or general education on veterinary care. They also mirror the challenges for the veterinary profession identified in the 2013 National Research Council report including economic stability of veterinary practice and education and evolving to meet society’s changing needs.

Respondents provided a number of suggestions for how to address the gaps they see in their communities. Overwhelmingly, opportunities for supplemental funding for clients who cannot afford the cost of services was mentioned as the primary suggestion for addressing gaps in the health of Colorado’s cats and dogs. Increased communication and collaboration between shelters and private practices to ensure all animals are receiving the highest possible quality of care was also suggested as a method to increase the safety net for the animals who owners may not seek services with a veterinarian. A more practical suggestion included integrating an increased understanding and awareness of indicators of pain and illness and an emphasis on socialization, enrichment, and the concept of behavioral health could be incorporated into veterinary practice.

LaVallee, Mueller, and McCobb’s (2017) systematic review on veterinary care in underserved communities demonstrated that while barriers to veterinary care have been documented extensively in the literature, there is a paucity of research on the effectiveness and efficiency of low-cost community medicine initiatives to address these barriers. The Dumb Friends League will be meeting with the Colorado communities represented in the survey over the next year to discuss existing programs and to develop a plan for resolving the identified gaps. Our hope is that a diverse group of stakeholders will engage in this planning process so that the solutions can meet each community’s unique strengths and needs. If you would like to participate in these planning sessions, please reach out to Matt Levien at mlevien@ddfl.org for more information.

References

Respondent Profile (n = 149)

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BIG Ideas Forum | Spring 2018:
Supporting Your Team and Designing an Ideal Culture

Rebecca Rose, CVT
CATALYST Veterinary Practice Consultants

Veterinary teams of all shapes and sizes have a team culture. Is your culture designed by default or by design?

While serving as one of the Issue Illuminators at CVMA BIG Ideas Forum | Spring 2017 on “Building a Healthy Practice Culture for Engagement, Growth, and Success,” I asked the attendees to define their practice’s culture. One attendee simply stated, “We have no culture.” That is impossible! Having “no culture” leaves a vacuum that plagues your workplace with a lack of direction, a lack of vision, and a lack of traditions. This creates a negative culture in and of itself.

When there is a working environment, a culture will be created, either by design or by default.

What Is Culture?
Culture can be defined as the sum of attitudes, customs, and beliefs that distinguishes one group from another. Another way to consider culture is through traditions. Within a veterinary setting, traditions may include some or all of the following:

• supporting the team in continuing education
• building trust through training and team building
• hosting social gatherings like summer barbecues or holiday parties
• establishing and achieving professional objectives
• identifying common goals and striving to accomplish them

These traditions may be seen as valued aspects that are continually cultivated and enhanced. Values can be looked upon as “guiding principles,” written (created by either the veterinarian, management, or the team) or unspoken (ideas everyone on the team believes to be the guiding principles).

Design the Ideal Team Culture
During an upcoming gathering of your team members, guide them through an exercise in designing their team culture. Ask them, without boundaries, judgements, or restraints, to describe with as much detail as possible, the culture of their dreams. Some questions to explore:

• What does it feel like to walk into the ideal hospital culture?
• How do the team members treat each other?
• What do they value in offering an extraordinary client experience or quality medical care?
• What is their purpose? Why do they exist as a team?

That’s the fun part, designing the ideal culture without boundaries! Typically, teams will answer with the following concepts:

• Respect for each other’s skills and education
• Fair accountability
• Training and honing of skills
• Support for personal and professional growth
• FUN!
• Trust
• Follow through
• Working towards common purpose and goals

Your team will create quite an impressive and comprehensive list when encouraged and feel that they are in a safe place to be open in their ideas. It is important to emphasize that you truly encourage this for this exercise, and to really listen to their ideas without judgement or pushback.

Implement the Ideal Culture
The challenge is bringing the ideal culture to fruition! It typically takes one to two years to consciously move a team in the direction of a positive, collaborative, and communicative culture. This can be accomplished with intent and vigilance.

Leaders, owners, and managers must be on the same page in supporting the shift and understand there will be obstacles along the way. Identifying the current culture, truthfully, can be trying. Leaders may want to see their team as being on the right path, but the team may be experiencing something completely different. With heart and eyes wide open, leaders and managers can objectively accept the true state of the culture and how to move towards the ideal culture.

There may be a big gap between the current state of affairs and the place your team wants to be. Filling in the gap takes time and diligence. Don’t tackle 12 concepts at a time. This is setting everyone up for failure. Choose a low risk challenge, at first, making the shift and celebrating the successes along the way.

As an example, your team may not be receiving in-hospital training and yet the team believes training to be a positive, impactful, and important aspect of their culture. To fill in the gap, the team may design a SMART goal to make in-hospital training a reality.

Specific: Deliver two in-hospital training sessions to the entire veterinary team within the year.

Measurable: Currently no in-hospital training is being offered. Identify two within the year and track attendance at both.

Accountable: Dr. Merriweather and Lead Technician Winston are to oversee the training for the upcoming year and give quarterly reports on the progress.

Continued on next page
Realistic: First training will be in 4 months, focusing on team communications ($300 budget)
- Identify primary coordinator, presenter, day/time, sponsor; provide reading materials. Add team communication skills training to phase training for new hires.
- Second training will be in 11 months focusing on dental radiology ($300 budget)
  - Identify primary coordinator, presenter, day/time, sponsor; adjust appointment schedule for the day; supply team members with current client educational materials.

Timely: 4 months and 11 months

Celebrate … While not part of the SMART Goal strategy, this is a crucial. If you are finally making the steps happen, it’s important to acknowledge, reward, and celebrate! For example, while in the training session, make a big deal of the event … Blow up balloons, have a cake delivered, and be grateful that the training session is happening!

That’s only one, simply designed SMART Goal, but it is a start. Your team is encouraged to come up with three goals they feel they can accomplish in a collaborative way. When utilized properly, establishing goals and bringing them to completion can be an empowering endeavor.

Finish Strong!
Teams need support, resources, and encouragement along the way. They look to their practice leaders for validation and guidance and to keep the momentum going. If leadership makes your team’s goal a priority and importance is placed on it from the top, the team will feel acknowledged and energized.

In general, there will be obstacles that become apparent while creating a cultural shift. Anticipate a saboteur or two. Leaders may very well be the first to fall off the bandwagon, but leading through example is imperative when in the midst of a culture shift. Team members must find their oasis and hold onto the idea that change is good. If you all work together, the ideal practice culture can become a reality.
Mom’s Milking Machine
Curtis Crawford, DVM

On the off chance he ever reads this little story, let me just start by saying my brother is a great man. I have nothing but the deepest respect for him and all 6’3”, 220 pounds of his determination and grit. He may be my younger brother, but he sure ain’t the runt of the litter. We were born eighteen months apart, but he grew faster than I did, so as toddlers, we were sometimes thought to be twins. Not identical though. He had coarse hair like an Airedale dog (the key word there is “had”) and has our dad’s big ears identical though. He had coarse hair like an Airedale dog and a nose. There is absolutely no doubt as to who his father is. On the other hand, I took more after Mom’s side of the family—and of course, I am much better looking. But considering I was born nine months and two weeks after our folks were dating, there isn’t a lot of question about my paternal parentage either.

We grew up on an isolated farm and ranch in northeast New Mexico with no nearby neighbors, so we had to become pretty close if we wanted to have someone to play with. There were no Xboxes, computers, DVDs, nor iPods to play with by yourself, and TV just plain sucked. It was a grainy black and white with two channels on a good day and three if God smiled on you. It took at least two people to switch channels. Not only did you have to get up and go twist the channel knob on the TV set, someone had to go outside and rotate the pipe that held the TV antenna some 20 feet up in the air above the trees around the house to align it with whichever mountain the chosen TV station broadcast from. If the wind was blowing (and when wasn’t it?), the antenna became a wind vane and had to constantly be readjusted. That was the kid’s job. You would be outside slowly turning the antenna, trying to hear someone yell from inside the house, “A little more . . . a little more . . . too much, too much, go back!” Then you would hear them laugh at some profound quote by Red Skelton and forget all about the poor miserable waif huddled outside wondering what great thing you had missed because there wasn’t any recording device to play it back.

