

# VOICE

## The Community Issue

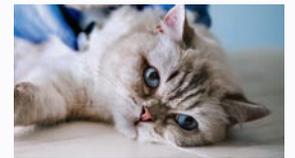
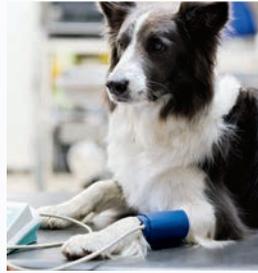
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- CVMA Celebrates Award Winners
- Listening to the Voice of CVMA Members
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*Giving Back, One  
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## CVMA Events and Deadlines

October 12-13  
CE Southwest  
Durango  
[colovma.org/ce-southwest](http://colovma.org/ce-southwest)

November 13  
Professional Development Series:  
Cardiology  
Denver  
[colovma.org/professional-development-series](http://colovma.org/professional-development-series)

December 31  
Membership Renewal Deadline!  
[colovma.org/membership](http://colovma.org/membership)

January 26-29, 2020  
SkiCE: Oncology  
Vail  
[colovma.org/skice](http://colovma.org/skice)

February 2020  
Agricultural Animal: Field Necropsy  
Wiggins  
[colovma.org/agricultural-animal](http://colovma.org/agricultural-animal)

September 10-13, 2020  
Convention 2020  
Keystone  
[colovma.org/convention](http://colovma.org/convention)

**CVMA**  
Colorado Veterinary  
Medical Association

## Our Mission

*To enhance animal  
and human health  
and welfare, and  
advance the knowledge  
and wellbeing of  
Colorado veterinarians.*

# PRESIDENT'S POST

## Colorado Veterinary Medical Association

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The CVMA VOICE is published quarterly to members (Core and Premium members will receive a mailed print copy and Basic members will have online access only) and once a year to non-members free of charge.

Information and advice presented in this publication do not necessarily represent the views of CVMA.

### Deadlines for Submission

All articles, contributions, and display ads must be received in the CVMA office by the dates below. For more information or to obtain a rate schedule, contact the CVMA office at info@cvma.org.

Issue #1 — January 15

Issue #2 — April 15

Issue #3 — July 15

Issue #4 — October 15

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Stacey Santi, DVM  
President, CVMA

## The Top 3 Challenges Facing the Veterinary Business in 2020

Do you ever wake up some days and think to yourself “What in the world did I do to end up

here?” (usually this is a bad thing but in this case, it’s the opposite!) Well, that happened to me as I travelled to CVMA Convention 2019. I spent time marveling at how a small town girl like me from New Mexico, who gained admission to Colorado State University in 1992 through the WICHE government program, is now stepping into the role of CVMA president. My passion for animals and the veterinary industry has taken me many places from being an associate at a 24-hour emergency facility to being the managing veterinarian for a corporate-owned practice in Durango, to being the founder of technology startup company Vet2Pet App Builders.

I often think of my career in two stages: BC (Before Confidence) and AC (After Confidence). The first decade or so of my career, I spent most of my energy focusing on how not to hurt or harm any animals under my care and how to communicate effectively with my clients and teammates. I spent an inconceivable number of hours pondering how to be a better veterinarian and colleague and whether I was good enough to even hold these titles.

In the latter half of my career (AC), I spend most of my time these days thinking about our profession, the challenges facing it and contemplating innovative “out-of-the-box” solutions. I don’t think there is a harder job on the planet than being a veterinarian (except for maybe a pediatric oncologist) because nowhere else are you paid to kill someone’s best friend on the daily when all you want to do is save them. Being a veterinarian is definitely not for sissies. And, now as our world advances, especially in the field of technology, new challenges face us in a way we’ve never had to deal with before

that will require us to roll up our sleeves and figure out how respond (which generally leads to improvement) to the biggest challenges facing us right now.

1. Declining visits
2. Shortage of veterinarians and technicians
3. Online access to free information and shipped to home goods

Just like the other industries before us (the book store, the grocery industry, etc), we are going to have to figure it out if we are going to grow our businesses. So let’s start those conversations. We are smart people! Send me your thoughts. What keeps you up at night? What solutions are you trying in your practice? Are they working? Listen, if you can figure out how to turn x-ray film into an e-collar, you are qualified to be part of the solution.

I can’t wait to hear from you!

Sincerely,  
Stacey Santi, DVM  
CVMA President

Share your thoughts by emailing me at [stacey@vet2pet.com](mailto:stacey@vet2pet.com)

Check out my blog:  
[vet2pet.com/author/stacey-santi/](http://vet2pet.com/author/stacey-santi/) ■

## BRIEFINGS



**Diane Matt**  
CEO, CVMA

## A Sense of Community: It's the fabric that weaves us all together as one

This September, I attended my high school reunion! For me, the most exciting part was the Sunday brunch after the official, “dress-up” Saturday night dinner party, and laughing and catching up with the members of the Girl Scout Troop 427 that I joined as a fourth-grader, sold cookies, went camping, and traveled with until we graduated from high school. They are my school years “community”—an amazing gift from the troop leader and all the parents who supported us along the way.

I was lucky to experience a sense of belonging in the troop, and the reunion inspired me to dig deeper into and what it means to have a sense of community. Using Dr. Google, here's what I learned, and as you read this you'll quickly see how having a sense of community is reflected in the organizations we belong to—whether they have shaped our childhood and school years, supported us as adults, or contributed to our professional lives.

For context and theoretical underpinning, some time back—in 1986 (33 years ago)—David W. McMillan and David M. Chavis (1986) published “Sense of Community: A Definition and Theory” and identified four elements that define a sense of community: **Membership, influence, reinforcement, and shared emotional connection.**

How do these four elements play out for CVMA? What's their relevance to us, today?

**Membership.** “Membership is a feeling that one has invested part of oneself to become a member and therefore has a right to belong. It is a feeling of belonging, of being a part” (McMillan and Chavis, 1986).

- We know that in veterinary medicine, people make huge, significant, personal investments to become veterinarians, as does everyone who

is connected to the veterinary profession. CVMA welcomes every veterinarian as a member, and engages others in the veterinary profession in a number of ways. CVMA's inclusive mission is to serve the needs of individual veterinarians and the veterinary profession as a whole.

### Member satisfaction from the 2019 CVMA Membership Survey

This spring, CVMA conducted a member survey as input to the board's strategic planning. Three member satisfaction questions were included. For all three questions, CVMA ranked at the top end of the range of results for similar associations:

- Overall, how important is CVMA membership to you? Important or Very Important = 75.61%
- How satisfied are you with your membership in CVMA? Satisfied or Very Satisfied = 69.91%
- How likely are you to recommend CVMA membership to a colleague? Likely or Very Likely = 78.86%

**Influence.** “Influence is the ‘sense of mattering’, of making a difference to a group” (Chocano, 2018).

There are many ways the needs, values, and opinions of CVMA members matter and make a difference in the actions CVMA takes. Across the state, CVMA benefits from the perspectives of members engaged in formal leadership roles. Then, there are members who respond to surveys, vote on bylaws and elections, attend chapter meetings and visits, click through on emails and communications, and read notices and publications. Member feedback is always the first consideration of the strategic planning process. All these ways of interacting help CVMA stay on course and reflect member interests.

*Briefings continued on page 20*

## CVMA Board of Directors

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*President*

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*President-elect*

Dr. Ashley Ackley  
*Secretary/Treasurer*

Dr. Steven Dick  
*Secretary/Treasurer-elect*

Dr. Will French  
*Immediate Past President*

Dr. Rebecca Ruch-Gallie  
*AVMA Delegate*

Dr. Curtis Crawford  
*AVMA Alternate Delegate*

Ms. Diane Matt  
*CEO\**

## Chapter Representatives

- 1 - Dr. Karen Nann
- 2 - Dr. Teva Stone and Dr. Brooke James
- 3 - Dr. Hannah Klein
- 4 - Dr. Adam Tempel
- 5 - Dr. Colleen Carnes and Dr. Allison Kean
- 6 - Dr. Michelle Larsen
- 7 - Dr. Steve Graff
- 8 - Dr. Dale Davis
- 9 - Dr. Kayla Henderson
- 10 - Dr. Marguerite Flett
- 12 - Dr. Randal Hays
- 13 - Dr. Renee Rumrill
- 14 - Dr. Matt Braunschmidt
- 15 - Dr. Mark Ryan
- 16 - Dr. Alison McNeilly
- 17 - Dr. Leon Anderson

## Student Chapter Representatives

- Class of 2020 - Laurel Krause  
Class of 2021 - Sierra Drizin  
Class of 2022 - Stephanie Cruz Castro  
Class of 2023 - Katya Spitznagel

\* *Ex-officio, non-voting*

## Listening to the Voice of CVMA Members



As a membership organization, CVMA’s board and staff spend a lot of time thinking about member needs and how to design benefits and services to make members’ lives easier. As a part of the association’s 2019 strategic planning work, CVMA sent out an electronic survey seeking member input on their membership and career satisfaction, activities they feel the association does well and not so well, and overall concerns as veterinary professionals. The survey received 123 responses.

Here are a few highlights from the 2019 CVMA Membership Survey.

### Member satisfaction

- On a scale of 1 to 5, with 1 being “Not at all Important” and 5 being “Very Important”, 75% of respondents gave CVMA membership a rating of 4 or 5, which is at the top end of the range compared to results for similar associations.
- On a scale of 1 to 5, with 1 being “Not at all Satisfied” and 5 being “Very Satisfied”, 70% of respondents gave CVMA a 4 or 5 rating, which is at the top end of the range compared to results for similar associations.
- 79% of respondents were “Likely” or “Very Likely” to recommend the CVMA to a colleague, which is

at the top end of the range compared to results for similar associations.

### Career satisfaction

- 71% of respondents were satisfied with their careers, which is at the low end of the range compared to results for other jurisdictions.
- The overall weighted satisfaction rating of 4.02, while not a poor overall score, was at the bottom end of the range compared to other jurisdictions.

On a scale of 1 to 5, with 1 being “Not at all Important” and 5 being “Very Important”, 75% of respondents gave CVMA membership a rating of 4 or 5, which is at the top end of the range compared to results for similar associations.

### Member services and benefits

- The most important benefit for members is CVMA’s advocacy efforts at the state legislature.
- Other highly rated benefits include the PAC, the online member directory, Peer Assistance, Career Center job postings, the Power of 10 Leadership Academy, and the *eVOICE* weekly e-newsletter.
- The top-rated benefits are set out in the chart below. Respondents were asked to rate each benefit on a scale of 1 to 5, with 1 being “Not at all Important” and 5 being “Very Important”.

Benefit	Rating		
	4	5	4 and 5
Advocacy	20%	60%	80%
Career Center	23%	54%	77%
PAC	26%	37%	63%
eVoice Newsletter	30%	30%	60%
24/7 Peer Assistance Support	20%	37%	57%
Veterinarian Directory	21%	34%	55%

### Member concerns

The top overall professional concerns reported by members in the survey include:

Concern	% of Respondents
Work/Life Balance/Wellbeing	40%
Financial Concerns	20%
Staffing Issues	17%
Student Debt	16%
Dealing with Clients	15%

These are just a few highlights from the 2019 survey. The CVMA Board of Directors has reviewed the

full survey results as part of the association's 2019 strategic planning process. That process is ongoing, and the results of the process (the 2019-2021 CVMA Strategic Plan) will be highlighted in future CVMA communications.

CVMA thanks all members who took the time to complete the 2019 CVMA Membership Survey. With your help, the association will continue to strive to improve the lives of all Colorado veterinary professionals in the years ahead. ■



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# OF NOTE

## How to Be an Excellent Referring Veterinarian to Solutions-Veterinary Hospital

### Solutions-Veterinary Hospital

It is estimated that within the Denver metropolitan area more than 240,000 animals are cared for by people living in extremely low-income households. Considering this figure, a monthly caseload of 1,000 patients would meet 5% of the need in our community. To maximize our impact and help as many people and pets as possible, we ask for your partnership in selecting appropriate cases for referral. Working together we can help more of our community members avoid economic euthanasia and shelter relinquishment of their beloved pets.

### Our philosophy

Solutions-Veterinary Hospital has five guiding principles:

- Prevent animal suffering: Provide affordable wellness services and education.
- Alleviate suffering of animals in our community: Offer affordable, fixed cost medical care to address pain and discomfort.
- Maximize our impact: Our treatment decisions will be based on providing a good quality of life and not on providing the longest life possible. Our goal is to help as many animals as possible rather than doing everything for a few.
- Enhance the dignity of those we serve: We understand that asking for help can be difficult and we seek to create a respectful experience for all our patrons, regardless of their personal circumstances. We offer services based on an honor system which is posted in our lobby—a Sign of Respect.

*The Dumb Friends League Solutions-Veterinary Hospital exists to prevent and alleviate suffering in pets whose caretakers would otherwise be unable to provide this care. Out of respect for our clients and out of concern of creating barriers when documentation is challenging, we serve our clients on an honor system. If you can otherwise afford to provide care for your pet, please obtain that care from one of the excellent veterinarians in our community. Care received at this hospital is made possible by donations intended to create a safety net so no pet suffers.*

- Work collaboratively with the veterinary community: We seek to partner with all of you to offer access to veterinary care to all who need it. Working together, we can affect positive change across our state.

