RESILIENCE

“I can be changed by what happens to me, but I refuse to be reduced by it.”

- Maya Angelou
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The Michigan Veterinary Medical Association represents the veterinary profession in Michigan, advances the knowledge and standards of its membership, and promotes the sciences, practice, and value of veterinary medicine for the benefit of animal and human health.
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There’s a scene in “Rocky II” that really encapsulates the essence of resilience and the drive to never give up. Heavyweight champ Apollo Creed is reminiscing about his recent battle with southpaw Rocky Balboa. He wants a rematch because “there’s still a lot of people out there that think he won.”

Creed’s trainer, Tony, attempts to dissuade him from facing Balboa again, citing the brutality of their first encounter. “I saw you beat that man like I never saw no man get beat before, and the man kept coming after you,” Tony warns. “We don’t need that kind of man in our life.”

This cinematic moment perfectly captures the spirit of Rocky’s resilience from the first movie, foreshadowing the trials and triumphs that lay ahead.

In our own lives, we’ve all faced adversity. The pivotal question becomes: When confronted with challenges, do we throw in the towel, or do we press on? This theme of resilience has been especially evident in the veterinary community across Michigan since the onset of the pandemic.

Veterinarians across the state have refused to throw in the towel, and their unwavering determination has served as an inspiration to the entire team at the Michigan Veterinary Medical Association (MVMA). Witnessing the profession persevere motivates us to adapt and evolve continually, ensuring that we provide the necessary value and support to our members.

In “Rocky II,” Apollo Creed’s failure stemmed from underestimating Rocky’s resilience. Creed, driven by hubris and arrogance, considered their first match a fluke and couldn’t fathom how one man could be so relentless. His obsession ultimately led to his downfall as what once seemed insurmountable became a harsh reality.

Like Rocky, the veterinary profession thrives on resilience. Challenges will undoubtedly arise, disruptions will occur, and there will be moments we feel unprepared to tackle. Yet, our collective resolve will always guide us through these trials. Your resilience, as veterinary professionals, is what continues to make this field one of the most remarkable on earth.

As we navigate these challenges together, we want you to know that MVMA is committed to providing unwavering support. This issue is filled with inspiring stories that mirror the resilience we’ve seen within our community. Just as Rocky pushed through against all odds, we too shall overcome our challenges.

In the spirit of Rocky Balboa, let’s embrace the lessons of resilience, face challenges head-on, and keep moving forward as we continue to uphold the excellence that defines the Michigan Veterinary Medical Association. Onward, together.
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- **Southern Michigan in Kalamazoo/Jackson Area.** Gross $1.3M. Long standing practice with strong staff. (MI-9350)
- **Northwest Detroit Suburbs.** Gross almost $988K. Long standing and well-equipped practice in an excellent location. Facilities are well-maintained and practice is well staffed. (MI-9330)

End of Year Checklist

- Always wanted a newer dental unit? Or had your eye on a laser? Do not wait, get it now!
  *Make sure to make the investment before the end of the year.*
- Start reviewing your backlog of clients from this year that did not show or are overdue and start booking for the new year.
  *Reminders maintaining existing client relationships, promote best care for patients, and boost profits.*
- Do not get an extension, be on time with your CPA!
  *Don’t ask for an extension, send your financials over to your CPA quickly to get your 2023 numbers back sooner rather than later.*

Questions?
Call us to discuss your practice’s financial health.

Scan to contact us!

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When I found out that this issue of the Michigan Veterinarian would feature the topic of resilience as its subject, I could not think of a more appropriate word to describe the current state of veterinary medicine. Resilience is the capacity to withstand or recover from difficulties and challenges. Veterinary Medicine has never faced so many challenges including the Covid pandemic, client demands and expectations, workforce issues, economic downturns, and fast developing technology. Everyday veterinarians are expected to give their best but are often not given the credit they deserve from the public. Resilience and perseverance are hallmarks of all of us who work in veterinary medicine.

Perhaps the greatest example of resilience that I have experienced this year is the time that I spent at the Michigan State University’s College of Veterinary Medicine White Coat Ceremony in February. This occurred just four days after the tragic shooting on campus. This was one of the first events to happen after the tragedy. The entire class voted to proceed with the event even though they were grief stricken. The resilience they showed was remarkable. It was the first step of healing for the college. For me, even being only a small part of this event is something I will remember for the rest of my life.