Now Dad was not exactly Mr. Romance. Come Mom’s birthday or their anniversary, he would give me and my brother five bucks and tell us, “Go get something nice for your Mom from you two and me.” As much as we loved and respected our Dad, that was a tough order to fill. About the only time we were in town was for school (grade school principals greatly frowned on you leaving school during class even if it was to go “get something nice for your Mom”) or on Sundays to go to church (there was a funny little thing called a “blue law” back then that basically required stores to close on Sunday, so shopping was out of the question when you went to Sunday school). But one anniversary, Dad scored big. He went and bought Mom a milking machine all on his own. (If that doesn’t make your heart melt, you probably wouldn’t understand my Dad.)

We had two milk cows at home. Part of our money was made by selling the cream from their milk. We separated the cream from the fresh milk and stored it in those 5-gallon cream cans you now find in antique stores and we delivered those cans to the railroad depot a couple of times a week where they were shipped to a creamery in Trinidad. Twice a day, rain or shine, Mom would go out and milk those cows. Over the years she developed a grip-and-twist that made you sit up and pay attention to the sermon. So when Dad graced her with a used little yellow portable milking machine, it was the most romantic thing he had done since accepting Mom’s marriage proposal. (When my folks were dating, Dad had been drafted into the Army and basically the proposal was from Mom along the lines of, “If you are ever going to marry me, you had better do it before you go off to basic training cause I ain’t waiting two years for you to finish your service.”) With the used little yellow portable milking machine, Mom was happy. The cows were happy. And for some reason, Dad was really happy too.

Back to my brother. This was back in the days before OSHA and workplace safety laws. Sitting on the back of this little yellow portable milk machine was an electric motor with a V-belt that ran the vacuum pump for the milker. There was no shield over this belt. When the little motor was running, the belt vibrated a bit as it ran at light speed between the pulleys. It was totally mesmerizing to my mechanically minded brother. One day he just had to stick his finger on that belt to see if he could stop the vibration. He pulled his hand back a lot quicker than he had put it down there. The belt took his index finger and sliced off the very tip as slick as a whistle when it pulled that little digit right through the pulley. Mom had just put the teat cups on ol’ Bossy’s udder and looked up to see my brother standing behind the milker staring at his raised hand with a puzzled look on his face and blood pulsating from the end of his finger like the water fountains at the Bellagio.

About then, the pain from the wound, the guilt of putting that finger somewhere it didn’t belong, and the realization he was missing the end of his favorite nose-picking appendage all reached his little brain at the same instant. And the crying commenced. Maybe crying is too mild of a word. More like there was a wailing and gnashing of teeth of biblical proportions. Mom wrapped the hand in her kerchief, kicked off the milkers from the cow, jerked the electric cord plug out of the wall and vainly searched for that last half inch of her youngest son’s pointer finger. But it had been thoroughly mangled by the pulley and launched half-way across the barn where it probably landed in a cow pie or a cat got it.

A harrowing trip to the emergency room over backwoods country roads ensued. The doctor pulled the remaining skin over the end of the bone, placed a finger cot over it, and sent the boy home saddler but wiser. Mom was mad. The cows with the full udders were mad. And the next morning, Dad wasn’t so happy either. He went out to the continued on next page
Continued from previous page

barn to find Mom hunched over on her old stool, head pushed into the flank of Bossy as she hand milked the engorged udder into her old milk bucket. The milking machine was laying on its side in the far corner of the barn where Mom had chucked it.

“Why aren’t you using the milking machine?” he queried as he leaned over the stall fence.

“That work of the devil took my boy’s finger off!” she snapped, not breaking the rhythm of the hiss of each squirt of milk against bucket sides.

“It ain’t the machine’s fault, Ma” Dad countered. “And besides, the boy’s not dumb enough to do it again. At least not with that finger!”

Truer words have probably never been spoken. My brother has protected that finger ever since. He has lost nails off all the rest of his fingers from other shenanigans, but that one is a sacred reminder of a valuable lesson learned the hard way. Still, Mom never forgave that little yellow portable milking machine and it never got used again.

Mistakes. Accidents. They are a fact of life. Yet how often do we permanently discard or brand something...or someone...as evil or careless or unworthy because of a single poor outcome? Granted, there are sometimes patterns of poor behavior or consistent disregard for consequences deserving of mistrust, but the most well-earned scars in our lives are often the result of a single misjudgment that we survived. How I wish I did not make the mistakes I have made in life! But I have learned my lessons from each one. They have helped shaped me into the person I am today. A wiser, more prudent head now sits on my shoulders. And those scars of previous shame now are badges of wisdom gained by personal experience.

That little yellow portable milking machine still sits in the scrap heap out by the shop. Various pieces have been cabbaged for other things, so it wasn’t a total loss. I sometimes think of all the work that it could have saved and the joy it could have given my Mom. And I am eternally grateful that she never has felt such animosity towards another person, especially me and my brother, yet has consistently modeled mercy and grace in the face being wronged. I can accept that little condemnation of a cold piece of steel in light of the forgiveness she has lavished on us. May I be the same.

CVMA. Welcome to the herd.
OF NOTE

Updates from the CSU College of Veterinary Medicine and Biomedical Sciences

Kristen Browning-Blas, Communications Director

Veterinarians on The Hill

During the Association of American Veterinary Medical Colleges annual meeting in Washington D.C., Dr. Sue Vande-Woude, professor of Comparative Medicine and Associate Dean of Research, and Dr. Kristy Pabilonia, section head in the CSU Veterinary Diagnostic Laboratories, met with Colorado representatives to advocate for the veterinary profession and issues of concern nationally and in Colorado.

In a meeting with Colorado Sen. Cory Gardner, they discussed support for veterinary loan repayment, the National Animal Health Laboratory Network, One Health initiatives, and support for animal health within the Farm Bill. They also discussed the importance of research funding at the National Institutes of Health, Department of Agriculture, and the National Science Foundation.

The visits with legislators were part of the association’s Advocacy Day: 72 educators representing 27 states made the trek to Capitol Hill, where 138 meetings were held with scores of Congressional offices.

Faculty Honored with Teaching Awards

Mark Brown, Ph.D., Associate Professor of Molecular Oncology
Multicultural Staff and Faculty Network Distinguished Service Award
Honors individuals who have made outstanding contributions to diversity, inclusive excellence, and multiculturalism into their professions and the multicultural community.

Dr. Dean Hendrickson, ACVS, Professor, Clinical Sciences
Colorado State University Best Teacher Award
This award is selected by a committee of students, alumni, faculty and staff, and honors teachers who make a difference.

Tod Clapp, Ph.D., Assistant Professor, Biomedical Sciences
Board of Governors Excellence in Undergraduate Teaching Award
This university honor is given annually to one standout faculty member who possesses a unique passion and talent for engaging students.

Scholarship Honors Dr. Bob Pierson’s Livestock Legacy

A new scholarship has been established in the memory of Dr. Robert “Bob” Eliot Pierson, a longtime CSU professor and clinician. Pierson, 98, of Fort Collins, passed away on December 8, 2017. He was a CSU professor of veterinary medicine for 30 years. He taught several food animal courses, ran the large animal ambulatory division, published or co-published many articles and books, and ran multiple research projects.

One of his greatest qualities was his tenacious drive for perfection—whether in the art of teaching or the art of painting. Pierson’s paintings were on the cover of the American Equine Journal for 11 years and featured on the cover of the American Veterinary Medical Association Journal.

“When I was a student of Dr. Pierson at CSU back around 1960, he used to draw colored chalk cutaways on the blackboard of the internal organs (thoracic and abdominal) of animals, for teaching purposes,” said former student, Dr. C. George Dewell. “These drawings were so true and beautiful that we hated to see them erased. I have no idea how much time he spent in preparing them, but it had to be considerable because they were done in acute detail and accuracy. I will never forget those drawings.”

Through this scholarship, Dr. Pierson’s legacy will live on and support veterinary students who have an academic focus on livestock health and production.