### Scope of care: What to refer

SVH operates within a limited scope and does not offer specialty care. Different from specialty referral practices, the hospital is not equipped to offer advanced diagnostics or surgeries. Our treatment plans are based on the most efficient path to creating a good quality of life for as many animals as possible. Counseling clients about our limited scope ahead of referral is tremendously helpful to creating a positive experience for them and their pet. Limb fractures offer a common example of this scenario. In order to alleviate suffering and prevent relinquishment, we offer clients low cost, donor subsidized amputation procedures. However, clients unwilling to consider amputation for their pet are not well served with a referral to SVH as we do not offer advanced orthopedic surgeries. Similarly, patients with advanced neoplasia may be offered palliative treatment but will not receive chemotherapy or surgery. Aligning expectations with services offered allows the hospital to focus resources on helping as many pets as possible while minimizing client confusion and frustration.

Clients with medical and surgical cases who cannot afford treatment at your practice but have at least a fair prognosis without intensive care should be considered for referral. We frequently treat parvovirus, urinary tract diseases including urethral obstruction, dental disease, mass removals, pyometra, and many other conditions.

Due to the high volume of daily walk-ins and emergencies we must occasionally turn away patrons and their pets because we simply cannot meet the demand. Whenever possible, we ask that you work with your clients to find affordable treatment plans for them at your own practice. When this is not feasible, we also encourage establishing relationships with other low-cost veterinary clinics in your area so that your client has multiple options for care.

### How to refer

We understand your time is valuable. Our streamlined referral process does not require specialized forms or client qualification. To refer cases, simply email a brief summary of the case and medical record to [svhreferrals@ddfl.org](mailto:svhreferrals@ddfl.org). Our client service team works hard to respond to every inquiry quickly. For many routine procedures we are booked out several months in advance, particularly dentistry.

### Wellness services

One of the guiding principles of SVH is the prevention of suffering, and many resources in our veterinary community go toward treatment of preventable diseases. For example, in an average month last year, there were more than 50 cases of parvovirus at the PetAid Animal Hospital (the predecessor to SVH). A similar investment in vaccination and

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education can greatly reduce the amount of animal suffering, euthanasia, and shelter relinquishment. To affect this change, SVH has begun to offer wellness clinics. Vaccines, microchips, and heartworm tests are offered after a brief physical exam. If, during this exam, health concerns are identified, the patient will be referred for a comprehensive exam at SVH. By offering these services at very reasonable cost, we hope to make a significant impact in preventable disease, including the zoonotic risk of rabies.

## Pricing structure

SVH pricing is based on a set structure rather than providing an estimated range of cost. A vomiting workup is \$150, even if additional diagnostics are needed after initial exam. An advanced dental procedure is \$450, regardless of the

number of individual extractions. For those we are serving, knowing exactly what they will owe makes it possible to plan and save for care. The same is true for vaccinations. We know clients of limited means are at times making a choice to only vaccinate for rabies or a combination vaccine when they are not able to afford both. By offering a flat fee of \$20 for all necessary vaccines, the client can follow the recommended guidelines and fully protect their pet. For specific fees, clients are asked to set up an exam and consultation.

We are proud to be your partner in care for the underserved veterinary community, and we hope you will find SVH to be a valued resource.

For questions about our services, we invite you to contact Sharon Thomas, Practice Manager ([stthomas@ddfl.org](mailto:stthomas@ddfl.org)). ■



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# OF NOTE

## News From the CSU College of Veterinary Medicine and Biomedical Sciences

### We're Here to Serve You

**Craig B. Webb, PhD, DVM, DACVIM**  
Interim Hospital Director, CSU Veterinary Teaching Hospital



Having accepted the position of Interim Hospital Director while continuing my clinical time with the Small Animal Medicine service, I am fully aware and tremendously appreciative of the fact that our referring veterinarians and our area clientele are a critical cog in the operation of this hospital. In fact, I would ask you to think of this as YOUR Veterinary Teaching Hospital—as a land grant institution, we are here to serve you.

Our Services Directory will arrive in your mailboxes this fall. It is particularly important for 2020 as the hospital continues to offer state-of-the-art veterinary medicine by our world-renowned faculty and staff, and continues to add young, motivated, cutting-edge caregivers to our ranks.

Whether it is Oncology, Ophthalmology, Medicine, Livestock, Urgent and Critical Care, Theriogenology, the list goes on. Through these individuals we strive to maintain and improve upon the extraordinary care we provide for you, your clients, and their pets

As always, we have a new crop of energetic DVM students, interns, and residents who will be eager to help, learning as they go, but always striving to do their very best as burgeoning veterinary professionals.

This is also the year the hospital is implementing a new electronic medical records system, StringSoft, and although we anticipate some growing pains, we have undertaken this herculean task in large part to improve communication with rDVMs and clients.

So please be patient, and more importantly, as I said, please become an active and contributing member of the effort. We want to hear from you, and work with you to continue to provide the level of care and expertise that should be expected from an institution such as the CSU Veterinary Teaching Hospital.

Contact Dr. Craig Webb at [cwebb@colostate.edu](mailto:cwebb@colostate.edu), 970.297.5000.

### Microneedling Banishes Bareness

Jennifer Schissler, DVM, MS, DACVD

Pomeranians are perky and precious puffballs! Those enamored with the breed know that some are mysteriously plagued with hair loss on their body and tail. The once lush, soft, and luxurious coat becomes coarse and sparse over a period of months to years. The skin can also darken and become scaly. The condition is referred to as “Black Skin Disease” by owners and breeders, and “Alopecia X” by veterinarians. Pet owners are understandably concerned about the possibility of underlying illness, and winter cold intolerance. Sadly, they also feel judged, as members of the public associate baldness in dogs with neglect and contagion.



### What is Alopecia X?

Although visually dramatic, the good news is that this condition is cosmetic only, and treatment is not medically necessary.

Alopecia X most commonly occurs in plush-coated breeds including Pomeranians, Alaskan Malamutes, Keeshonds, and Chow-Chows. The hair follicles on the body and tail quit actively growing and get stuck in a resting phase. Then, when the hair is naturally shed, it is no longer replaced. The cause of this hair cycle arrest is unknown and may be variable, hence the name “Alopecia X.” This condition was originally thought to have a hormone basis because it responds to supplementation with the hormone melatonin. It is also known to variably respond other drugs that can reduce hormones secreted by the adrenal gland. Sexually intact individuals may respond to a spay/neuter procedure.

Unfortunately no one medication has been reliably successful, and some treatments that affect adrenal gland hormones are not recommended due to potential side effects.

### How is Alopecia X diagnosed?

Alopecia X is diagnosed by ruling out other causes of alopecia. A physical exam, thorough history, and blood tests

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are often performed by a veterinarian to assess for other hormonal causes of alopecia, including hypothyroidism and hyperadrenocorticism. The veterinarian may also perform skin scrapings and microscopic examination of samples from the skin to look for infection and mites. Sometimes a skin biopsy is performed to help solidify the diagnosis.

## What is microneedling?

Microneedling is a new procedure. At present, there are very few veterinary dermatologists performing this procedure worldwide.

This technique produces temporary skin microtrauma with a derma-roller instrument, which stimulates the hair follicles to come out of the resting phase and start actively producing hairs again. Because Alopecia X is a cosmetic disease, microneedling is only justifiable given its low risk of side effects and high likelihood of success, and requires proper technique, thorough disinfection of the skin, sterile instrumentation, anesthesia, and multimodal pain control. Therefore, this procedure should be performed by a veterinarian trained in this technique. At the CSU Veterinary Teaching Hospital, we offer microneedling to patients who have failed oral melatonin supplementation and for which anesthesia is considered low risk.

## What are the results?

Expectations are that patients will rest comfortably after the procedure and be back to their normal energy level and appetite within 24 hours after the procedure. Hair regrowth occurs in the majority of patients slowly within weeks to months, but it is not guaranteed.

Thus far, patients have had noticeable regrowth within six months or fewer. Final results in terms of coat density in some patients are still pending, as complete regrowth can take up to 18 months. One patient received microneedling over two years ago and maintains a full coat. Whether or not patients will require repeat treatment many years in the future is unknown. Some dermatologists have found that a second procedure is required to fill in gaps in the coat regrowth.

If you have a client who is concerned that their dog may have Alopecia X, please consider a referral to our service for diagnosis and a microneedling treatment consultation.

*Dr. Jennifer Schissler is a board-certified veterinarian with the Dermatology and Otolaryngology service at the CSU Veterinary Teaching Hospital. Make an appointment or email the dermatology service: 970.297.5000, [derm@colostate.edu](mailto:derm@colostate.edu).*

## Cancer Vaccine Study Seeks to Enroll 800

**Lauren Mingus**

**Outreach Coordinator, Flint Animal Cancer Center**

As part of the largest interventional canine clinical trial ever conducted, veterinarians leading the Vaccine Against Canine Cancer Study seek to enroll 800 healthy, middle-aged pet dogs to evaluate the effectiveness of a new cancer prevention vaccine.

The clinical trials portion of the study is led by CSU's Dr. Douglas Thamm, director of clinical research at the Flint Animal Cancer Center at the Veterinary Teaching Hospital.



“As one of the top animal cancer centers in the world, CSU and our team is in an excellent position to lead this new clinical trial,” Thamm said. “We look forward to contributing to this groundbreaking research study.”

Because of the size and scope of the project, three veterinary schools will participate in the clinical trials. In addition to CSU, the University of Wisconsin-Madison and the University of California-Davis will recruit patients for the study.

## Study qualifications

Owners must live within 150 miles of one of the participating trial sites.

To qualify, dogs must:

- Be between 6 and 10 years of age
- Weigh at least 12 pounds (5 kilograms)
- Have no history of previous cancer or autoimmune disease
- Have no significant illnesses that could result in a life span fewer than five years
- Not be on a current treatment with oral or injectable immunosuppressive medications

*CSU continued on page 15*

# OF NOTE

## All the World's a Dance Floor

Curtis Crawford, DVM  
AVMA Alternate Delegate, CVMA



I've heard that Shakespeare once wrote, "all the world's a stage." I can't vouch for whether he actually wrote that or not because I've read a whole lot more Louis L'Amour than I ever did "ye olde Bard." But I can relate to the sentiment of the words even if my daily work routine feels more like im-

prov standup than Shakespearian theater. Most days more closely resemble "Whose Line Is It Anyway?" where Drew Carey reaches into that American Flag Striped hat and pulls out a card out with some wacky scene to act out off the top of your head.

One day we had a group of cub scouts come through the clinic for a tour. Rather than lead the tour, I had the task of performing a cat spay for their educational enlightenment. The stage was set magnificently. The surgery lights brilliantly illuminated the IV fluids, the anesthesia machine exhaust fan quietly hummed, the ECG monitor beeped its steady rhythm, the patient adorned with a sterile blue drape, and everyone capped, gowned, and masked just like a "real" OR. Each youngster was given a disposable mask and cap as they entered the operating suite and stood in awe as I deftly made the abdominal incision to begin the surgery. The end of the snook hook was delicately lowered into the deepest recesses of the belly and with the panache of David Copperfield, I triumphantly raised . . . a loop of small intestine. Ah, no matter for the Great Master. Back in along the inner abdominal wall, sweep towards midline, pull back up and. . . small intestine again. Son-of-a-gun, let's try the other side. Down, across, up . . . crap! Just omentum this time. I tried again and again and again. Small intestine, omentum, even large intestine once. Beads of sweat started forming on my brow. The first group of kids cycled out and a second group came in the OR door.

My nimble mind played out the possibilities. Congenital malformation of uterus? Or was this cat already spayed? I hadn't seen a scar but I extended the incision almost to the pubis, slapped on some Allis Tissue forceps to pull the muscle open wide and looked in. I still couldn't see the uterus. So, I pulled up some small intestine and gently puddled through it until the second group got bored and moved out for the third group.

A sick thought suddenly jumped into my head and I asked the technician to check the south end of this cat. As she dropped the drape, her eyes said it all. I was trying to spay a tom cat. The Great Houdini had taken an owner's word that they had a female cat and broke the cardinal rule

of cat sterilization: Use your own spectacles to check for testicles. The third audience got to watch a very chagrined young veterinarian sew up an abdominal wound large enough to remove an orange while quietly extolling the reasons for neutering dogs and cats.

Like most of you, I have never actually sought out the limelight, preferring to work behind the curtains. As such, I can be painfully shy. For example, I have never learned or really even had the desire to dance. Even back in high school, no matter how many people were on the dance floor, no matter how fabulous the other people looked and two-stepped, I was danged sure that all eyes in the county were on me hidden in the darkest recesses of the crepe-papered gym as I Frankenstein-stomped my poor date's toes at those school dances. It also didn't help that I came from a fairly conservative upbringing. Our fellowship greatly frowned on anything that could lead us into temptation and accordingly, teenagers gyrating around with the opposite gender on the dance floor ranked way up there in the top five things to avoid (it was said that we didn't condone premarital sex because it might lead to dancing). Now to be fair, I also grew up in the disco era of glittering balls and bell-bottom polyester slacks. You were so far away from your partner that sometimes it was hard to tell who was with who. What happened out there on those dance floors should never be confused with dancing.