On another note, I would like to say, as the year comes to an end, it has been a tremendous honor to serve as your 2023 MVMA President. The highlights are too numerous to count. The interactions I have had with all of you and the future veterinarians I have encountered gives me great hope for the future of veterinary medicine.

I would like to thank CEO John Tramontana and the entire MVMA staff for all that they do. Our organization would not be the same without all your hard work and dedication. I would also like to acknowledge two outstanding colleagues who I have had the pleasure to work with. First, Dr. Erin Howard, MVMA Immediate Past President. Her leadership and steady hand are unparalleled. I am honored to call you my colleague and friend. Your voice will be missed, and I wish you all the best in whatever you do in the future. Second, Dr. Dana Tatman-Lilly, the MVMA President Elect, who I have had the pleasure to see grow into a very effective leader. I am sure her time carrying the gavel for the MVMA will be outstanding.

As for me, I will be shifting my focus as I will be assisting our delegate to the AVMA House of Delegates, Dr. Jill Lynn, as the new Alternate Delegate. I will also continue to serve on the AVMA PAC Board.

As my term comes to an end, I wish you all the best and hope the new year brings you success and happiness.

Dr. Larry Letsche

Larry Letsche, DVM, is the MVMA’s 2023 President, and can be reached at remrockd2@aol.com.
Donate today by visiting www.michanimalhealthfoundation.org/donate/
Why did you become a vet? How did you decide you wanted to specialize?

I was the little girl who picked up injured stray cats and birds and tried to care for them. I also rode horses as a girl so when my mother suggested that I should consider being a veterinarian at 8 years old, I went all in. I never changed my mind and progressed through school and undergraduate with a focus on this career path. I initially was interested in Equine medicine, however quickly learned it was not my passion. I had worked during high school and college at the Detroit Zoo and thought of that as a career path during veterinary school. However, when I reviewed the number of veterinary positions that became available annually in the zoo animal medicine arena, I realized that was not realistic. It was not until my senior year of veterinary school when I did an elective surgery rotation at the Animal Medical Center in New York did I learn of my affection for surgery and my desire to specialize.

What do you enjoy most about your job?

I most enjoy the positive impact we as veterinarians have on the animals and their owners. As a surgeon specifically, it is very rewarding to perform a surgical procedure and have the patient return with improved function and the owner’s appreciation of the progress. I tease that being a surgeon allows us immediate gratification at “fixing something” — repairing a fracture or removing a foreign body or tumor — and observing a recovery. I also take immense pride in our profession and seeing the positive response from friends and strangers when they learn I am a veterinarian. Our field is very highly regarded and most people understand that we enter the field due to our desire to help animals and not for financial gain. It is indeed a calling. I would be remiss not to discuss the role of organized veterinary medicine and recommend that veterinarians be involved. Your personal gain will exceed your commitment. It allows us to contribute to the field and make connections with local veterinarians. I have gained so much from being on the council of the Southeastern Michigan Veterinary Medical Society and, more recently, on the Board of Directors for MVMA. I have held the position of president and currently treasurer and chair of the continued education committee with the SEMVMA.

What is the most difficult aspect of your job?

I find challenges as a veterinarian in two different aspects. First, as a clinician having to pass along bad news or watch a pet decline without being able to help significantly. We have all lost our own beloved pets and had to witness their decline helplessly. We also all struggle with the financial limitations posed by owners. Second are the challenges of being a practice owner and managing the business. I am extremely fortunate to have an outstanding Hospital Administrator, Jim Thompson, for over 23 years. I find as veterinarians we are not trained in business and it is challenging to run a practice. We have had specific challenges related to building the current location, the recession, and more recently the COVID pandemic.

How has the idea of resilience applied to you and your career?

There have been many challenges during the past 34 years of specialty practice ownership. One of my biggest challenges was procuring a loan to start my practice despite my credentials. In 2002 I faced similar challenges in purchasing the land and constructing the current building where Oakland Veterinary Referral Services resides. I am humbled and grateful for my outstanding staff and doctors. I am extremely fortunate to still have staff who started with me on day one and many others who have been on board for over 25 years. While some practices have the philosophy that everyone is replaceable, we at OVRS do not believe that and we cherish and try to compensate all our employees fairly. OVRS is still growing. We now have over 40 specialists and emergency doctors and over 220 staff.