Gifts may be made to:
CSU Foundation
Robert E. Pierson Memorial Scholarship
P. O. Box 1870
Fort Collins, CO 80522-1870

Or online at:
https://advancing.colostate.edu/PIERSONMEMORIAL

Save the Date: October 5-6 for Zoobiquity Colorado

Sponsored by the CSU College of Veterinary Medicine and Biomedical Sciences, and the Gates Center for Regenerative Medicine, University of Colorado Anschutz Medical Campus, Zoobiquity Colorado aims to uncover the astonishing connection between human and animal health by highlighting laboratory and clinical research of human and veterinary investigators and fostering future collaboration across disciplines. Learn more at zoobiquity.colostate.edu.
The 2018 Veterinary Innovation Summit in College Station, TX

Michelle Larsen, DVM

As an industry veterinarian, I attend many conferences. After the buzz from the first Veterinary Innovation Summit (VIS) in 2017, I eagerly signed up for the 2018 VIS. My experience was anything but disappointing.

The summit is designed to provide ample networking opportunities among large industry partners, entrepreneurial startups, key opinion leaders, and practitioners in an interactive, intimate setting.

This year there were three major themes:

- Patients Like Us
- The Human-Animal Bond
- The Future of Practice Models and Ownership

Each theme is supported by group TED-talk type presentations, followed by breakout sessions. Some breakout sessions involved telemedicine companies pitching their product or service, some tried to solve issues of incorporating new technology into practice, and others introduced brand new topics to veterinary medicine, such as blockchain and on-demand veterinary services using smart speakers.

I submitted a topic two weeks prior to the conference for an additional networking opportunity on a crowd-sourced topic (anyone willing with a good topic can speak at the conference!). My topic, “How to Simplify Telemedicine Practice,” attempted to answer the important question of how to demonstrate the value of telemedicine to general practitioners.

Leading this discussion provided some answers and raised more questions, and the veterinary innovation council is open to hearing our suggestions. We must start answering these questions regarding new technology that our clients expect. If we do not, we risk our profession getting dragged along with the innovators, instead of creating solutions to our current problems or client and staff demands.

As I learned at the conference, innovation is only important if it is adopted. Innovation is only adopted if it can create value.

For those that are interested in being the change we wish to see in our profession, I highly encourage you to attend next year’s Veterinary Innovation Summit. I hope to see you there!

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Introducing Our New Internist

Stacey Hoffman
DVM, MS, DACVIM (Internal Medicine)

Dr. Stacey Hoffman has undergraduate and graduate degrees from MIT and Harvard.

Her veterinary training has been at The Ohio State University, VCA West Los Angeles Animal Hospital, and the University of Wisconsin-Madison.

Dr. Hoffman has been a Diplomate of the ACVIM (Internal Medicine) since 2002.

She is very practical and experienced in clinical veterinary medicine, having been a small animal practitioner in Massachusetts and Colorado, a referral specialist in Florida and Arizona, and having owned her own specialty practice in Arizona.

Dr. Hoffman has particular interests in infectious disease, gastroenterology and endocrinology, and she has extensive experience in diagnostic ultrasound and endoscopy.
Why Mindfulness Can Be Useful for You and Your Practice

Katherine Garcia, MA, LAC, MAC
Clinical Services Manager
Peer Assistance Services, Inc.

Stress, depression, and anxiety are a part of life. We all experience these feelings situationally in our lives, but if these emotions are not recognized and addressed, we can fall into a state of distress. Feelings of depression and anxiety typically manifest in two ways: either we think about our past or our future. Many people live their lives in the past or future, instead of thinking about today and now. When we constantly think about our past, feelings of anxiety and depression can ensue as we think about mistakes we’ve made or where we could be now if we could change our path. When we live in the future, feelings of anxiety and depression arise as we ruminate and catastrophize about what is going to happen to us. . . . If. Studies have shown that living in the past or in the future creates unnecessary emotional strain and stress, as we cannot change our past or predict what the future holds.

Mindfulness is a technique that teaches one to live in the present, which helps one to experience life as it is rather than through thoughts, opinions, or worries. John Kabat-Zinn, the founder of Mindfulness Based Stress-Reduction, describes mindfulness as awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally1. Studies show that mindfulness can help reduce stress, improve physical health and increase working memory and problem-solving ability.

Not only that, but according to a study performed by Harvard Medical School and Massachusetts General Hospital, meditation and mindfulness were linked to increased gray matter in the posterior cingulate (mind wandering, self-relevance), the left hippocampus, (learning, cognition, memory, and emotional regulation), the temporoparietal junction (empathy, compassion, perspective taking), and the Pons (production of regulatory transmitters)2. Additionally, gray matter decreased in the Amygdala (anxiety, fear, stress; fight or flight). This suggests mindfulness and meditation are not only healthy, but might also facilitate experience-dependent cortical plasticity.

Here are some mindfulness techniques you can use to bring yourself to the present, reducing your stress:

1. **Slow your breathing.** Before entering a room to see a client and/or patient, stop and take five slow cycles of breathing (five seconds to breathe in, five seconds to breathe out), feeling the air enter and leave your body. Paying attention to your breathe will bring you to the present and help center you.

2. **Stretch.** With closed eyes, reach slowly to the sky while breathing in for five seconds then slowly return your arms to your side and exhale.

3. **Feed your focus.** Try eating your meals or snacks as slowly as you can, savoring every bite and sensation. You may be surprised at the flavor and your sensation of fullness.

4. **Study your surroundings.** Choose a random object in your immediate environment such as a pen, a picture, or your stethoscope and observe it very carefully for 60 seconds. See what you can observe that you may never have seen before. Or, pay close attention when you drive. Try to find one new thing on your drive you haven’t noticed before because you’ve been lost in your thoughts.

5. **Walk the walk.** Take a slow, 10-minute walk to think about your tasks, motivations, and goals. This can be amazingly relaxing.

6. **Communicate.** Talk to a coworker and really listen to what’s being said without judging or waiting to speak. When you talk back, think about how good it feels to be listened to.

7. **Use your technology.** Download a meditation app. You could practice mindfulness and meditation techniques in the car on the way home from work, bringing you to a calmer, stress-relieved state.

Peer Assistance Services provides the statewide Veterinarian Peer Health Assistance program through a contract with the Colorado State Board of Veterinary Medicine. For more information on the Veterinarian Peer Health Assistance Program contact Katherine Garcia, MA, LAC, MAC, Clinical Services Manager at kgarcia@peerassist.org.

Office locations:

- 2170 South Parker Road, Suite 229
  Denver, CO 80231
  303.369.0039

- 200 Grand Avenue, Suite 270
  Grand Junction, CO 81501
  970.291.3209

24 hour information Line: 720.291.3209

References

The third annual Women’s Veterinary Summit invites participants
to embrace change and access their full potential, asking: What
does it take to be comfortable inside of ourselves no matter what
is happening out in the world?

14 CE Hours for $650

Register at wvc.org/wvs

TOPICS COVERED
- Ways to initiate and embrace change
- How to create a personal brand for career advancement
- Gain confidence in pursuing goals based on personal values
- Career paths and ways to address hidden barriers
- Wellness – personal, social, financial
- Build a culture that nurtures growth
- How technology can assist in reaching your goals

MODERATOR
Jen Brandt
PhD

SPEAKERS
Elizabeth Strand
PhD, LCSW
Mackenzie Martin

“So inspiring, excellent information, met great women and made great contacts!”
Dr. Negvesky
Irvine, CA
2017 Participant

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CVMA and PACFA

Nick Fisher
PACFA Program Administrator
Inspection and Consumer Services Division
Colorado Department of Agriculture

Many Colorado veterinarians may or may not be aware of the Pet Animal Care Facilities Act (PACFA). PACFA is the state regulatory and licensing program for pet animal facilities administered and enforced by the Colorado Department of Agriculture. Some veterinary practices, clinics, and hospitals may be a PACFA licensed facility because they provide regulated activities like pet animal grooming, boarding, and doggy daycare for the public or perhaps operate as the town animal shelter.

PACFA currently licenses and regulates around 2,200 pet animal care facilities in the state that operate under 15 different types of pet care categories, including animal shelters (including animal sanctuaries), animal rescues, retail/wholesale pet animal facilities, retail aquariums, pet animal groomers and grooming facilities, pet animal breeders (including dog, cat, bird, small mammal and herptile breeders), pet animal boarding (including doggy daycare and training) facilities, pet handlers that provide pickup and delivery to grooming appointments or boarding, and pet animal transporters that provide animal transport from breeders to retail facilities or shelters and rescues.