**“CVMA works hard to help the Colorado veterinary community shine upon the stage, to be proactive rather than reactive. We study the legislative and regulatory landscape to adequately prepare the ground for constructive conversation. We probe out what the veterinarian of today is concerned about to try and equip them for the life challenges of tomorrow. We seek out continuing education subjects and models to meet the needs of our fellow practitioners in the dynamic and rapidly changing world of veterinary knowledge.”**

Anyhoo, it should be no shock to any of you that there was no band or disc jockey at my wedding reception. No first dance, no mother-groom or father-bride dance (and thank goodness—no chicken dance!) It was hard enough just to walk down that aisle and choke out "I do" in front of God, our family, and friends. I sure didn't want to further embarrass myself in front of the whole world by bumbling about on a dance floor.

Then God blessed us with a little girl, Katy. Katy loves music and has a joyful soul that just has to express itself. When

*Continued on next page*

# OF NOTE

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a George Strait waltz would come on the radio, little Katy had to dance. And what kind of a daddy would deny his little girl the bliss of moving to three-quarter rhythm time of George's Ace-in-the-Hole band? So, we would shuffle about on the linoleum of our kitchen floor with her feet on top of my stocking toes and the biggest smile on that cherubic face. Here, there was no fear, no embarrassment. Just the pure delight of doing something she loved with the one I love.

Fast forward just a few extremely short years. Katy was a senior and it was prom night. Parents were invited to watch the Grand March as each couple came into the auditorium and was introduced as pictures were taken and videos filmed. A last-minute colic had kept me from getting home to clean up and see my girl off, so I rushed to the venue in my work clothes just in time to see Katy and her date sweep down the aisle to that stage. There wasn't a more beautiful lady in the place except the one who had given her birth. Then surprise of surprises, at the end of introductions, Katy was chosen Prom Queen.

Now there's apparently a tradition where the mother of the prom king and father of the prom queen are called up to perform the first dance with their respective offspring to officially start the prom. As the announcer called for Katy's father to come forward, all of my fears of being a public spectacle were suddenly realized. Now I would be dancing . . . in the spotlight . . . with no one else to hide behind . . . and the whole ever-loving county watching. Terror squeezed my chest as I swallowed back the bile rising up into my throat.

But that didn't keep my feet from stepping out of that seat row. It didn't stop my legs from propelling me down the aisle and up those stairs. My arms paid no mind to all those eyes as I reached out to hold my not-so-little girl and pull her in close as we gently rocked back and forth just like back in our old kitchen as Trace Adkins' baritone crooned about how I was gonna miss this (Trace sure was right about that one). The splattered mineral oil on those dusty work boots and the green horse manure smears on my sleeves were slightly out of place, but Katy just smiled and pulled in closer. And for a just few precious minutes, on a blue and silver streamer decorated prom stage in the San Luis Valley, we were the only people in the world.

In gleaming exam rooms, by rusted-green Powder River chutes, in sawdust lined stalls, we are called to perform every day. Every appointment is a new play, each patient encounter is a new act for veterinarians. The drama and comedy of life is played out daily in our offices and on those farm calls. And unwittingly, we are called in to be major characters in a production that somebody else has written. Our improvisational skills are often driven to new heights by the unique situations and demands of our audience and circumstance. And for a few minutes, the whole world stops and it is just you, the patient, and the client. All that matters lies within that small circle around you three

as the spotlight focuses in. And we forget our fears of performance and rise to the occasion.

And yet the rest of the world *is* watching. They are judging our profession by the type of care we give and the compassion we exhibit. We are being called to stand in the public arena and justify our positions on some pretty emotionally charged topics. They are asking us to make wise decisions and responsibly shape public opinion with legitimate responses. How do we react?

Now we could just choke-down and sit in that auditorium seat while our name is called. Or we can stand up, step forward and embrace doing what we love for those we care for. The choice is ours. The Colorado Veterinary Medical Association—*your* association—has chosen to stand up and step forward.

CVMA works hard to help the Colorado veterinary community shine upon that stage, to be proactive rather than reactive. We study the legislative and regulatory landscape to adequately prepare the ground for constructive conversation. We probe out what the veterinarian of today is concerned about to try and equip them for the life challenges of tomorrow. We seek out continuing education subjects and models to meet the needs of our fellow practitioners in the dynamic and rapidly changing world of veterinary knowledge.

These are exciting times. The choices and chances we take now have far-reaching consequences. It will take a strong, unified veterinary community to perform well on the public stage. Will we occasionally make missteps? Probably. I'll bet I'm not the only one of us to ever spay a tomcat. But if we don't step up to take the lead in this grand play and just settle for a bit part, I'm pretty sure you won't like the finale.

So, what do you say? How about coming to the dance with us? It could be the time of your life.

2020 membership renewals have just opened. I hope you will join us.

CVMA. Welcome to the herd. ■

# OF NOTE

## Project V.E.T.S.: Uniting the Veterinary Community to Make a Difference Here and Around the World

Meghan Curtis

Executive Director, Project V.E.T.S.

All over the world, animals are loved and valued as dear companions. They are enjoyed by wildlife enthusiasts and help families and communities maintain crops and carry loads. They are vital to the health and wellbeing of humans in so many ways, but too many are in distress and in need of healing, sanctuary, and care.

Boulder-based Project V.E.T.S. (veterinary equipment, technology and supplies) is a uniquely responsive organization that focuses solely on helping veterinarians perform hands-on work with companion animals, wildlife, and working animals to aid in the struggles these animals face, whether those struggles be pet overpopulation, disease transmission, environmental disasters, human conflict, abuse, or other endangerment.

**Project V.E.T.S.'s mission is to provide those who are making a difference in the welfare of animals with the tools they need to do their important work.**

By collecting donated veterinary equipment and supplies that are sitting in closets and drawers, or otherwise headed to the landfill, and distributing them—free of charge—to animal welfare nonprofits and NGOs all over the world, Project V.E.T.S. is a unique organization helping veterinarians treat the animals in their care in the US and in some of the most resource-challenged places on the planet.

**How is Project V.E.T.S. healing the planet one animal at a time? One donation and one happy ending at a time.**

In Colorado, hospitals like Wheat Ridge Animal Hospital (WRAH), an *Ethos Veterinary Hospital*, regularly support Project V.E.T.S. by making donations of functioning equipment and a variety of gently used or surplus supplies to Project V.E.T.S.

The Limbe Wildlife Centre in Cameroon is one of many primate sanctuaries under the umbrella of the Pan African Sanctuary Alliance (PASA). PASA is one of the 100 recipient groups served by Project V.E.T.S. They provide sanctuary for primates rescued from the bushmeat trade, pet trade, and other heartbreaking scenarios. In May 2018, there was an emergency situation when one of Limbe's chimpanzees died suddenly of Tuberculosis. Project V.E.T.S. received an urgent message from Executive Director Gregg Tully:

"This has created an emergency situation in which the staff need to anesthetize chimpanzees (possibly as many as 43) to screen them for TB and treat them as needed," Tully wrote. "They don't currently have all the veterinary supplies needed for this, or money in their budget to cover the costs. Furthermore, many of the supplies can't be purchased in Cameroon."



Project V.E.T.S. sprung into action, quickly identifying and shipping critically needed supplies, including surgical gowns and other items donated by WRAH and others, so veterinarians could save precious lives. Thankfully, the news was good.

"Because of your contribution, the staff of Limbe Wildlife Centre conducted health exams on the chimpanzees in their care. No more animals tested positive for TB, which is a great relief for all of us," Tully wrote.

Marcy Thrash, Project V.E.T.S.'s program director, keeps in close communication with the veterinarians, nurses and administrative staff of the 100 recipient groups served by Project V.E.T.S. in the US and 49 other countries. Thrash knows which groups need what supplies and orchestrates the shipping of 3–4 equipment and supply "care packages" annually per recipient group. A group performing mass spay/neuter and vaccination clinics for street animals in India, for example, will have a very different list of needs from an elephant rescue in Africa or a wolf sanctuary in Colorado. This "finger on the pulse" of need is at the heart of Project V.E.T.S.'s operation, and the reason nothing goes to waste.

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# OF NOTE

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WRAH also donated a dental cleaning machine that would find a second life just across town as a life-changing tool for rescued cats in need. When WRAH offered the dental machine, Thrash knew that the *Rocky Mountain Feline Rescue* (RMFR), just 15 miles away, had had a dental unit on their wish list for some time. One of



the few groups in the region offering care, treatment, and adoptive services for the fragile population of cats with F.I.V. and Fe.L.V., RMFR veterinarians are practicing better medicine thanks to the “new” machine. They are now able to keep these and other rescued cats healthier and, as a result, they are more likely to find their adoptive forever homes.

Donations to this Colorado non-profit allows a greater number of animals to be healed, saved and cared for in Colorado, the US, and all over the world.

Looking to get involved? Please contact Project V.E.T.S. at [info@projectvets.org](mailto:info@projectvets.org), or visit their website at [projectvets.org](http://projectvets.org) to learn more about how your donations of equipment and supplies, sponsorship and underwriting of programs, and financial contributions can help heal wounds, provide comfort, and save the lives of animals in need.

Together, we are healing the planet one animal at a time. ■

*CSU continued from page 11*

In addition, dogs must be among the following breeds: Boxers, German shepherds, golden retrievers, Labrador retrievers and a variety of mixed-breed dogs. See the complete list of breeds, 45 in total, at [csuanimalcancercenter.org/vaccination-against-canine-cancer-study](http://csuanimalcancercenter.org/vaccination-against-canine-cancer-study).

Companion dogs that meet the screening criteria will be randomly chosen to receive either the vaccine or a placebo version on a routine schedule. Study participants will live at home and visit the study site for semiannual check-ups for five years.

Patients that receive the placebo vaccine are expected to develop cancer at normal rates. The trial will determine whether the vaccine can delay or prevent cancer development in the vaccinated group.

Any owner whose dog develops cancer during the trial, on either the test or control arm, will be given a hospital credit that can be used for the diagnosis and treatment of their cancer.

Pet owners may visit the clinical trials website ([vaccs.org](http://vaccs.org)) to begin the enrollment and screening process.

## About the vaccine

For decades, conventional wisdom has suggested that a universal, preventive cancer vaccine would not be possible because all cancers are unique. However, Stephen Johnston, a professor and director of the Center for Innovations in Medicine, part of the Biodesign Institute at Arizona State University, and his team recently discovered a way

to identify commonalities among cancerous tumors. Using that information, they developed what they believe is a potential one-size-fits-all cancer prevention vaccine.

The new vaccine, called a multivalent frameshift peptide vaccine, was effective in mice and has been shown to be safe for use in companion animals.

## The road to clinical trial

After developing and testing the vaccine in the lab, Johnston needed to identify a veterinarian to move the vaccine into a clinical trial in dogs. He chose Thamm, a trusted colleague who has collaborated with him for more than a decade.

“When Stephen brought up the idea of a universal cancer preventative vaccine, I was skeptical,” Thamm said. “However, the data he has shared has convinced me that the vaccine is worth testing.”

The project is supported by a multiyear grant of \$6.4 million from the Open Philanthropy Project, which granted the award to Johnston in 2018.

If successful, this trial would provide strong support for the concept of using vaccines to prevent cancer in its earliest stages and could eventually justify human clinical trials.

“This is a critical study in the evaluation of this vaccine,” Thamm said. “While effectiveness has been shown in the lab, moving immediately to a very large, expensive and time-consuming human study is a leap that is hard to justify. Testing this approach in dogs will serve as the perfect bridge to human studies. Additionally, if it is successful, we will have a new tool for cancer prevention in our pets, potentially decades before it is available for humans.” ■

# GOVERNMENT AFFAIRS

## Kevin's Cattle Make it to Mexico: A Large Animal International Movement Scenario

Christina Krasilinec, DVM  
Veterinary Medical Officer, USDA APHIS  
Veterinary Services



It's frigid outside and your breath condenses with each exhale. You gaze out at the sunrise and try not to focus on the fact that your left arm is the only part of your body that's warm. The sunrise is illuminating the sky with orange, pink, salmon, an artist's whirlwind of colors, and the foothills are a warm silhouette in the distance. It's a good thing it's so darn pretty; the sight is distracting enough to halt the untoward language that may otherwise escape your lips. Not that there's anyone around to hear you, however. Just some cattle ruminating in the early morning light, tails swishing like metronomes: Quiet, peaceful.