Lucy Shields Henney, DVM, DACVS, is a Diplomat of the American College of Veterinary Surgeons and owner of Oakland Veterinary Referral Services. She can be reached at lhenney@orvs.net
The topic of antimicrobial resistance (AMR) is not a foreign concept to us as veterinarians. Our profession’s deep connection to One Health gives us an important role to fulfill through the practice of antibiotic stewardship. So when the World Health Organization states that “…AMR is one of the top 10 global public health threats facing humanity” and that it “…requires urgent multisectoral action…”, we inevitably all have an opportunity to effect positive change for animals, humans, and the environment (WHO, 2021).

Having worked as a veterinarian in commercial poultry production over the last six years, this topic means a great deal to me on a personal and professional level. According to the FDA, ~66% of all antibiotics sold in the US were for use in food animal production - primarily for swine and cattle (Wallinga, D., et al., 2022). And the most recent FDA-affiliated report entitled ‘Antibiotic Stewardship within U.S. Poultry Production’ delves even deeper into the species-specific trends exhibited by the layer, broiler, and turkey industries from 2013 – 2022. It is important to note however, that livestock antibiotic usage can be further distinguished between human-medically important antibiotics and non-human medically important antibiotics. The former of which, as explicitly stated, directly affects the usefulness of medications used for human health.

Fast Facts from Dr. Randal Singer’s Studies:

**Broiler chicken data from 2013 - 2021:**
- Medically important in-feed antibiotic use decreased substantially with a 100% reduction in tetracycline and a 97% reduction in virginiamycin
- Medically important water-soluble antibiotic use also decreased substantially with a 92% reduction in tetracycline and a 98% reduction in sulfonamide
- Antibiotic administration at hatchery decreased from 90% to 0%
- There was also a documented shift towards the use of non-human medically important antibiotics

**Laying hen data from 2016 – 2023:**
- Relatively, there is very little antibiotic usage in U.S. table egg production
- The only human medically-important antibiotic used in layer production was chlortetracycline
- Less than 0.2% of total hen-days had chlor-tetracycline exposure
- All chicks within the dataset received gentamicin at the hatchery

**Turkey data from 2013 – 2021:**
- Medically important in-feed antibiotic use decreased substantially with an 80% reduction in tetracycline
- Medically important water-soluble antibiotic use in turkeys decreased overall, with special emphasis on a 50% reduction in neomycin
- Antibiotic administration at hatchery decreased from 97% to 40%
- Water-soluble tetracycline use remained fairly stable with an increase during the 2020 – 2021 period
While some good news can be parsed out of these data, there is still considerable room for improvement. Veterinarians and farm staff will need to continue their emphasis on preventative medicine through biosecurity, vaccination, nutrition, genetics, and husbandry – so as to avoid antibiotic treatment when possible. This is even more pertinent when one looks at the demand for organic and No Antibiotics Ever (NAE) poultry production which inherently prohibit the use of antibiotics. I look forward to the annual reports lead by Dr. Singer that will detail the future antibiotic usage trends within U.S. poultry production – hopefully showing that we are continuing on the right path.

References:

Alex Strauch, DVM, is the staff veterinarian for MVMA and can be reached at alex.strauch.dvm@gmail.com
As an ethologist there are subtle, nuanced, historical, and scientific controversies over the use of the term “alpha” and “dominance” in the pet-dog world. But as veterinarians, we should know that it is NEVER acceptable to alpha roll a dog. The notion that the human MUST be dominant in all relationships with dogs is close to what I find a lot of when working cattle, and is based on the gross misinterpretation of 20th century observational research on unrelated captive wolves.

How did we get here? When did it become acceptable to physically manhandle and roll a dog to show them who “is boss”? What is the role of veterinarians, dog trainers, and media “dog trainers” in creating the “alpha myth?” and is it a myth? Let’s start with a few definitions – Dominance in a group of social animals refers to access to resources. It does not mean that the only way to obtain the resource is by fighting to the death, it means that the dominant animal, generally through subtle signs, allocates the resources. “Dominance hierarchies” describe relationship patterns between animals that engage in repeated social encounters [1]. Alpha, the first letter of the Greek alphabet, signifies top ranking in some kind of hierarchy, so an alpha wolf is by definition the top-ranking wolf.