The Pet Animal Care Facilities Act (PACFA) was enacted by the state legislature over 20 years ago and gives the Commissioner of Agriculture the power to regulate and enforce the Act and promulgate rules and regulations. PACFA rules and regulations address minimum standards and requirements for pet animal care facilities, including the physical facility, sanitation, ventilation, heating and cooling, humidity, spatial and enclosure requirements, nutrition, humane care, medical treatment, record keeping, and transportation.

PACFA is staffed with one administrator, one administrative assistant, one lead inspector, five inspectors, and one investigator. Inspectors are assigned a territory and inspect between 350 and 400 licensed facilities annually. The program receives and responds to nearly 1,000 complaints on an annual basis regarding both licensed and unlicensed facilities and operators.

Like most state government regulatory programs, PACFA enforces the law through civil remedies and penalties, although the Act does provide some limited criminal authority. PACFA inspectors and investigators also work hand-in-hand with county and municipal law enforcement and animal law enforcement to address situations involving animal neglect and/or cruelty. PACFA, by statute is designated as a mandatory reporter when cruelty and neglect are observed.

We want to take this opportunity to thank the veterinary community for your help and support throughout the years and to give you additional information so that we may continue to work together to safeguard Colorado’s pets.

For more information about the PACFA Program, including the Act, Rules, and Regulations and links to file a complaint, view shelter and rescue statistics, or search for a licensed facility go to www.colorado.gov/aginspection/PACFA to access the PACFA webpage.
Q Fever in Colorado
Maggie Baldwin, DVM
Animal Incident Management Specialist
State Veterinarian's Office
Colorado Department of Agriculture

Case Presentation
The Colorado Department of Agriculture, State Veterinarians Office (CDA) was notified on February 1, 2018 by the Colorado State University, Veterinary Diagnostic Laboratory (CSU) of a positive Coxiella burnetii (Q Fever) case in a goat. The owner of the goat submitted uterine tissue for testing after an abortion event; it was the third doe to abort in a two-week time period. This goat was part of a raw milk herd share dairy, which included goats, cattle, and yak.

CDA began a joint investigation with the Colorado Department of Public Health and Environment (CDPHE) and local public health due to the scope and scale of this incident. CDA took the lead on the animal health side, while CDPHE took the lead on the human health side. Additionally, the private practice veterinarian has been actively involved with both CDA and CDPHE, as well as assisting the owners with additional diagnostics and treatment options.

Since the initial report, onsite investigations and epidemiologic tracing have been completed. Additional diagnostics were completed to get a better picture of the extent of exposure in the herd. Serology indicated that many of the cattle and goats tested had seroconverted and all environmental samples of the dairy parlor were PCR positive. Additionally, a yak that aborted mid-February was found to be PCR positive for C. burnetii.

State and local public health have been working with individuals who live or work on the farm, as well as all herd share recipients, to complete testing for any individuals showing clinical signs of Q Fever. Paired serology is currently pending for several individuals.

Q Fever
Q fever is a zoonotic disease caused by the intracellular bacterium C. burnetii. Although it has a diverse host range, it is primarily known as a cause of reproductive losses in domesticated ruminants. Clinical cases seem to be most significant in sheep and goats which includes abortions, stillbirths, and the birth of small or weak offspring.

Zoonotic Risk
C. burnetii is a highly infectious agent, in some cases requiring less than 10 bacteria to make you sick. People infected with C. burnetii often seroconvert without clinical signs or develop a mild, self-limiting, flu-like illness. However, this organism can cause serious illness, including pneumonia and reproductive losses. Humans commonly acquire C. burnetii from parturient animals, especially ruminants, which can shed large numbers of bacteria in birth products. People may also become infected by eating contaminated, unpasteurized dairy products. (Q Fever Cluster Among Raw Milk Drinkers in Michigan, 2011)

Certain professions are at increased risk for exposure to C. burnetii, including veterinarians, meat processing plant workers, dairy workers, livestock farmers, and researchers at facilities housing sheep and goats. People working in these areas may need to take extra precautions.

C. burnetii has been previously weaponized for use in biological warfare and is considered a potential bioterrorism agent.

Background on Pasteurization
In the early 1800s, the use of heat treating milk was recognized to reduce the tendency to spoil. The element of microbial destruction achieved by the practice of heating milk was not recognized until the work of Louis Pasteur in 1864. Early efforts were in heat treatment shown to destroy the Mycobacterium tuberculosis, which developed the first heat treatment standard in the 1933 United States Public Health Service Milk Ordinance and Code (commonly referred to as the PMO). It wasn’t until 1956 when Enright et al. showed that the Q fever organism, Coxiella burnetii, could survive higher temperatures, that the Public Health Service recommended to increase pasteurization standards to 145°F for 30 minutes. Pasteurization standards today are based on the destruction of C. burnetii.

CDC has reported that unpasteurized milk is 150 times more likely to cause foodborne illness and results in 13 times more hospitalizations than illness involving pasteurized dairy products.
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Novel Tools to ‘Search the Haystack’
Christie Mayo, DVM, PhD, CSU VDL
Virology Section Head

Polymicrobial diseases, those pathologies induced by multiple microorganisms acting together or in sequence to contribute to disease complexes, continue to confound veterinary diagnosis and treatment.

Two notorious examples in food-animal medicine are bovine respiratory disease complex and bovine abortion. Researchers have recently proposed all manner of diagnostic innovations—lung biopsy, ultrasound, RFID-associated thermography, breath biomarkers, serum haptoglobin, rumen temperature boluses and more—and still BRDC continues to account for an estimated 70% to 80% of all feedlot morbidity and 40% to 50% of all mortality. The polymicrobial nature of bovine abortion similarly confounds diagnosis: During the previous two fiscal years, for instance, the cause of only 42% of bovine cases in the CSU VDL could be determined—for horses, the number falls to 35%; for goats, just 24%.

Obviously, we need novel approaches to clarify the mechanisms behind pathogenesis and to prevent and treat both these two challenging disorders and other polymicrobial complexes.

Innovative Approaches

One such novel approach is underway here at the CSU VDL. Working with Mark Stenglein, assistant professor in CSU’s Microbiology, Immunology and Pathology department, and MIP research associate Justin Lee, VDL Virology Section Head Christie Mayo has been studying the use of next-generation DNA sequencing to refine polymicrobial complex diagnostics.

Mayo’s work earned a grant award for innovation at October’s annual meeting of the American Association of Veterinary Laboratory Diagnosticians in San Diego. AAVLD and Thermo Fisher Scientific awarded Mayo’s work one of its Innovation in Veterinary Diagnostic Medicine Grant Program awards, based on innovativeness, potential for broad impact on veterinary diagnostic medicine, quality of the science and other criteria.

The aim of the CSU team’s work is to develop a novel molecular method based on next-generation sequencing to systematically investigate BRDC and bovine abortion.

Investigating the Complexes’ Microbiome

Mayo’s work involves use of the Clustered Regularly Interspaced Short Palindromic Repeats, or “CRISPR” mechanism. A natural component of prokaryotic cells that contains a Cas protein, CRISPR is a gene-editing mechanism able to locate and snip specific parts of the genome and replace sequences with others.

CRISPR has revolutionized the work of many scientists in various disciplines, including Mayo’s. Although much of the work remains in the proof-of-concept stage, applying CRISPR to high-throughput sequencing of all microbial DNA in a specific environment—in the case of BRDC and bovine abortion, the respiratory and reproductive tracts, respectively—could similarly revolutionize diagnostics confounded by the limitations of diagnosing polymicrobial disease by often painstakingly slow conventional pathogen ID tools.

“We’re searching for a needle in a haystack by eliminating the hay to search for the needle,” Mayo told the Rocky Mountain Collegian in November. “In diagnostics, it’s not just time and money, but actual life. If we spend too much time looking at the hay, we won’t see what’s causing the problem.”

That type of quick study of the entire microbiome of polymicrobial disease promises not only to cut the time it takes for a causative pathogen to be found, but also to lend insights into the genetics of the pathogens that can make tailored treatment possible and practical. The ability to immediately identify and quantify specific resistance genes, for example, could target antimicrobial therapy around resistance that currently complicates BRDC therapy.