You palpate the last cow, then whip off your palpation sleeve, feeling pretty good about your improving abilities. It used to take cotyledons for you to be able to tell a cow was pregnant (ok, fine, initially it took a cow in stage 2 labor) but now there isn't a fetal membrane slip that you miss, and you're reliably diagnosing pregnancies at 35 days post breeding. You hum to yourself as you hose off your boots, enjoying the quiet morning and the soft rays of sunlight slowly drifting over the foothills, the shadows evaporating like a curtain being drawn to let the light in. "Good morning, Dr. Austin." You startle, accidentally dousing the seat of your pants with water. Somehow, the 6 foot-somethin'-tall producer, Kevin, has snuck up on you. Kevin is smart, polite and an excellent client, although you've never seen him smile, and his weathered face means business. Unlike some of the other producers you work with, he is not one for idle chit chat, and you've always been a bit intimidated by him. You recover, wish him a good morning and update him on the herd. "Well," he bellows over a nearby moo, "I tried to get that boss of yours to help me with the paperwork for selling some cattle, but he said he wasn't smart

enough and since you were coming out today, you'd be happy to help."

You raise an eyebrow. "Oh, is that so? Where are the cattle headed and for what?"

"To Mexico, for breeding."

"Ah, Dr. Bob knows me so well!" you exclaim, while silently having words with your beloved, albeit archaic boss, who neglected to give you a heads up on the situation.

"What do we need to do to comply with Mexico's import regulations?" Kevin asks anxiously. "Let's get started!"

"I need to review USDA's IREGS for the most up-to-date regulations. Regulations are complicated and can change without notice, but I'll need to inspect all the cattle, and we'll likely need to pull blood to test for certain diseases. I'll also need to ensure I have a thorough medical history on the cattle," you say with confidence, even though you're thinking *I HAVE NO IDEA*.

Kevin assures you that your practice is the only one that has treated the cattle, so you take comfort in knowing you have a good history. You let Kevin know that you have to move on to the rest of the day's calls, but you will review the IREGS as soon as possible, and then you'll contact him to come up with a plan. You advise that he wait to make shipping arrangements until you have agreed on a plan.

One blocked goat, two DA surgeries, an equine corneal ulcer, and some vaccinations later, you settle down at your office computer, searching for the bookmark you meant to create the last time you checked USDA's IREGS. You can't find it, so you type "USDA animal exports" into Google and click on the first link that pops up. You bookmark it this time.

### EXPORTING ANIMAL or ANIMAL PRODUCTS FROM the United States?

- Animal or Animal Products
  - International Animal Export Regulations (IREGs)
  - International Products Export Regulations (IREGs)

#### IREgs for LIVE Animals

Live: Select Country ▼

You click on animal IREGS and then select "Mexico" from the dropdown list.

You scroll through the IREGS, your stomach growling and your eyes glazing over. You know you have to be focused and pay attention to details when it comes to international export regulations, so you postpone the fun until tomorrow morning, when you can sit down with a cup of steaming coffee.

The next morning, you treat yourself to a latte from your favorite café with the grumpy hipsters and good food. All bright-eyed and bushy-tailed, you sit down at your office

*Continued on next page*

# GOVERNMENT AFFAIRS

*Continued from previous page*

computer, visit the IREGS and select “Mexico” from the dropdown menu.

**ONLINE CERTIFICATE INFORMATION (VEHCS) = DIGITAL SIGNATURE ACCEPTED FOR CERTAIN COMMODITIES**

<b>USDA Accredited Veterinarian Signature</b>	<b>Electronic Signature Accepted</b>
APHIS Veterinary Medical Officer Signature	Varies by species-See below

**Details:** For certain commodities, health certificates may be issued electronically by the USDA Accredited Veterinarian and endorsed by the APHIS Veterinary Medical Officer through the online Veterinary Export Health Certification System (VEHCS). *The APHIS embossed seal is not required.*

For all other commodities, USDA Accredited Veterinarians may issue health certificates electronically through the online Veterinary Export Health Certification System (VEHCS). *Health certificates must then be printed and require the APHIS Veterinary Medical Officer's original signature with the application of the APHIS embossed seal.*

**NOTE:** A printed paper copy of the completed health certificate must accompany each shipment.

**New to VEHCS?** USDA Accredited Veterinarians can create an account by clicking [HERE](#).

**Need Assistance or Additional Information?** Visit the [VEHCS Help Page](#) to view step-by-step guides for using VEHCS, or contact the dedicated VEHCS Help Line.

At the top of the page, you see a purple box that contains information about VEHCS (Veterinary Export Health Certification System) and informs you that you can complete the international health certificate online! You can even digitally sign it! Awesome! You haven't used VEHCS before, so you click on the link at the bottom of the box to create an account. You use your national accreditation number (NAN) to easily create an account.

VEHCS allows USDA-accredited veterinarians to electronically sign and submit international health certificates and supporting documentation to USDA APHIS Veterinary Services (VS) for review and USDA endorsement. The endorsement fee must be uploaded into the VEHCS account before USDA can endorse the health certificate, so you will have to take this into consideration when charging clients for these certificates. Once endorsed, the hard copy international health certificate will be returned by mail or made available electronically, depending on the regulations of the destination country. If the destination country accepts electronic signatures from both the USDA-accredited veterinarian, and the APHIS Veterinary Medical Officer, then the endorsed certificate will be made available electronically through VEHCS. VEHCS offers improved communication as the VS endorsement office can return documents electronically to accredited veterinarians for any corrections or edits. Changes can be made to the health certificate without requiring the exporters to return to the clinic or having to create a completely new health certificate.

You scroll down and notice the important information for ALL health certificates for Mexico.

**Important Information for ALL Health Certificates**

All Health certificates for live animals and germplasm to Mexico must not contain any abbreviations, except for the abbreviations in the Consignor, Consignee, and Accredited Veterinarian and endorsing VMO field. This includes, but is not limited to:

- **Dates:** "January" is accepted while "Jan" is not.
- **States:** Must be the entire word and not the two-letter abbreviation.
- **Ages:** "Months" or "Year" is accepted while "yrs" and "mos" are not.

In addition, all health certificates must be **type written**, or done in word processor or computer. The number of the health certificate must be also type written or in a word processor or computer. Hand written documents will be rejected.

**Mexico will not accept hand-made corrections, erasures, line outs, or cross outs.**

Wow! That's strict. You need to remember: No abbreviations, no line-outs, and no handwritten certificates!

You scroll down to the cattle section and note that you **and** the APHIS Veterinary Medical Officer can digitally sign the health certificate online through VEHCS. Kevin will be delighted! This means that he will save time and money as the certificate doesn't have to be mailed to a USDA office for endorsement. You read that a printed copy of the completed health certificate must still accompany the shipment, which makes sense. Once the certificate is endorsed, you will be able to print it from VEHCS.

**Cattle**

Health certificates for cattle may be issued electronically by the USDA Accredited Veterinarian and endorsed by the APHIS Veterinary Medical Officer through the online Veterinary Export Health Certification System (VEHCS). **The APHIS embossed seal is not required.**

**Note:** A printed paper copy of the completed health certificate must accompany each shipment.

Please note the following information for the **exportation of breeding cattle to Mexico:**

- Breeding Cattle Protocol and Health certificate - July 2019
- Breeding - Cattle - Protocol - October 2008
  - Guidance for Trichomoniasis and Campylobacteriosis Testing - October 2017
  - Addendum for Rest Stops - September 2010

You read through the breeding cattle protocol and health certificate. Among other regulations, the animals must be:

- Identified with a permanent ID system recognized by the USDA
- Tested for brucellosis within a period not more than 30 days prior to export
- Tested for bovine tuberculosis within 60 days prior to export
- Vaccinated against IBR between 10 and 90 days prior to the date of export
- Vaccinated against leptospirosis with a polyvalent bacterin between 10 and 90 days prior to the date of export

The last page of the health certificate includes a chart that you will need to complete once you seal the trailer. You go ahead and call your local USDA office to order trailer seals.

Seal Number	Truck or Trailer License Number	Date seal was applied	Initials /
/Numero del Fleje	/Licencia del camión o trailer	/Fecha de flejación	/Iniciales

*Cattle continued on page 18*

# GOVERNMENT AFFAIRS

*Cattle continued from page 17*

You can handwrite this information in the chart after you apply the seals.

You devise a detailed plan that includes the exam date, test dates, and potential shipping dates. Then, you call Kevin to discuss the plan and he confirms a shipping date with you, pending a determination that all requirements are met by this time. You make sure to mark the shipping date on your calendar, as you will have to meet Kevin at the farm to seal the trailer.

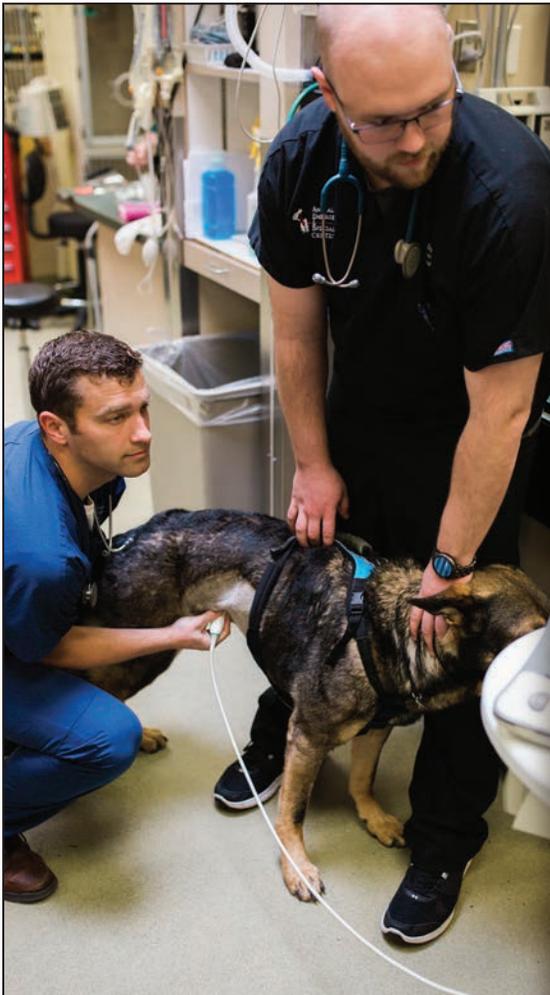
After many hours of hard work and multiple visits to Kevin's farm, shipping day is finally here, the cattle are safely loaded and you have the printed digitally endorsed international health certificate in hand. Using a blue ink pen, you initial the chart on the last page, documenting that you sealed the trailer. You already saved the rest of the health certificate into your medical records, but you use your smart phone to take a photo of the last page to add to your medical records. You send a printed paper copy of the digitally endorsed health certificate with the cattle and watch as the trailer rumbles down the drive.

With an impassive expression, Kevin thanks you for your hard work.

Over the next month the clinic starts to receive an increasing number of phone calls from producers and horse owners interested in international export. Initially, you cringe as these appointments fill up your calendar, but as a relatively new associate, you are also grateful for the clientele and experience. Also, the more you do the international health certificates the easier they become. Dr. Bob stops by your office one afternoon and comments, "Well, you must've done something right! Kevin knows just about everyone in this state, and I think the word's out."

A few days later, you head out to Kevin's farm to examine a sick cow. He greets you with a cheery hello and tells you that the cattle crossed safely into Mexico, thanks to your expertise in following the regulations. The same producer would like to buy more of his cattle in the future, and he couldn't be happier. To your surprise, Kevin smiles, and you try not to look at the manure crusted all over his coveralls as he embraces you with a big bear hug.