“This is a fundamental and groundbreaking discovery,” Lee told the Rocky Mountain Collegian.
A Roundup of VDL Faculty Research

The following is provided by and reprinted with permission from the CSU Veterinary Diagnostic Laboratories.

Canine Collision Tumor Characteristics


Working with colleagues in Ontario, VDL Director Barb Powers searched the lab database from 2008 through 2014 for canine patients with histology reports that indicated collision tumors. A collision tumor is a mixed tumor, a neoplasm that macroscopically represents one tumor but histologically or immunohistologically contains two or more components. In a collision tumor, two adjacent foci of neoplasia develop independently and separately. True collision tumors in people and other animals are rare, with little known about treatment and outcomes — the English-language literature contains just a single case report of a nontesticular collision tumor in a dog. The origin and importance of collision tumors are unknown, and several theories as to their etiopathogenesis exist.

Powers’ search yielded 39 cases which were eventually classified as collision tumors. Among those, the most common combination of tumors was a mast cell tumor and a soft tissue sarcoma (n = 10). The second most frequent collision tumor was composed of a hemangiosarcoma and a carcinoma, with 6 cases recorded, of which 4 were dermal in origin. Four dogs with hepatic collision tumors were identified; each collision tumor involved a primary hepatocellular carcinoma and adjacent hemangiosarcoma. The outcomes following complete surgical excision of the collision tumors for the two dogs of the case report were similar to outcomes expected following complete surgical excision of any of the individual tumor types in dogs. Wide surgical excision of a collision tumor should be the initial treatment; however, surgical planning may be difficult owing to the inability to identify collision tumors on the basis of gross appearance or cytologic findings alone. Adjunctive treatments, such as chemotherapy or radiation therapy, should be considered depending on the histopathology completeness of excision.

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SCIENCE UPDATE

Tracking Pox in Endangered Albatross

VDL Avian Section Head Kristy Pabilonia collaborated with CSU Fish, Wildlife and Conservation Biology and Tufts researchers to investigate 14 cases of avian pox in the critically endangered species of waved albatross, Phoebastria irrorata, and its possible transmission mechanisms. The birds, which breed almost exclusively on Española Island in the Galápagos Archipelago, face risk of rapidly shrinking population and threats of mortality in artisanal fisheries and introduction of novel pathogens. Recent increases in avian pox may have contributed to population declines and range contractions.

The researchers identified eight infected nestlings on the first of three surveys and six more on the second and third surveys, a prevalence of 8%, 7% and 4%, respectively. None of the 60 adult albatrosses or 231 landbirds surveyed in the focal area had detectable lesions. Although histopathologic examination of four sections of the samples from four different nestlings revealed lesions consistent with pox infection, attempted real-time avipoxvirus PCR confirmation was unsuccessful.

The colony has been monitored annually since 1999 without sign of avipoxvirus, so this may be the first appearance in the population. The source is unknown, but spillover from infected landbirds through fomites, or via mechanical transmission by biting arthropods are possible sources. The sudden appearance of this disease in a critically endangered species is concerning, and increased effort into vector identification is warranted.

Soft Tissue Sarcoma in a Shark

VDL Pathologist Tawfik Aboellail collaborated on this international case report describing the first tumor involving smooth or skeletal muscle in a Chondrichthyan species. Chondrichthyan fish — sharks, skates, rays and chimaeras — have received attention for a purported absence or low incidence of cancer, and some extraordinary claims have been made regarding shark cartilage as antineoplastic therapy.

In this report, a wild-caught Arabian carpet shark, Chiloscyllium arabicum (Gubanov), a small bamboo shark of the family Hemiscylliidae, exhibited a superficially ulcerated, 3 cm by 2.5 cm mass raised 1 cm above the skin near the base of the second dorsal fin.

Research continued on page 26

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Research continued on page 26
The moderately cellular neoplasm was composed of loosely and haphazardly arranged cells within a scant and poorly vascularized stroma. Anisocytosis and anisokaryosis were marked. Large, irregularly round or ovoid to polygonal cells dominated the tumor, with abundant finely granular to fibrillar eosinophilic cytoplasm. Nuclei were large and primarily round to oval, with occasional elongate and irregular forms, containing stippled to vesicular chromatin and one or infrequently two, large, intensely basophilic nucleoli. Nuclei were rarely peripheralized and sometimes compressed by discrete, pale eosinophilic to hyaline cytoplasmic inclusions. Fusiform, spindlyoid and straplike cells were scattered throughout. Bizarre multinucleated cells and cell-to-cell moulding were occasionally present. Other, less differentiated, small round cells with a thin rim of granular eosinophilic cytoplasm surrounding a small hyperchromatic nucleus were widely distributed in small numbers, but infrequently formed larger collections. Additional features included tumor cell phagocytosis.

Although multiple approaches were attempted, interpretation of this neoplasm presented a diagnostic challenge, and a definitive diagnosis could not be reached. The mass and location and cell structure suggested rhabdomyosarcoma, but other poorly differentiated, pleomorphic soft tissue sarcomas could not be ruled out.

Despite the locally invasive nature of the neoplasm, no mitotic activity was observed in 10 high-power field, and researchers found no macroscopic evidence of metastasis. For unknown reasons, many fish tumors exhibit fewer signs of malignancy, behave less aggressively and metastasize much less frequently than mammalian counterparts.
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Ways to Improve Morale and Team Engagement

Julia Marlin, Practice Coach Manager
Veterinary Growth Partners

In any organization, people are the most valuable resource. They drive productivity and results. Engaged employees with high morale are often more productive—which positively impacts a company’s success. On the other hand, the effects of low morale include reduced productivity and reduced revenue, high staff turnover, and increased absenteeism. We all know the challenges of recruiting and retaining good employees so we must develop a plan to decrease staff turnover. In our industry, the average turnover rate is 35%. Organizations are not giving their employees compelling reasons to stay, so in 91% of job changes, instead of changing roles within the organization, the employee left their current company to make a change—where they may take the skills they learned to a competing business.

So, what can leadership teams in veterinary hospitals do to improve their turnover rates and decrease absenteeism? One way to impact these industry challenges is by improving morale and increasing engagement. Morale is the employee's attitude or perception towards a job, the work environment, the team members, the manager(s), and the organization as a whole. Employees who are engaged are more likely to stay with their organization, reducing overall turnover and the costs associated with it. They feel a stronger bond to their organization’s mission and purpose, making them more efficient brand ambassadors. They build stronger relationships with customers, helping their company increase sales and profitability.

This sounds like a winning solution, right? So, let’s discuss the seven specific ways you can improve morale and engagement with your team.

A Clearly Defined Vision

Having a clearly defined and communicated long-term vision for your practice will keep your employees feeling like their work is more than just a job. Only 22% of employees strongly agree that the leadership of their organization has a clear direction. The leaders and the employees must believe in and understand the vision including the core values and be committed to the goals of the practice.

An employee appreciates knowing how his/her work contributes to the vision and that every position is important. Everyone working at your practice knows that they are there to help pets and people, which is most likely why they joined and continue to work in our industry; however their job shouldn’t stop there. Leaders should strive to develop people personally and professionally, provide them with clear job expectations, offer training opportunities, and give them specific, measurable, attainable, realistic and time-bound (SMART) goals to keep them engaged.

Veterinary Growth Partners (VGP) offers workshops, webinars, coaching support, and resources to help you define your vision and core values and help you to implement this with your team through Pathway Planning.

Transparency

Communicate the big picture (vision) to your team on a regular basis, which is an important part of being a good leader in any organization. During quarterly meetings, share with your team the mission, vision, values, and focus. Each person on the leadership team should discuss where you were, where you are, and where you are going. The team can then see how much has been accomplished each quarter with these meetings.

Creating employee buy-in starts with allowing your team to participate in decisions that affect them. If that is not possible, it is critical to fully explain the leadership team’s decisions and allow the rest of the team to give their feedback. BE EMPATHETIC when they come to you with their concerns!

Team members often become frustrated when they feel that processes or protocols seem to change in the moment or on a whim. To avoid this frustration, discuss changes and company updates before they happen. The leadership team should identify the issue that caused the need for a change, discuss what the solution will be, and then clearly communicate the new protocol, process, or solution to the team.

Open book management techniques are also an excellent way to stay transparent with the team. By sharing specific information with them, you can be clearer about the expectations you have for the practice and can set departmental or individual goals to help achieve success. If you don’t share this information with your employees, they will make assumptions about the business (which are typically unfavorable towards the owners).

Recognize and Reward Achievement

Only 23% of employees agree that their manager gives them meaningful feedback. Feedback can be a great motivator. Too often we focus all our energy managing the low performers and fail to give credit to the medium and high performers. Find opportunities to recognize individuals or groups for a job well done and remember to say thank you frequently—a little gratitude goes a long way! VGP has a Reward and Appreciation Assessment that helps you determine how each team member prefers to be recognized so you can customize your reward system to their liking.

Solicit Feedback

Solicit, share, and implement feedback from your team and be open to their ideas. The ability for your team to help identify and solve issues in your practice will increase your team’s feeling of value. VGP recommends implementing...
monthly employee engagement surveys to solicit this kind feedback. Begin tracking employee satisfaction and ACT ON IT! Give employees the tools they need to succeed and get them engaged in planning.

Communicate Often
Implement regular communication training with your team. This can include skills training such as emotional intelligence, how to communicate value, or conflict competence. Communication can also be improved by having regular and effective staff, departmental, and leadership team meetings. You can also communicate through a team newsletter or an update board. Be a visible and accessible leader by taking a tour at least once per day to check in with your team and provide real-time feedback. Make it a constant effort to coach your team and give feedback on their performance at least three to four times per day. Feedback should be frequent, focused, and future oriented (which means not focusing on mistakes of the past). A rule of thumb is for every feedback you give to correct performance, you should have three to four positive feedback comments or conversations with an employee.

We can all expect that sometimes there will be issues that arise in the practice, and it is important to confront frustrations and conflict head-on. VGP has conflict-training resources including videos on how to have difficult conversations, Commando Conversations workshops, webinars, and conflict cheat sheets.

Bring on the Fun
Celebrate team anniversaries, birthdays, and special occasions like baby showers with your team. Commit to having outside work functions where the team gets together to celebrate successes. Surprise your team with cookouts or breakfast tacos. Remember to have a sense of humor with your team…smiles can be contagious.

Lead By Example
All leaders in the practice must walk the talk, which includes living the core values of the hospital. Behaviors trickle down from leadership and you shouldn’t expect a team member to follow a rule or live a value if the leadership team, including the owner, do not do so themselves. Managers must also continually evaluate themselves to make sure they are engaged. Employees who are supervised by highly engaged managers are 59% more likely to be engaged than those supervised by disengaged managers. The goal is to manage as a coach, not a boss.

Bringing It All Together
By implementing the following strategies: having a clearly defined vision, being transparent, recognizing and rewarding achievement, soliciting feedback, communicating often, bringing on the fun, and leading by example you can improve morale and increase employee engagement. This will drive production of your team leading to a happier workplace and your business will reap the benefits.

Reference

CVMA partners with Veterinary Growth Partners (VGP) to provide an array of benefits to CVMA members, including preferred pricing, educational training programs, marketing tools, practice management tools, Pathway Planning, and 1:1 practice coaching. To learn more and become a member of VGP, visit www.vgpvet.com.
Veterinary Team Feedback: Get really good at it!

Rebecca Rose, CVT
CATALYST Veterinary Practice Consultants

For veterinary team members, giving and receiving feedback can be a tough row to hoe. I recently asked a room of veterinarians, managers, and technicians, “By a show of hands, who is good at giving and receiving feedback?” One hand went up right away and one other hand slowly, reluctantly lifted. Two hands in a room of 80! We have a way to go . . .

Is it any wonder we feel ill prepared to offer and receive feedback? Similar to learning active listening skills, we are not taught how to “do” feedback. Yet, in all work environments, feedback is crucial to individual and team success. “Giving and receiving feedback is uncomfortable at first,” states Dr. Carin A. Smith in her book, Team Satisfaction Pays: Organizational Development for Practice Success. “The solution? Learn good techniques and do this often so it becomes part of the practice’s culture. In work environments where feedback is continual and appropriate, most people expect and welcome the opportunity to improve.”

Dance of Giving and Receiving

I feel we have a difficult time giving feedback because of the way we tend to receive it, challenging the way we are doing something. This may stem as far back as childhood, when we were continually being told how to behave, react, learn, excel, and achieve things. Some parents, teachers, or managers may have not been the “poster child” or “shining light” in giving feedback. Regardless of your past, now is the time to make amends and learn how to give and receive feedback.

In Dr. Jane Shaw's article, “How Feedback Can Help Performance Anxiety,” she writes, “Filtering out the negative distortion and selecting helpful information takes patience and practice. It is a delicate dance of determining what we heard and what was actually meant.”

A delicate dance, indeed! Keep that in mind if you are spooning out the feedback or being fed the feedback.

Feedback is defined as information about performance of a task that can be used as a basis for improvement. It is simply information; however, it can be distorted. To help in delivering feedback, follow these 5 tips:

1. Create Safety. In order for people to be able to accept feedback, there needs to be a certain level of trust and comfort. Ideally, teams trust each other, allowing for continual feedback (give and take) in performance and professional development. Opportunities that build confidence and skills is the best. Approaching the “teachable moment” in the spirit of support and improvement is far better than being mean or trying to prove someone right or wrong. Most often, feedback is best given one-on-one, during a time when a sincere conversation can occur.

2. Be Specific. Sugarcoating feedback may create confusion. Be clear in the expectation. As an example of sugar coating, “Casey, you do a great job, but I wish you would arrive on time.” A better example may be, “Casey, I noticed you showed up late this morning. Is anything wrong?” Then pause and listen before continuing with “It is important you arrive on time, punching in at 8:00 in the morning.” When you ask a question at the beginning, you are allowing for an inquiry to verify the circumstances. Follow up with solutions or suggested behavioral changes.

3. Timely Feedback. Waiting to give three month’s worth of feedback during performance reviews is inappropriate and downright rude. Your team members will benefit from timely, in-the-moment (when appropriate), corrective feedback.

As an example, a new hire is shown the sterile strip indicator goes on the top of the surgical pack. Upon opening a surgical pack, the new hire puts together, the sterile strip indicator is under the instruments. The trainer, in the moment, will point out the discrepancy, reiterate the reasoning for the indicator to be on top, replace the pack (if necessary), and continue to work through the day of surgeries. Later, the trainer can ask if the new hire understood the process and reason. If this feedback is offered three months later, the moment is gone and the new hire is set up for failure, rather than success.

When feedback is offered in the moment, that allows for the performance reviews to focus on career goals and collegial discussion.

4. Feeling Unfairly Criticized. There will be times when a team member feels s/he has been unfairly criticized. Inaccurate or ungrounded feedback leads to resentment.

“This might not seem to be a big problem for bosses from the old school philosophy of ‘they’ll just have to get over it.’ It is, however, a big problem, because of the human desire for justice and for retribution,” states David Lee in his article titled “Do You Know How To Give Constructive Feedback?”

If a team member feels unfairly criticized, as a manager, allowing for continued, open dialog is imperative. Team members supported in conflict resolution will continue the conversation, finding common ground and solutions. When team members are not allowed to talk about their frustrations and feelings, the conflict will continue to brew, causing far more conflict.

5. Catch ‘em doing something right. Giving reassuring, encouraging feedback is important. Catch your team members doing things right! For the team members that like positive reinforcement in front of others (some don’t), acknowledge a job well done with others present. APPRECIATION GOES A LONG WAY!

Be specific. As an example, “Tom, I saw you assist Mrs. Smith with her umbrella this afternoon during the rain. I know how committed you are to client service and I greatly appreciate it!”

Continued on next page
Receiving Feedback

Now, to flip the coin, let’s discuss receiving feedback. Ideally, it’s about taking in the information and using it as an opportunity for personal and professional development. Receiving feedback, with an open heart and mind, with patience and understanding, shows grit, leadership, and resolve.