**\*Please make sure to always check the USDA websites for the most current regulations.\*** ■



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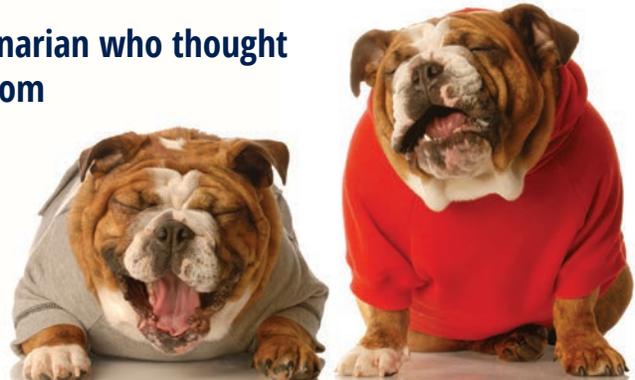
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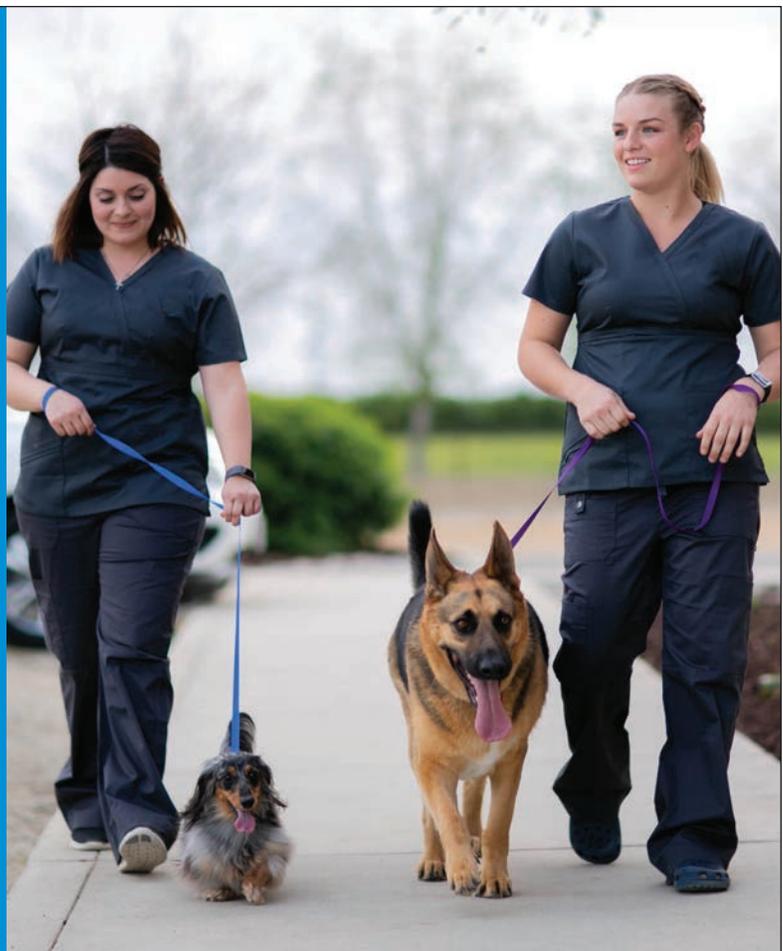
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Briefings continued from page 5

**How members have influence**

CVMA 68+ Formal Leadership Opportunities  
 CVMA Board of Directors: 7 members  
 CVMA Leadership Council : 22 Chapter Representatives,  
 4 Commission Chairs, 20+ Committee members,  
 Chapter Leadership Teams: 15+ volunteer leaders

Strategic Planning Survey: 123 members responded  
 2019 Bylaws Change Vote: 186 members voted  
 Power of 10: 20 Practice Managers, 80 DVMs

**Reinforcement.** Reinforcement is the term McMillan and Chavis used to describe “the feeling that members’ needs will be met” (Chocano, 2018).

“When people with shared values come together, they find that their needs, priorities and goals are reinforced and can be satisfied” (McMillan and Chavis, 1986). For CVMA, two of the services most valued by CVMA members are advocacy and continuing education. As a reflection of member values, CVMA invests in representing the interests of members through engaging with regulatory groups, the legislature, by issuing position statements. CVMA volunteers and staff collaborate each year to develop and produce continuing education events open to members across the state, and some chapter-produced membership meetings with CE.

**Meeting member needs: Highest ranked member benefits from the 2019 CVMA Membership Survey**

Advocacy efforts at the state legislature: Very important or Important = 85.36%  
 CVMA convention: Very important or important = 82.92%  
 At press time, CVMA is:

- Actively presenting concerns about the SB19-228 requirements for veterinary continuing education on human substance use disorder prevention
- Working with a team of CVMA members to on a State Board of Veterinary Medicine Ad Hoc Committee on Record Keeping rules and guidelines
- Collaborating with the animal welfare community on draft legislation for 2020
- Developing action plans for the upcoming Sunset Review of the Veterinary Practice Act

**Shared emotional connection.** Shared Emotional Connection is summarized as “the belief that members have shared and will share history, common places, time together and similar experiences” (Chocano 2018).

It is always delightful to meet with a group of veterinarians—usually at a CE event or a Chapter Visit.

Often, many are not acquainted with each other, or have not seen each other recently. It is heartwarming to feel the group gather quietly, and then to observe the bubbling up and discovery of their shared history, common experiences, and to absorb the building of emotional connections between colleagues. CVMA focuses on offering members positive ways to interact, recognizing important events, honoring members for their contributions to the community, creating opportunities to invest in the community, and providing opportunities to form meaningful and positive bonds with each other.

**Connecting with veterinarians across Colorado**

2019 Chapter Visits = 3,158 miles on the road, 10 hotels, four plane tickets, and lots of getting acquainted, seeing friends, and making friends!

Each year, CVMA’s elected and staff leaders hold “Chapter Visits” across Colorado. With the generous support of Merck Animal Health as our 2019 Chapter Visit sponsor, CVMA invited the State Veterinarian’s Office to provide an update on reportable disease and tracking in Colorado. We were impressed with the efforts made to track every case and the open, accessible, “always on-the-job” availability of the State Veterinarian’s Office. We are very grateful to Drs. Maggie Baldwin, Kenneth Newens, Nick Striegel, Daniel Love, Richanne Lomkin, and Melissa Cleavinger for travelling with us this summer, and sharing their work with CVMA members across the state.

Why does CVMA do this? Why do volunteer leaders and a fulltime staff invest in this community? We believe in doing more for the veterinary profession. We love this quote from past **CVMA president and current CVMA member Dr. Curtis Crawford**: “My experiences within CVMA have broadened my view of the importance of each part of the veterinary profession. We need one another. Everyone brings something unique to the table to make CVMA a complete organism.”

We thank you for your trust in CVMA and for your membership. Your membership makes a difference. Your investment in CVMA keeps the practice of veterinary medicine strong in Colorado by supporting CVMA’s efforts to provide advocacy and continuing education to members and non-members; positively portray the profession; and promote the importance of animal healthcare as well as the veterinarian’s crucial role in public health protection.

And speaking of belonging, Dr. Crawford gets it right every time he closes his *VOICE* articles with, “CVMA. Welcome to the herd.” ■

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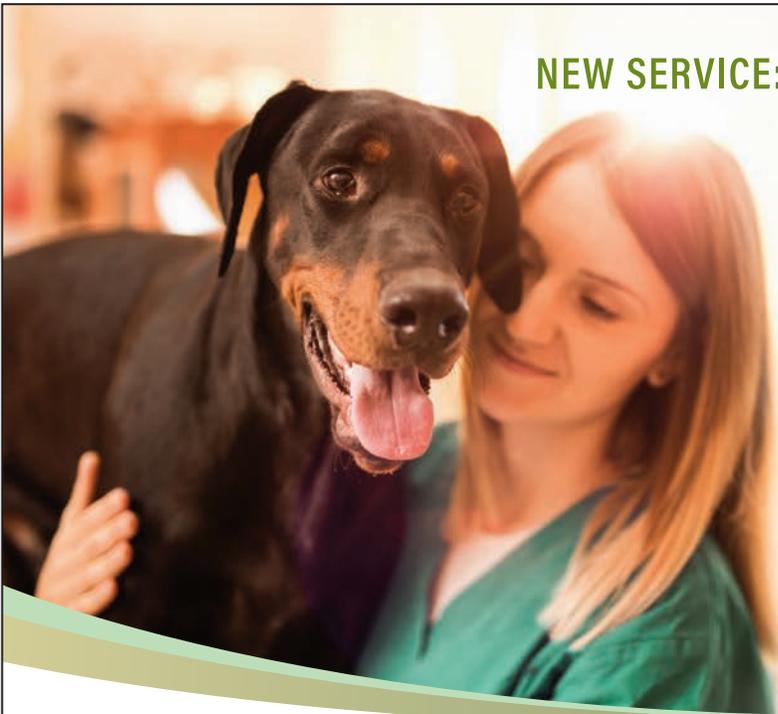
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## Debunking the Myth of Work-Life Balance: How to Integrate Instead?

Wendy Hauser, DVM  
Peak Veterinary Consulting

### Introduction

Why is it hard to keep work and other areas of life aligned, so that a person is happy and feels complete? We hear a lot about the need to balance all aspects of our lives. But what is balance? Merriam Webster defines balance as a state of adjustment “between contrasting, opposing or interacting elements.”<sup>1</sup> Within that definition we can begin to understand the impossibility of this task; balance requires us to make continual tradeoffs to maintain homeostasis.

The term “work-life balance” became popularized in 1986, although the concept of work-life balance originated in programs founded in the 1930’s.<sup>2</sup> The idea behind work-life balance began as a way to accommodate women in the workforce and quickly morphed into a benefit desired by all professional workers when the “idea that people would want to have balance between their professional and personal lives, more flexibility in managing their schedule, and presumptively increase satisfaction from work and life became a key concept in the late 20th century.”<sup>3</sup>

Balance requires us to segregate our lives into distinct areas, constantly having to give to one area and take from another. Balance is exhausting and unsustainable. A far better alternative is to look for ways to integrate the different parts of our lives, to create “whole-life integration.” When we integrate, we literally seek to “form, coordinate, or blend into a functioning or unified whole: UNITE.”<sup>4</sup>

There are two main factors that impact our success in integrating the different areas of our lives: Self-management and environmental factors. In order to achieve “whole-life integration”, we must focus on self-management components as well as environmental management of competing factors.

### Self-management

#### Know yourself

The first place to start in achieving whole-life integration is to understand what is important to you. What is your driving motivation, the very essence of why you do what you do? What are the core values that help to shape and support your driving motivation? The author suggests viewing Simon Sinek’s Ted X talk<sup>5</sup> to understand the process of “finding your why.” Great core values exercises can be found online.<sup>6,7</sup>

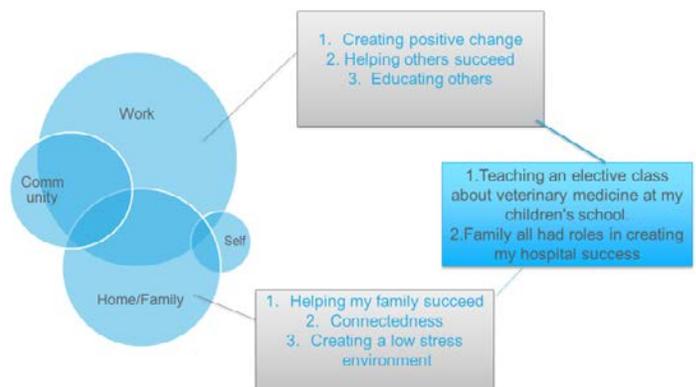
#### What matters most?

With so many competing interests for your time, how do you even know what is important to integrate? In a

Harvard Business Review Article,<sup>8</sup> author Stewart Friedman explores integration by examining an individual’s four domains of life: “Work, home/family, community (friends, neighbors, religious or social groups) and self (mind, body, spirit).” He describes an exercise called four circles,<sup>9</sup> where four circles are drawn to represent each of the four domains in life. The size of the circles varies to represent the value that you feel for each of the areas. This should not be confused with where you spend the most time and effort, although there might be some similarities.

The circles are then arranged to represent the degree that overlap, or integration, occurs. Think about what defines each of these areas; what is important to you? How do your values and goals fit into these domains? List three examples for each of the four areas.

The final step in the exercise is to imagine how the overlapping areas could be increased. For one of each of your examples, list a way that you could help them integrate with another part of your life. For example, could you involve work and community by gathering together with friends to participate in an activity, like a benefit fund raiser for a pet cause? Below is an example of this process for two of the four domains represented:



### What stresses you?

A recent article<sup>10</sup> published in *JAVMA* examined veterinary practice-related stressors that are significant factors in contributing to the lack of well-being in the veterinary profession. This study identified the most problematic stressors as “financial insecurity, client issues, coworker or interpersonal issues and work-life balance.” Stress is often a byproduct of not feeling in control of a situation or outcome. While we often look externally to develop strategies to address these concerns, we are missing an opportunity to create meaningful change: Learning how to manage and adapt the stress we feel into a tool that helps create positive outcomes.

Before you can deal with stress, you need to know what’s causing it. As simple as it may sound, it can be helpful to make a list of the sources of your stress. Adapted from work by Shawn Achor,<sup>11</sup> the following exercise will help you reframe stress in your life and give you a sense of control:

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# IN PRACTICE

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- Make a list of stressors for each of the four domains of your life: Work, family/home, community, self.
- For each domain, make two circles. In one circle, list the things you can control/change. In the second circle, list the things you can't control/change.
- Ignore the second circle. Choose one item from the first circle for each domain and identify a single action step that you can implement to make a positive change.

The first step in learning how to constructively channel stress is to be aware of how you respond to stress. As discussed in an article by Fox,<sup>12</sup> begin by creating a mechanism to help you recognize your inner dialog, what you are feeling. Once daily, practice at least one of these techniques:

- Pause a moment and ask yourself “What am I thinking? What physical sensations do I feel?”
- Take a moment to listen closely to your thoughts. The author recommends to “detach from *having* the thoughts and feelings and *label* them.” For example, if you are feeling unhappy with a co-worker that was short with you, label the thought “irritated” and the feeling “hurt.”
- Assess what you are feeling from a third-party point of view: “What do you notice about me right now?” and record those findings. Some observations might be: “You are excited about performing a new surgery” or “You are worried about interacting with the next client because she can be rude and aggressive.”

By learning to your inner dialog in low stress moments, you will begin to understand how manage that dialog in high stress moments. This skillset will help you have better control over how you respond and result in lower stress levels and better outcomes.

## Procrastination

Another way that we compound our daily stress is through procrastination. According to researcher Tim Pychyl, who has spent more than 20 years studying why we procrastinate, procrastination is not a time management problem, but an emotion management problem. When we procrastinate, we get relief from facing an unpleasant task now. This is a self-defeating coping mechanism, because only your current self benefits, at the cost of your future self.