Feedback can be a two-way street between team members, management, and leadership. Actively seeking feedback is a testament to leading by example. You may think you are behaving in one manner, but others perceive it differently.

When you are the receiver, make sure you understand the message. “What I hear you saying is . . . .” Mirroring the statement will help in clarifying. Remember to keep your emotions in check and consider the opportunity in professional growth. Soliciting feedback as a manager, team lead, veterinarian, or owner shows fortitude. Your team is watching you. Be aware of your actions and reactions to feedback.

I realize feedback can be tough to give and receive. However, with practice, we can get better. Next time I ask a group of veterinary managers and leaders about giving and receiving feedback, maybe we can double the responses and have 4 hands raised in a room of 80!
Timing Your Next Real Estate Transaction

Kent Hildebrand
Broker, Southern Colorado | New Mexico
Carr Healthcare Realty

Every commercial real estate transaction has an ideal timeframe to begin the process. Most healthcare professionals understand that starting a new office or relocating an office doesn’t happen overnight, but the majority of professionals are not aware of the ideal timeframes for each type of transaction. Different types of problems arise when starting a transaction too early or too late, and both need to be avoided.

Too Early
If you start the process too early, it creates a scenario where you spend your valuable time looking at properties and evaluating options, working with lenders and other members of your team, only to find out the landlords or sellers won’t negotiate with you yet. Many landlords and sellers won’t take their spaces off the market for extended periods of time while waiting for the tenant or buyer to be ready to transact, because there is too much time before the transaction will actually take place.

Or if they do negotiate, they won’t be willing to offer you even close to their best terms since they are going to lose income on holding a space vacant for an extended period of time. On the other hand, if they will put forth reasonable terms, it is predicated upon you moving forward immediately, which can leave you stuck paying for a space you can’t occupy for a period of time or paying unnecessary rent on your former space if you leave early.

Too Late
When starting a transaction too late, an entirely new set of problems arise. To start, most people underestimate how long a commercial lease or purchase transaction takes. They imagine it is similar to buying a home or leasing an apartment, which unfortunately is not the same as a commercial transaction timeline.

Simply identifying the top options and then negotiating a mutually agreeable deal can take several months. The legal process of reviewing contracts and finalizing details with lenders, architects, contractors, and equipment and technology providers comes next; this portion can also take months.

This is followed by the build out process if renovations are required. While you can build out a new space in 6 to 10 weeks depending on the size and scope of the project, you first have to design the space, then get construction documents and engineered plans created, then submit for and receive permits to start the build out. After construction, you need to leave time for installing furniture, fixtures, equipment and technology, final permitting and approvals, while also leaving room for uncontrollable delays, and change orders.

If you are relocating from a previous office and you don’t vacate your former space prior to the lease expiring, you’ll likely pay between 125 to 200% of your last month’s rent based on a provision found in most leases called “Hold-over.” This allows the landlord to charge you a higher month-to-month lease rate as a penalty for not vacating or signing a new lease.

Just Right
If you only had two choices, starting too early is definitely better than starting too late, but it is by no means your top option. Fortunately, there is an ideal timeframe to start each type of transaction and you don’t have to choose between the lesser of two mistakes. You can set yourself up for success by understanding the requirements of each type of transaction and how long each process takes.

Although there are many additional details needed to ensure each type of transaction is handled properly, let’s start with the correct timing for the primary types of transactions that veterinary professionals will engage in:

- Start-up or new office: 10–12 months in advance
- Relocation: 10–12 months in advance
- Purchasing an existing building or condo: 10–12 months in advance
- Buying land to develop a new building: 18–24 months in advance
- Buying a practice and getting a new lease or purchasing the building: 60–90 days in advance

Every type of transaction starts with a specific approach and detailed game plan that is aimed at maximizing the opportunity. Getting the best possible deal and terms is extremely important, but so is making sure you don’t waste valuable time that could have been spent in your practice. If you lose the equivalent of twenty to thirty hours of your time—which is what an average commercial real estate transaction requires to be handled properly—how much money would that cost you in lost production?

Equally as important as saving time and money is avoiding costly mistakes that people make all too often when they don’t understand the nuances of healthcare real estate. The old adage, “if I knew then what I know now . . .” can easily be avoided by hiring licensed professionals that specialize in real estate for healthcare practices. The reason patients come to see you is because you are trained in a specific skillset that offers skill and expertise that they require and that few people have. The same is true for real estate professionals that can help you identify your top options, negotiate the most favorable terms, save you a substantial amount of time, and avoid common pitfalls.

The first step to maximizing any commercial real estate transaction: Start the process at the right time.
Have You Noticed a Decline in Professionalism in Your Practice?

Rebecca Rose, CVT
CATALYST Veterinary Practice Consultants

Have you sensed a decline in the professional habits of veterinary team members? Take your team out to a “5-star” restaurant to really experience exceptional service!

Recently I have spoken with not just one, but three veterinary hospital managers on this exact topic. Apparently, there is a decline in professionalism, not only in the veterinary community, but in most industries.

Think about it. When was the last time you went to a restaurant and received a great experience? While having lunch with a veterinarian owner and two managers, this became a unique topic of discussion. Our conversation drifted from “those millennials,” to “what has happened to customer service in general?”

Most often we frequent a “big box” for home supplies and food. Not much of a “customer experience” there. Or sit in the car to pick up a quick lunch through a window where you can barely see a person’s face. Not much of a “customer experience” there.

How many of your team members have sat down to a 5-star (or even a 4-star) meal? When was the last time you paid attention to the customer experience you were receiving from an acclaimed, eclectic restaurant?

Is it any wonder we have a disconnect when speaking with our team about offering an extraordinary client experience when they have never experienced it themselves, anywhere?

Whose job is it to educate a young person on manners, professionalism, and being attentive to the needs of a client? The parents? Elementary or high school? Colleges or universities? The employer? Where does this learned behavior blossom and grow?

In the study, “Professionalism, the Decline of a Critical Set of Behaviors,” we may find answers. Patrick Miller, PhD, has this to say, “Businesses, themselves, will have to contribute the greater proportion of the solution. Making professionalism an explicit part of the orientation and training of all new hires is a step that most businesses have failed to take.”

So, there you have it . . . Teaching and training professionalism falls on the shoulders of the small business owner and managers.

Ironically, what I have experienced in teaching professional programs over the years is that people have a difficult time defining professionalism, but don’t have a problem recognizing an absence of it.

Have you ever considered taking your team to a well-known 5-star (or 4-star) restaurant as a training exercise?

Before you go, engage in a conversation about customer service, professional attitude, and the feeling you experience when someone is so attentive to your needs that you feel an “Aaahhhh” moment. Help the team recognize extraordinary customer service: the waiter pulling your chair out, placing a napkin on your lap, the water glass constantly full, the plates removed with grace when empty, and much more. Help them to identify the timing in the delivery of the meal, the taking of the order, and the attention to detail in plate presentation, lighting, and ambiance.

This could be an awesome exercise in improving your team’s understanding of client service and professionalism. Get dressed up. Get picked up by a Lincoln Town Car. Get all decked out and have fun with it! Who knows, maybe some group bonding will be an added bonus while reaping the benefits of exceptional service.

Have You Noticed a Decline in Professionalism in Your Practice?
CVMA Leadership Council and Association Updates

Under the new CVMA governance model, the Leadership Council is made up of the Board of Directors and the Chapter Representatives and meets twice annually, during each CVMA BIG Ideas Forum. The CVMA board, consisting of the officers, meets monthly to discuss and decide association business. The full Leadership Council meeting was held March 23 during CVMA BIG Ideas Forum | Spring 2018 in Golden. Following are highlights and updates from these meetings.

Leadership and Elections

Dr. Joy Fuhrman, the 2018 President-elect, has taken a new position out of state and has resigned from the board. CVMA bylaws give the board the power to fill vacancies and Dr. Sam Romano has graciously agreed to extend his service as Immediate Past President, and Dr. Will French has also agreed to extend his term as President for an additional year. Dr. Stacey Santi will advance to President-elect. Elections will be held to fill the two upcoming vacancies on the board, Secretary Treasurer-elect and AVMA Alternate.