Negative emotions associated with procrastination are guilt and shame. This sub-optimal motivation state,<sup>14</sup> the Imposed View, is the least healthy of all and has been associated with negative health outcomes like heart disease and hypertension.

The key to minimizing this costly and stress-inducing behavior is to develop our emotional regulation skills, which include “awareness, understanding, acceptance/tolerance, coping ability, and the ability to modify emotional experience.”<sup>15</sup> The key to defeating procrastination requires that



we work to understand ourselves better. By learning how to harness emotional regulation skills, we can turn these into tools to help us overcome procrastination.

One exercise to help overcome the inertia that accompanies procrastination is to set “implementation intentions.” As Pychyl<sup>15</sup> explains, implementation intentions help establish environmental cues by creating a “when, then” scenario. These cues help prompt us to take a desired action. For example, I believe in the value of great oral health for my Labrador, Oliver. I leave his toothbrush on the side of my sink as an environmental cue to brush his teeth every morning, after brushing my own teeth. This is a great example of “when I brush my teeth, I see Oliver’s toothbrush and then I brush his teeth.”

By using implementation intentions, we create a mechanism that helps us to start on whatever task we are putting off. Once we have a little momentum, keep it going by asking “what’s next.” This exercise is a natural extension of the first exercise as it helps to break up task over which procrastination is taking place into smaller, easily achieved goals. These proceedings are a perfect example. I enjoy the process of writing; however, it takes a lot of time and research to produce articles that are helpful to colleagues. By setting a goal to write at least 30 minutes a day, the process is painless, and I feel better about my progress and am on track to beat the submission deadline. Rather than stressing about how I am going to “find” time to complete this task, I have created a framework that my “current self” finds acceptable, and I avoid placing stress on my “future self”. According to Pychyl,<sup>15</sup> “social psychologists have shown that even a little progress fuels our wellbeing and creates an upward spiral of wellbeing and motivation in our lives.”

## Environmental management

Whole-life integration means understanding how one part of your life influences the other areas of your life. As mentioned above, two significant stressors contributing to a lack of wellbeing in the veterinary profession were identified as client issues and coworker/interpersonal conflict.<sup>10</sup>

*Work-Life continued on page 24*

*Work-Life continued from page 23*

When we are stressed and unhappy, these emotions tend to spill over into our other life domains, negatively impacting our satisfaction with our lives.

Coworker/interpersonal issues were defined by study participants as “lack of support, dysfunctional and hostile work environments, abusive or bullying coworkers and unethical practices.” Specifically identified sub-categories relating to client issues include “client’s complaints, clients unwilling or unable to pay, unrealistic expectations for treatment, lack of compliance or responsibility for pet and expectations of availability.”<sup>10</sup>

The authors observe that the most easily managed stressors in the study include those that can be environmentally addressed, such as client issues and coworker/interpersonal conflicts. How does the hospital leadership team start to tackle workplace challenges, specifically the two significant stressors noted above?

### **Psychological safety**

Creating a work environment that feels safe to your animal healthcare team is the first step in creating a positive culture. When veterinary team members are immersed in a positive workplace culture, satisfaction with this life domain positively impacts the other domains of family/home, community and self.

Psychological safety refers to the “shared belief by team members that the group is safe for inter-personal risk-taking.”<sup>15</sup>

In workplaces that create psychologically safe spaces, employees can learn, thrive, and contribute. As discussed in the article Psychological Safety: a meta-analytic review and extension,<sup>16</sup> psychological safety has a direct positive influence on task performance by lessening the potential negative consequences of making a mistake, which increases creativity and initiative: “In terms of attitudinal outcomes, when employees feel safe in their workplace, they are more likely to want to continue in their current jobs, with their current co-workers.”

Veterinary teams are focused on accomplishing tasks, often many at one time. Proactive conversations about how our team members interact with one another are often overlooked and behaviors develop indirectly: “When divergent expectations are not explicitly discussed, we risk rupturing relationships. Unmet expectations and undeclared assumptions can cause the effectiveness of groups to unravel, resulting in irritation and distress, and corrode transparency, trust, and safety.”<sup>15</sup>

Psychological safety can be consciously fostered in our veterinary hospitals by creating an environment that encourages guidelines that help direct the way the group works together. These guidelines direct all relationship-based activities and are actively discussed and reinforced. One example of guidelines developed for the human nursing community is the CENTRE model,<sup>15</sup> useful during group meetings and morning huddles. The acronym stands for:

**Confidentiality:** What is said in the group stays in the group.

**Equal air time:** Everyone has the right to participate in the conversation and contribute to the final product/decision.

**Non-judgmental, respectful listening:** Team members don’t interrupt and seek to understand each other before being understood

**Timeliness:** Respectful of others’ time and schedules.

**Right to pass:** Acknowledgement that the person in the group might not have anything new to contribute to the conversation or might need more time to think.

**Engagement:** Being fully present for the group, and the conversation.

### **Client economic limitations**

Current research<sup>17</sup> has uncovered high levels of professional burnout in veterinary teams, with 91% of respondents reporting the perception of burnout among their peers as moderate to substantial. Forty-nine percent disclosed that they were moderately to substantially affected. The primary driver of professional burnout was identified as client economic limitations.

A recent publication<sup>18</sup> explored the role of “moral distress,” defined as an emotional conflict between what is being requested of the individual and that person’s deeply held personal standards, or morals, in veterinary professional burnout. This internal struggle often produces “painful feelings, psychological disequilibrium, or both resulting from barriers to performing actions consistent with one’s own moral compass.” In this study, “73% of respondents stated that not being able to do the right thing for a patient caused their staff moderate to severe stress and 78% replied that it caused them moderate to severe distress.” Client financial limitations, with the attendant inability to provide desired care for veterinary patients, is a primary causative factor in moral distress.

Coe’s 2007<sup>19</sup> study evaluated the outcomes of focus groups of clients and of veterinarians regarding each group’s perceptions of the cost of veterinary care. He found clients had concerns about the lack of discussion regarding the cost of care, preferring these conversations to occur early in the course of an office visit. At the same time, clients also expressed that they expected pet care to be the primary focus, with the cost of care a secondary consideration. Veterinarians expressed frustration in trying to meet these two disparate requests, while battling their personal unease that in monetizing pet care, some clients might choose less than optimal treatment with negative consequences.

Coe’s studies showed pet owners desired a proactive discussion about anticipated health costs. Experienced pet owners understood the costs associated with preventive

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care but wanted to be informed about new costs. New pet owners preferred transparent conversations regarding the cost of all services.

One simple solution is to educate clients early about the costs of pet ownership, beginning with the first visit. Explain the general course of pet owner expenses by life stage, with pets under the age of one and greater than six requiring more frequent visits and services, therefore requiring more financial resources.

Conversely, young adult to adult pets typically use fewer financial resources, barring unforeseen injuries. By “signposting,” your clients can see what lies ahead and can plan for future expenses. Signposting can be reinforced at the end of each visit by summarizing what the pet will need in the next year of its life, and when the next examination should be scheduled.

## Conclusion

Imagine how satisfying life will be when you learn to “integrate,” uniting your four domains of life into a functioning or unified whole. When you have given yourself permission to be true to what matters the most to you, and have learned how to manage stress and procrastination, what will the impact be upon those who share these domains with you? Consider how your teammates will benefit from psychologically safe workspaces. What will the outcomes be when clients understand how to best meet financial obligations to provide for their beloved pets? Whole-life integration is possible and within your reach . . . what are you waiting for?

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# IN PRACTICE

## Why Participate in a Professional Veterinary Association?

### CATALYST Veterinary Professional Coaches

With CVMA membership renewals upon us, it's time to think about what your professional association involvement will look like in 2020. The good news is, there are countless benefits when you belong to and participate in professional veterinary organizations! These will vary depending on whether it's at the local, state, or national level. Yet, all share a common thread of enhancing one's career.

Being an active member in one or multiple associations elevates networking and career opportunities. You and your entire veterinary team will reap the benefits!

### Benefits of networking

Here are just a few of the top benefits:

- Increase sphere of influence—spread your ideas
- Access to resources you might not otherwise have
- Opportunities to work with leaders within the profession
- Create professional relationships for advice exchange and creditable sounding boards
- Broader understanding of the industry
- Discover career opportunities you wouldn't have known existed otherwise

Casual conversations can turn into the creation of publications, partnerships with industry leaders, and invitations to facilitate or speak at functions—just to name a few!

Many people acknowledge the importance of networking within organized veterinary medicine in order to advance their career path. Grow a network that offers support and helps you reach your highest potential.

### Getting started

Start where you feel comfortable. Instead of jumping right into the executive board, consider serving on a task force or sitting on a committee. Go where your interests and expertise lie and that will be an easier beginning.

As your understanding of organized medicine and sphere of influence grows, you can expand into other roles.

You may need to stretch beyond your comfort zone. It may feel a bit awkward stepping into a room of complete strangers; however, the veterinary community is a super group of individuals! You will find support and guidance within its folds.

### Networking tips

The following are four quick tips for networking

1. **Aim to assist others.** The goal of networking is to build relationships and determine how you can help other people/organization achieve their goals. It sounds counterintuitive. Isn't networking about wanting some-

thing? Not necessarily! When you approach networking with the aim of helping others succeed, it creates synergy and collaboration. This will come back to you in ways you might not have originally foreseen. During your conversations, "is there anything I can do for you?" should be the focus.

2. **Observe, then engage.** You can learn a lot by observing a group and watching the people. It's perfectly fine to consciously take in the landscape and get a feel for it. Once you have "gotten your feet wet" and familiarized yourself with the territory, then begin interjecting and participating in the conversations. Silence and observation are powerful tools. Then, you can act!
3. **Take calculated risks.** It's good to step outside of your comfort zone. Find a veterinary association meeting where you don't know the people or maybe even the topic. Chances are you will sit at a table with strangers. View it as an opportunity. After all, you will have something in common just by choosing to attend the same event. Through casual conversation, you can find a commonality among the group. Ask open-ended questions to keep the conversation flowing. Refer to tip #1.
4. **Dress professionally.** When you attend gatherings, dress accordingly. You can never go wrong with business or business-casual attire. Feeling under dressed is uncomfortable and doesn't convey a level of professionalism that you want to provide. Be courteous, polite, engaged, thoughtful, and participate appropriately in conversations. With each engagement, it will increase your confidence. You will be seen as a professional and as someone who contributes and makes a positive impact.

“Don't waste life in doubts and fears; spend yourself on the work before you, well assured that the right performance of this hour's duties will be the best preparation for the hours and ages that will follow it.”

—Ralph Waldo Emerson

### Organized veterinary medicine

Opportunities for networking within the veterinary community are **LIMITLESS!** Here are just a few organizations to get you thinking. Google your interests and see what pops up. Many specialties even have their very own organizations.

#### National

- American Veterinary Medical Association [avma.org](http://avma.org)
- National Association of Veterinary Technicians in America [navta.net](http://navta.net)

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- American Animal Hospital Association [aaha.org](http://aaha.org)
- Veterinary Hospital Managers Association [vhma.org](http://vhma.org)

#### State

- Colorado Veterinary Medical Association [colovma.org](http://colovma.org)
- Colorado Association of Certified Veterinary Technicians [cacvt.org](http://cacvt.org)
- Colorado Veterinary Hospital Managers Facebook Page:  
<https://www.facebook.com/groups/723411757741623/>

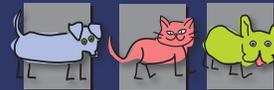
We've heard the phrase, "it's who you know." Well, it's **ALSO** who knows you! The benefits of engaging in networking—literally shaking hands and offering pats on the back—are immense!

Aspects of being "well-networked" include career advancement, leadership opportunities, contribution of your ideas, and being a positive driver within the veterinary community. Whether it's your first time or you're continuing your journey, just participate in professional veterinary organizations!

#### **Yours in networking,**

CATALYST Veterinary Professional Coaches ■

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## P.A.W.S and Listen for Understanding

Alexis Wells, CVPM  
Senior Practice Coach, Veterinary Growth Partners

### Introduction

Have you ever been in a conversation but not felt that you truly were listening? Maybe you were distracted or not focused in the moment? Have you ever been in a conversation and sensed that you were two steps ahead, planning what you were going to say next? This is a common issue in communication and something we all can improve on. We can do that by listening for understanding and utilizing PAWS: Peaceful Acceptance Without Speaking. Before explaining the PAWS approach, it is helpful to note the five stages of listening.

### Five stages of listening

The one action that most leaders, and most people, can take to immediately improve their communication effectiveness is to *talk less and listen more*. Well, how do we do that? According to renowned author Joseph A. Devito, there are five stages of listening:

1. Receiving
2. Understanding
3. Remembering
4. Evaluating
5. Responding

A common habit for most individuals is to skip through a few of those steps. We receive the information, evaluate it from our perspective and respond. All five stages are critical to good communication, but this article will focus on the second stage of listening, *understanding*. Utilizing the PAWS approach in your practice will improve your ability to really listen to your client's and team member's needs. This will result in better understanding of your team, the pet owner, and even how you may need to proceed with patient care. Taking the time to "PAWS" may help you realize that a team member doesn't understand a directive or that you need to educate your client to correct a misperception. So, talk less and listen more!

Stephen Covey's book *The 7 Habits of Highly Effective People* discusses the power of listening for understanding, or as he says, "seek first to understand, and then to be understood." Most people typically listen with the intent to reply, listening to respond and interject our thoughts as a way to relate to the conversation or the person. In his book, he discusses "Habit 5", an idea that explores the essential communication skill of listening to truly understand. This helps us to avoid inserting our own thoughts into someone else's. It opens us up to the other person's perspectives, ideas, and even emotions. That's when real communication happens. That is when new and better ideas can be conceived, and everyone involved can truly learn from one another and feel respectfully heard.

### How to listen for understanding

PAWS is a handy acronym and approach created for veterinarians and staff who interact with pet owners and often feel too rushed or pressured to listen deeply. It is easy to remember and yet can result in improved team and client relationships. It stands for: Peaceful. Acceptance. Without. Speaking. Let's explore how to engage in Peaceful Acceptance Without Speaking, the PAWS method for improved communication.

### PAWS approach to *peaceful acceptance*

When listening, we should practice peaceful empathetic listening. Peaceful is defined as free from disturbance or tranquil. While listening, we want to be focused on the person who is speaking and practice mindfulness to drown out any other disturbance that could be distracting you from truly listening to what the person is saying. Empathetic listening is listening with the INTENT to understand. Communication experts say that 10% of communication is in the words, 30% is represented by tone and 60% is represented by body language. Covey states that in empathetic listening you listen with your ears, but more importantly with your eyes and your heart. You listen for meaning and feeling. You try to understand and share the feelings of the speaker.

Acceptance comes into play because you don't project or assume thoughts, feelings, motives and interpretation. You peacefully consent to *receive* the information being given. You practice peaceful acceptance to really listen for understanding.

### PAWS approach to listening *without speaking*

When we listen, we often want to interject our own thoughts or experiences. Maybe we want to add to the conversation or guide it. We sometimes find the pause in what someone is saying as an opening for us to speak when in reality, it may just be the other person taking a breath or gathering their thoughts. Maintain eye contact with the speaker and use your non-verbal cues to allow them to know you are interested in what they are saying. Nodding your head, smiling, and mimicking their body language are all ways to communicate that you are listening for understanding without speaking.

If we can practice peaceful acceptance without speaking, or PAWS, and not allow ourselves to jump ahead in the conversation, we will allow ourselves to listen for understanding and possibly gain a greater perspective that provides the opportunity for a solution or idea you have yet to consider.

### Want to become a better listener? Practice!

It is easy to be distracted in a veterinary clinic by the animals barking around us, the clients walking in and out of the lobby, or our mental list of to-dos and pressing tasks. Practice having a conversation with someone and truly listen for understanding.

*Continued on next page*

# IN PRACTICE

*Continued from previous page*

Using the PAWS approach:

- Focus on what the person is saying and not distractions around you.
- Practice peaceful empathetic listening and try to feel what the person is saying.
- Practice quietly nodding, smiling, and responding with non-verbal cues.
- Practice short verbiage that shows you are listening such as “I agree” “I see”, “tell me more”, or “that’s interesting.”

## Conclusion

When you are having a conversation, it is important to “seek first to understand and then to be understood.” Not only will this make you a better listener but also a better communicator. When you truly understand another person’s perspective it gives them what Covey calls “psychological air,” which then allows you to seek to be

understood and focus on coaching, influencing, or problem solving. ■

## Reference

Covey, S. R. (2014). *The 7 habits of highly effective people: Powerful lessons in personal change*. New York: Simon & Schuster.



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# CVMA NEWS

COLORADO VETERINARY MEDICAL ASSOCIATION

## Chapter Connections

CVMA chapters are a vital part of the CVMA community fabric. Read about what CVMA chapters have been up to from around the state.

### Chapter Visits 2019

CVMA took community-building on the road this summer during 2019 chapter visits! Thanks to the support of Merck Animal Health, we visited 16 different chapter locations throughout the state over four months. We were blown away by the comradery, energy, and passion for the veterinary profession we encountered along the way. Thank you for welcoming us into your communities, and for playing an important role within the CVMA ecosystem!

### Chapter 6 | Denver

Thanks so much to the veterinary professionals who attended the first ever Wellbeing in MOTION event August 18 at the beautiful Hudson Gardens in Littleton! The doctors and technicians engaged in thoughtful discussion surrounding industry challenges and learned useful tools to implement change in their personal and professional lives for improved mental health. Rebecca Rose, CVT and Laurie Fonken, PhD, LPC, integrated practical wellbeing activities throughout the course that could be shared with veterinary teams all over. Chapter 6 is proud to be creating new continuing education opportunities surrounding one of the most important topics in veterinary medicine today. Join Chapter 6 for more events in 2020! ■



# CVMA NEWS

## New Board of Directors Takes the Helm During Convention 2019

AVMA representative Dr. Melanie Marsden installed the 2020 CVMA Board of Directors during the Member Appreciation Luncheon at CVMA Convention 2019. The 2020 Board of Directors includes:

Dr. Stacey Santi  
President

Dr. Jackie Christakos  
President-elect

Dr. Ashley Ackley  
Secretary/Treasurer

Dr. Steven Dick  
Secretary/Treasurer-elect

Dr. Will French  
Immediate Past President

Dr. Rebecca Ruch-Gallie  
AVMA Delegate

Dr. Curtis Crawford  
AVMA Alternate Delegate

The CVMA membership welcomed Dr. Steven Dick as a new director to the Board of Directors.



Dr. Dick presently serves as the Chief of Staff for the Arvada West Banfield Pet Hospital. Dr. Dick is a 2003 graduate of the University of Minnesota College of Veterinary Medicine. Following graduation, he spent four years on active duty with the U.S. Army Veterinary Corps in fulfillment of his Army Health

Professions Scholarship, including a one year deployment to Kuwait in support of Operation Enduring Freedom. After his honorable discharge from the Army, he started with Banfield, initially in a Chief of Staff role for four years, followed by seven years as the Medical Director in the North and South markets of Colorado.

Within his roles with the Army and Banfield, Dr. Dick had extensive opportunities to take on challenging responsibilities while leading and mentoring veterinary professionals in a variety of settings. In the Army, he was responsible for leading small teams of veterinary and food safety specialists while managing sizable inventories of equipment and resources. Here in Colorado, he has coordinated and been involved in a number of volunteer community service

events in Denver and surrounding communities. He has served as an interviewer for prospective CSU veterinary school candidates for the past two years and has participated in several student panels there presenting on careers in corporate veterinary medicine. Dr. Dick recently completed a two week veterinary mission trip to Kenya which provided preventive and basic medical care to over 9,000 pets in underserved villages south of Nairobi.

When he's not working, Dr. Dick and his wife Jennifer keep busy with their 10 year old son, Ephram, as well as a mixed breed dog, a turtle, and some fish. During his free time, he enjoys mountain biking, skiing, playing tennis, and traveling.

Dr. Dick has served as a member of the CVMA Chapter 6 Leadership Team for the past two years, initially as part of the education committee and most recently in the role of the West Area Representative.

*"As a practitioner and then in a managerial role, I found I had isolated myself to those veterinary professionals in my direct line of responsibility and the issues that most impacted me, while failing to establish more wide reaching connections and gaining an appreciation for the specific challenges facing veterinarians here in Colorado. I initially joined the Chapter 6 Leadership Team to better connect with my fellow practitioners, to learn more about the impact the CVMA has in supporting our profession as well as to be able to give something back to the veterinary community. Participation in the chapter meetings and commission meetings at the Big Ideas forums has given me an appreciation for the strength of our association, all the hard work that goes into supporting and developing veterinarians as well as the lobbying efforts the Board of Directors put forth to support both veterinarian well-being and animal welfare in our state.*

*Through the positions I've held over the years, I've typically seen veterinarians succeed when they have the support they need and feel like they have someone in their corner. I've never prided myself on being the strongest surgeon or the smartest practitioner, but have always approached my responsibilities with a collaborative, common sense methodology to be that support, and I feel like that is what I would continue to bring to the Secretary/Treasurer-Elect role. We work in a fulfilling, but extremely challenging profession where the pitfalls are many and the support sometimes seems woefully inadequate. The CVMA board has tasked itself with making sure you receive the level of support and resources you deserve, and I hope to be a part of that process for you. I am honored to serve in the position for each of you." ■*

# CVMA NEWS

## Welcome, New CVMA Members!

Our CVMA community continues to grow. . . . please join us in welcoming all of the new members who joined us in 2019! Thanks for joining our community of 2,400+ professionals dedicated to advancing veterinary medicine in Colorado.  
*Current as of September 6, 2019.*

L. Renee Abbott, CVT  
Erin Abrahams, DVM  
Alexandra Abramson, DVM  
Karen Allum, DVM  
Tarina Anthony, DVM  
Rachel Arnold, DVM  
Laura Audette, DVM  
Maggie Baldwin, DVM  
Jennifer Barber-Jones, DVM  
Ashley Barthel, DVM  
Kayla Bentley, DVM  
Rosemary Bernholtz, DVM  
Virginia Betz  
Nicole Blackford  
Oneal Bogan, DVM  
James Bollmeier, DVM  
Megan Brandt Wurzbach, DVM  
Susan Brauer, AAS, CVT  
Allison Brown, DVM  
Cody Cano, DVM  
John Caver, DVM, MPH  
Rhiannon Chapman, DVM  
Pranav Chawla, DVM  
Allison Coates, DVM  
Elizabeth Coffman, DVM, MS  
Megan Coleman  
Denise Corliss, CVT, SRA  
Julie Crosby, CVT, CVPM  
Danielle Cucuzella, DVM  
Sonja Dais, DVM  
Brooke Doran, BA, CVT  
Meredith Douglas, DVM  
Cathryn Doyle, DVM  
Ron Easley, DVM  
Jesse Eichenbaum, DVM  
Dominique Engel, DVM  
Emily Engelman, BA, AAS, CVT, CCRVN  
Dalane Epp, DVM  
Chelsie Estey, DVM  
Kelsey Faber-Hammond, DVM  
Sheila Fitzpatrick, DVM  
Alexandria Fritz, DVM  
Lindsey Gapstur, BS, DVM  
Devin Gardner, DVM  
Amanda Gerboth, DVM  
Kramer Gopffarth, DVM

Ellery Green, DVM  
Sarah Hagen, DVM  
Kevin Haggerty, DVM  
Megan Harbison, DVM  
Kristin Harrison, DVM  
Megan Hartsel  
Bre Hass, CVT  
Angela Hinton, DVM  
William Holcomb, DVM  
Diane Holm, DVM  
Julie Horan, DVM  
Tess Howard, DVM  
Caitlin Hunter, VMD  
Katherine Huss  
Grayson Johnson, DVM  
Brien Jones, DVM  
Gail Kaufman, DVM  
Lukas Kawalilak, DVM, DACVR  
Patrick Keith, DVM  
Katharine Kennedy, DVM  
Katherine King, DVM  
Kathy Kirk  
Larry Klima, DVM, DAVDC  
Nicole Lenz, DVM  
Sarah Levine, DVM  
Anne-Marie Lewis, DVM  
Sarah Llewellyn, DVM  
Annaliese Lorenzen, DVM  
Katelin Marchetti-Saenz, DVM  
Nikki McComb, DVM  
Steven McIntyre, DVM  
Terry McQuade, DVM  
Macon Miles, DVM  
Kenneth Millian, DVM  
Larry Montz, DVM  
Jeanette Moody, DVM  
Abigail Moore, DVM  
Renee Nankervis, DVM  
Rachael Nestor, DVM  
Karen Oberthaler, VMD, DACVIM  
Oncology  
Sarah O'Day, DVM, MPH  
Reese Odenwelder, DVM  
Lindsay O'Grady, CVT  
Zachary Osterholz, DVM  
Barb Page, DVM

Cynthia Palumbo, DVM  
Cynthia Panek, DVM  
Kate Parker  
Gillian Penn, DVM  
Richard Perry  
Jennifer Poad, DVM  
Lori Pohm, DVM  
Mary-Evelyn Points, BVMS  
Mitchell Pudalov, DVM  
Jennifer Rainey, DVM  
Laura Ramos, DVM  
Zachary Rathbun, DVM  
Tevor Redden, DVM  
MJ Redman, DVM, DAVDC  
Anne-Marie Reikes, DVM  
Tara Renkes, DVM  
Jenn Roberts, DVM  
Lena Roeder, DVM  
Diane Roggenthen, DVM  
Jessica Rooker, DVM  
Elizabeth Rosalia, DVM  
Barbara Rose, DVM  
Alison Savo, DVM  
James Schachtel, DVM, ACVR  
James Shea, DVM  
Jessica Shepler, DVM  
John Shull, DVM  
Katharine Simpson, DVM, MS  
Sheridan Sloan, DVM  
Kelly StillBrooks, DVM  
Christen Tlahuel, DVM  
Jillian Varnold  
Lindsey Vencill, DVM  
Alicia Vigil, DVM  
Marie Walker, DVM  
Susan Wass  
JJ Wellman, DVM  
Margaret Wigley, DVM  
Patricia Wilhelm, CVT  
Valerie Williams, CVT  
Donna Williams, DVM  
Cameron Willoughby, DVM  
Ashley Witeside, DVM  
Mary Wright, DVM  
Selina Zalesak, DVM

Have a colleague who you think could benefit from a CVMA membership in 2020?  
Have them visit [colovma.org/membership](http://colovma.org/membership) or email [info@colovma.org](mailto:info@colovma.org) to get signed up!