Discussion No Kill Colorado & Pueblo Ordinance

As noted in the article on page 9, a “no kill” shelter ordinance has been put forward in Pueblo. The CVMA board has discussed the proposed ordinance and will be putting together a work group to develop a position statement so that CVMA can be more proactive if this issue is advanced elsewhere in Colorado.

The Humane Society of the Pikes Peak Region (which operates the Pueblo shelter) has made excellent progress in terms of animal overpopulation and this ordinance could erase some of that progress. The debate is being emotionally driven, not factually driven, and work must be done to counter the misinformation and supply facts and guidance.

National Western Center

A project overview and update was provided, highlighting the space that PetAid Animal Hospital and CVMA would occupy. CSU has now selected an architecture firm and engineering firms to do initial designs and has provided CVMA and PetAid with a Memorandum of Understanding, which details renting space in return for offering externship opportunities for veterinary students. The Council also discussed the relationship between CVMA and PetAid Colorado, which have strong connections in mission but are two distinctly separate organizations.

CEO Report

Diane Matt, CVMA CEO, announced several staff changes. Departures included Katie Koch, Director of Programs and Initiatives; Samantha Hoyt, Manager of Sponsorships and Learning; and Melissa Angel, Director of Administration and Human Resources. New staff include Sara Eberhardt, Manager of Sponsorships and Learning; Letty Roady, Administrator of Governance and Programs; and Alex Natama, Accounts Payable Specialist.

CVMA Commissions

CVMA’s four commissions meet during each BIG Ideas Forum to discuss current and relevant issues and, if appropriate, bring forward recommendations to the board. The commissions met on March 23 in Golden and provided the following reports.

Advocacy and Outreach: The commission discussed recent developments on the Animal Chiropractic issue. Dr. Hellyer, Chair of the Task Force on Pharmaceuticals, had recommended the dissolution of the task force and the Commission voted to dissolve that task force and to form more specific work groups when needed.

Animal Issues: The commission recommend that the board move forward in creating a position statement on “no kill” ordinances. Discussion was also held on whether the commission should be folded into the Commission on Advocacy and Outreach since they have such similar areas of focus, allowing for the fourth commission to then focus on CVMA’s “Support” pillar to be more in alignment with CVMA’s mission. The commission agreed there is the need for wellbeing support in the profession, but did not want to join Advocacy and Outreach, suggesting instead that a fifth Commission on Support be added.

Education: The commission reviewed feedback on recent CVMA events (CE Equine, Ag Animal, Convention, SkiCE and reported that SkiCE saw the second highest attendance in the program’s history. The commission also discussed adding a mixed animal component to SkiCE. The commission urged all in attendance to ask members about supporting the Send-A-Student program. Saturday at convention will feature exciting programming for students and CVMA hopes to see many students in attendance.

Leadership: The commission discussed the conversion of the “Inside CVMA” session held at BIG Ideas to a web-based program and suggested holding a peer connections event at convention that follows a “Speed Dating” model, but allows for networking with colleagues and facilitates connections between students and practitioners. Commission chair, Dr. Jeff Fankhauser, will be stepping down because he is moving to California. Leadership thanked Dr. Fankhauser for his many years of service to CVMA as P10 Facilitator and as a commission chair.

Allied Organizations

The following updates were provided by some of the allied organizations in attendance.

AVMA: Dr. Melanie Marsden (AVMA Delegate) reported on recent discussions between AVMA and several airlines who
had asked veterinarians to sign a waiver for travelling pets that made guarantees about the pet’s behavior. She noted it was a good example of how AVMA illuminates the realities of the veterinary profession and steps in when those with no understanding of veterinary medicine try to legislate how it is practiced. She also noted that AVMA is looking for volunteers on several councils and committees. She also urged attendees to contact legislators regarding legislation that would affect student debt by removing some aspects of loan forgiveness.

CACVT: Juliebeth Pelletier, CVT (Executive Director) was absent but provided a written statement encouraging CVMA members to contact CACVT for any questions or concerns.

State Board of Veterinary Medicine: Dr. Bill Fredregill reported on recent developments from the state board, including new continuing education requirements. He noted that the state board will no longer be approving CE offerings and that veterinarians are responsible for evaluating the appropriateness of CE. Dr. Fredregill noted that due to relatively low usage of the Peer Assistance program, the board will be slightly reducing licensing fees.

Colorado Federation of Animal Welfare Agencies: Dr. Heather Reeder reported on recent activity by a group called “No Kill Colorado” who initially sought to bring forward a ballot initiative in Colorado. This year, however, the group has begun targeting local jurisdictions and advancing ordinances to mandate specific live-release rate percentages. She noted that “no kill” language is very difficult to battle on a public relations front and noted the importance of support from veterinarians who can serve as a trusted voice in the debate. Dr. Reeder explained that “no kill” is a term to simply describe limited-admission shelters that will not accept additional animals once they have reached capacity. This limited admission model leads to an increased pressure on resources for other shelters in the area. (See related articles on pages 8–12)

PetAid Colorado: Diane Matt, CEO, reported that PetAid Animal Hospital continues to grow and served over 13,250 pets in 2017. She thanked referring veterinarians for their support in sending clients in need to PetAid and reminded those present about the availability of Care Grants in rural and frontier counties.

Continued from previous page

**CVMA CVA Program**

**Grow Your Team—While Growing Your Bottom Line!**

CVMA is proud to recognize and certify the designation of CVMA Certified Veterinary Assistant (CVA). The CVMA CVA program provides continuing education for veterinary medical personnel, enabling them to become more informed, skilled, and trusted members of the veterinary medical team. This program was designed to help staff to pursue veterinary medicine as a career, not just a job. Investing in your employees saves your practice from having to deal with less turnover for your practice and costly replacement and re-training efforts! To learn more and to enroll today, visit www.colovma.4act.com.

Now offering CVA Levels II, with level III coming soon! Contact Kara Basinger, CVMA’s manager of membership engagement, at 303.539.7275 for more information.

**Did you know?** If you are a CVMA Premium or Core member, the $325 enrollment fee for the CVA program is waived as part of your membership level!

**CVA Graduates**

Please join us in congratulating the newest graduate of the CMVA Certified Veterinary Assistant program!

- **Emily Andrade, CVA I**
  Gamble Pet Clinic
  Fort Collins, CO

- **Hollie Hardman, CVA II**
  A Pet’s Place Animal Hospital
  Longmont, CO

- **Jenifer Hilton, CVA III**
  PPVM Pets Emergency Hospital
  Evans, CO

- **Tiffany Ho, CVA III**
  Buena Vista Veterinary Clinic, Inc
  Buena Vista, CO

- **Jennifer McConaghy, CVA II**
  Buena Vista Veterinary Clinic, Inc
  Buena Vista, CO

- **Emily Murray, CVA I**
  Northgate Animal Hospital (Happy Paws, LLC)
  Colorado Springs, CO

- **Brooklyn Schlager, CVA I**
  Arvada Veterinary Hospital
  Arvada, CO

- **Lauren Wyatt, CVA I**
  Northgate Animal Hospital (Happy Paws, LLC)
  Colorado Springs, CO
Lylli, a corgi/Labrador mix, was diagnosed with idiopathic chylothorax and referred to Colorado State University for consultation with CSU cardiologists and to discuss surgical options. Our surgeons closed off Lylli’s thoracic duct, removed the lining around her heart and inserted a pleural port. Our critical care service nursed her back to health, and recent radiographs show no signs of fluid in her chest. Lylli is back to breathing easy, thanks to our comprehensive services. All under one roof.
Our business and financial expertise distinguishes us from our competitors. There has never been a better time to sell or buy a Veterinary Practice.

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How do you know if a practice purchase price makes sense for you?

Simmons Buyer Assistance

Did you know that a practice should pay for itself when you purchase the practice? It is not just about obtaining funding. If you have an opportunity to buy a practice or buy into a practice you should know “if it will work at that price”. The team at Simmons Intermountain can prepare a Cash Flow Analysis and Opinion of Practice Investment Value for you before you purchase.

Don’t stop there. Consider expanding your buyer assistance services to allowing Simmons Intermountain to work through the transaction on your behalf all the way to closing.

Kathy Morris, CPA, CVA  •  David King, DVM, CVA  •  Simmons Intermountain
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