# CVMA NEWS

## CVMA Community Celebrates 2019 Award Winners

The veterinary community in Colorado would not be what it is without the commitment and service of veterinary professionals who go above and beyond to advance the profession and give back to the veterinary community. CVMA leadership and convention attendees were pleased to recognize the accomplishments and service of three notable veterinarians during CVMA Convention 2019.

### Jon Geller, DVM

#### 2019 Veterinarian of the Year



While it's often easier to see clients within the comfort of an exam room, Dr. Jon Geller takes his veterinary practice to the streets. Dr. Geller donates his time each week to meet with patients in cars, parks, or homeless shelters during his Street Dog Coalition clinics, and is a role model for compassion in the veterinary community. His nominators describe him as a "remarkably compassionate and driven contributor to the profession and to the community with kindness that knows no boundaries." He is also a staunch supporter for veterinarians and veterinary students and serves as a visiting instructor and mentor at Colorado State University.

Dr. Geller graduated from CSU in 1995 following a 15 year stint as a building contractor in southern Colorado. Although tracking large animal, he began a mixed animal mobile practice around Fort Collins and then starting doing emergency relief to help with some income gaps. With the help of some partners, he founded emergency clinics in

Longmont, Greeley, Fort Collins, and Grand Junction. After a 20 year stint in the ER, he has now moved on to focusing on nonprofit work with The Street Dog Coalition, which provides free veterinary care to pets of the homeless, and The Ladybug Fund, which provides middle-of-the-night assistance to pet owners facing financial hardship. He currently still resides in the same house in Fort Collins that he purchased when he moved there with his wife and two daughters for vet school in 1991.

Congratulations, Dr. Geller, and thank you for your exceptional dedication to the underserved in Colorado.

### Emily Graves, VMD, MS, DACVIM (LAIM)

#### 2019 President's Award



When it comes to commitment to continuing education for veterinary professionals in the state of Colorado, Dr. Emily Graves is the name that comes to mind for most. As chair of CVMA's Education Commission, Dr. Graves has worked tirelessly the last several years to craft quality, engaging CE programs for veterinarians of all backgrounds and practices.

Dr. Graves earned her VMD from the University of Pennsylvania in 1999. She went on to complete an equine internship, then a residency in equine medicine from 2000-2003, followed by completion of a MS degree from Michigan State University in 2005. With over 20 years in the veterinary industry, she has worked in a variety of roles, including private practice, academia, mobile equine medicine consulting, and relief work. Dr. Graves is currently a senior large animal veterinarian for Zoetis' Veterinary Medical

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# CVMA NEWS

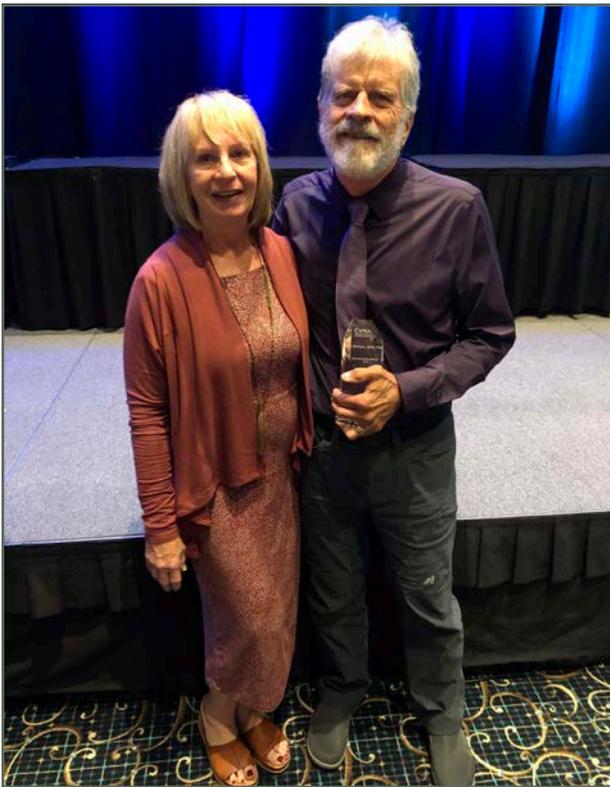
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Information and Product Support team, supporting the cattle and equine businesses. She enjoys cooking, traveling, downhill skiing, and time spent with her family, including her husband, Eric, her son, Mike, and her dog, Nivea.

Thank you, Dr. Graves, for your outstanding commitment to continuing education for the veterinary profession in Colorado and dedication to ensuring a bright future for CVMA.

## Ray Whalen, DVM, PhD

### 2019 Distinguished Service Award



The best advancements in veterinary medicine often come from individuals who have an infectious enthusiasm for sharing knowledge with others. Dr. Ray Whalen is one of these exceptional individuals. Dr. Whalen has been described as a “revolutionary educator” who engages in continuous improvement to ensure an impactful, lasting legacy. He has supported generations of DVM students who have received exceptional training in veterinary neurology at Colorado State University. From the sheer number of letters CVMA received in support of his nomination for this award, it is clear that this individual has impacted countless lives and continues to do so.

Dr. Whalen earned his DVM from the University of California-Davis in 1976 and later earned his PhD in Comparative Pathology from UC Davis in 1982. He was hired by Colorado State University later that year and has been with the university ever since. He has held a variety of titles in the Department of Biomedical Sciences that include

Associate Head, Director of the Neuroscience Division, and Director of Preclinical Curriculum. Before classroom computers were commonplace, Dr. Whalen set out to develop a computer program to allow students to interact with a 3D computer model for anatomical learning. His Virtual Canine Anatomy Program is used around the world, even by human medical schools that are interested in developing virtual human anatomy programs based off his model.

Congratulations, Dr. Whalen, and thank you for your revolutionary spirit and commitment to growing the next generation of veterinary minds in Colorado. ■

## Keep Your Technicians, Save Your Practice From Costly Turnover

It's no secret—everyone knows how costly employee turnover can be. To help hospitals retain employees, CVMA is proud to recognize and certify the designation of CVMA Certified Veterinary Assistant (CVA) as a benefit exclusively for CVMA members. 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. Investing in your employees saves your practice from having to deal with turnover and costly replacement and retraining efforts. Now offering CVA levels I–III!

### CVA Graduates

Please join us in congratulating the newest graduates of the CVMA Certified Veterinary Assistant program!

Stacy Larson | Level I  
Eastern Colorado Veterinary Services  
Arriba, CO

Hollie Hardman | Level II  
A Pet's Place Animal Hospital  
Longmont, CO

Alice Nye | Level III  
Alpine Veterinary Clinic  
Center, CO

McCrae Rider | Level I  
Eastern Colorado Veterinary Services  
Arriba, CO

Megan Rupp | Level I  
Gypsum Animal Hospital  
Gypsum, CO ■

For CVMA Premium and Core members, the \$325 enrollment fee for the CVA program is waived as part of your membership! Learn more at [colovma.4act.com](http://colovma.4act.com).

Questions? Contact Sara Eberhardt, CVMA's Manager of Membership, at 303.539.7275 or [info@colovma.org](mailto:info@colovma.org).

Where will your CVMA  
membership take you in 2020?

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# WATERING BOWL

## Giving Back, One Community at a Time

Steven Dick, DVM  
Secretary/Treasurer-elect, CVMA

As the bus dropped our team at a tree-lined lot next to a church on the outskirts of Makaveti in Machakos County, Kenya, my first thought was I might have gotten myself into a little more than I'd bargained for. I could see there were already at least 70 dogs waiting for us, some on chains or ropes, but most milling around the area untethered, and not many were in what we would consider, at first glance, good condition. With not much else to go on but a passion for animal welfare and our experience working at busy practices in America, our team of five quickly set up our supplies and spent the rest of the day providing rabies vaccinations, external and internal parasite control and basic medical care to over 200 pets who were brought to us by people living in the area. We left Makaveti that day weary, covered in the red dirt of the region and a little scratched up, but already we could sense we were part of something special happening thousands of miles from home.

In the days that followed, the set up and the volume varied from location to location, but this was the daily challenge for a group of four veterinarians and eight veterinary technicians and veterinary assistants from Colorado and Texas who recently traveled to Kenya to provide care to underserved pet populations in villages south of the capital of Nairobi. The project, advertised in Kenya as the Africa Animal Welfare Adventure, is a labor of love for its stateside organizer, Dr. Julie Kelly, medical director at VCA Aspenwood Animal Hospital in Denver. This was Dr. Kelly's fourth veterinary mission trip to Kenya and each time the event has been coordinated through the Africa Network for Animal Welfare (ANAW), based in Nairobi with a US office here in Denver. ANAW's mission is to promote humane treatment and improve the welfare of all animals throughout Africa. Their efforts, both in the field as well as working to influence policy change, focus on disease prevention and animal population control, education for the public in regards to improving animal welfare and working to help reduce human-animal conflict for both domestic and wild animal populations.

Days for the veterinary teams, consisting of a veterinarian, two technicians, one ANAW staff member and a county veterinary staff member, started early with the organization of donated equipment and supplies, followed by a bus ride to the day's destination, then most times setting up a make-shift clinic at a storefront, a schoolyard or in many cases, just under cover of a good shade tree. From there, the teams would provide care to dogs, cats, donkeys and even a goat, until there were no more to be seen, often returning to their lodging site as the sun was setting over the hills. At the end of seven days of clinics at various villages in two counties, we had provided care for over 9,300 animals! Along the way, we had countless unique opportunities to connect

with the Kenyan people, learn about the struggles they face and get a sense for how important animals are in their lives. By modeling gentle pet handling, exhibiting countless acts of kindness for pets and providing volumes of education for the owners, we were able to help support and grow the human-animal bond for people in a country where the desire to do the best for animals is often times overwhelmed by the lack of resources to do so. Before I left for Kenya, my family and I thought this would be a "once in a lifetime trip," but I've only been back a week and I'm already thinking about when and how I might be able to go back. Maybe I'll see some of you there next time. ■



# WATERING BOWL

## CVMA Notes Passing of Former President, Dr. Larry Wiseman

Past CVMA President Larry J. Wiseman, 77, passed away in Colorado Springs, Colorado on June 29, 2019. With his wife, Sue L. Wiseman, Dr. Wiseman started Pikes Peak Veterinary Clinic, where they served the Colorado Springs community. Dr. Wiseman was a longtime member of CVMA. He passed peacefully and went fishing one month before he died.

He was born to George and Hope Wiseman on April 6, 1942 in Council Bluffs, Iowa.

Dr. Wiseman graduated from Fallon High School in Nevada and earned a DVM degree from Washington State University.

Dr. Wiseman was commissioned as a Captain in the U.S. Army Veterinary Corps and served two years as a

veterinarian stationed at Fort Carson, Colorado. After retiring from veterinary practice, Dr. Wiseman joined Simmons & Associates, a veterinary consulting business.

Dr. Wiseman was an avid fly fisherman, duck hunter, and skier. He shared these passions with his family and any friends who could keep up with him! He made friends easily and will be fondly remembered for his signature smile and his outgoing, compassionate, and sometimes mischievous personality.

He is preceded in death by his parents, and sister Lynne (Willis) Wilson. Dr. Wiseman is survived by his beloved wife of fifty three years, Sue; daughter, Jodylynn (Steve) Kroeker; son Michael (Darla) Wiseman; and three cherished granddaughters, Katie Kroeker, and Emily and Anna Wiseman; brother, Bruce (Nicki) Wiseman and sister, Vicki Kirby.

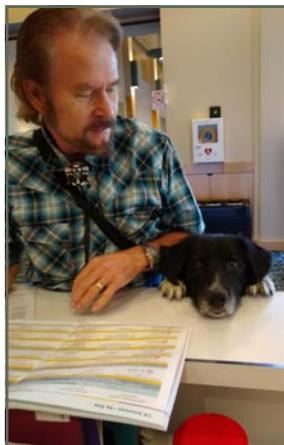
Memorial contributions may be made to Project Healing Waters Fly Fishing, Inc. ■



# WATERING BOWL

## Thank You For Joining Us in Keystone!

Here's a look back at some of our favorite moments from CVMA Convention 2019. We'll see you in Keystone again next year, September 10-13, 2020!



# value <sup>'val-yü</sup>

:the monetary worth of (something)

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Kathy Morris, CPA, CVA & David King, DVM, CVA  
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