BY LANA KAISER, MD, DVM
In the 1900s there was little understanding of the behavior, social structure, biology, and field life of wild carnivores, including wolves. In 1934 Rudolph Schenkel began an observational study of captive wolves in the Zoological Garden, Basel. He titled the manuscript, published in 1949, “Expression studies in wolves,” subtitled “Captivity observations” [2]. The biological importance of the subtitle was ignored for decades.

The captive wolves he observed were collected from various zoos and had no biological relationship to each other. He studied “two packs” of unrelated wolves. Up to 10 wolves were held in captivity with a floor space of “approximately 10 meters by 20 meters” [2]. This was considered a groundbreaking work on the behavior of (captive) wolves and dogs. He coined the terms “alpha male” and “alpha female” to describe the highest-ranking wolves in the pack. The alpha wolves attained and maintained their social standing “by incessant control and repression of all types of competition (within the same sex) both alpha animals defend their social position” [2]. They exerted control using violence, to maintain their “place” in the dominance hierarchy. Alpha wolves controlled the resources including breeding rights. Thus, wolf packs were made up of an alpha male and alpha female, the breeding pair, their pups, and subordinate wolves.

It is interesting to note not only the small area that the wolves occupied but also the fact that these wolves were not a family of “captive wolves” but “random wolves” housed at the Zoological Gardens. None the less the term alpha wolf, associated with the dominance hierarchy and aggression found its way into both the scientific and lay literature.

At the time of Schenkel’s study there was little known about the behavior of wild wolves. Information was gathered from post mortem studies and tracking, but the social dynamics of wolves in nature were largely unstudied. David Mech, a wildlife ecologist and conservationist and probably the world’s expert on all thing WOLF remarked “Long ago, when I started, we knew very little about wolves in the wild. We knew that they lived in packs, that they preyed on large animals, and that they howled. And the standard things from storybooks” [3]. The invention of the radio collar led to an increase in the ability to understand the social dynamics, family units, hunting patterns, travel, and territory of wild wolves. In 1970 Mech published “The Wolf: The ecology and behavior of an endangered species” [4].

He referred to Schenkel’s work and stated that the wolf’s social system is based on dominance order” [p 69]. As mating season approaches, interactions among the pack “become more intense and frequent, including friendly contacts as well as conflicts and rivalries” [p 70]. These descriptions, without apparent consideration of the effect of captivity on behavior or social structure, directly cited Schenkel’s work. Dominance of alpha wolves was described as one of “forceful initiative” and the two aspects of dominance in wolf packs were considered privilege (access to breeding, food, resources) and leadership (control of activities).

The book became a resounding success among scientists, the lay public, and those interested in behavior of canines, wild and domestic, including the domestic dog. As time went on Mech and others obtained more knowledge of the life, habits, behavior, and social structure of wild wolves [5]. Mech requested, unsuccessfully at first, that the book cease to be published. He regretted the section on “pack order,” which was based on the studies of captive wolves and did not accurately describe wolves in nature. But it was too late, like wild fire, the alpha wolf and the aggressive dominance hierarchy had spread not only into the dog training community, but also the veterinary community.
THE FALLOUT

The alpha wolf aggressive dominance theory played an unfortunate but important role in dog training. Formal dog training evolved from the military [6] and the Koehler method of “pop and jerk” compliance was common [7]. “Once the concept of the wolf and its strict dominance hierarchy was established, dog trainers were more likely to use punishment. It wasn’t just that the dog was punished when it did something wrong, you had to show the dog that you were the [dominant] alpha wolf all the time” [6]. “Aggression-based models of dominance have been misunderstood by people who study both nonhumans and humans. They also have been warped by some dog trainers who think that humans should be the alpha members of their pack of companion canines and control them by dominating them” [8].

The greatest (and perhaps most aversive) influence on the welfare of dogs and dog training came from Cesar Millan. With a TV show (The Dog Whisperer), Millan shifted dog training to an aversive, punishment-based activity where the dog must “submit” to their “dominant” human. With TV shows, media, products, documentaries, reality TV, magazines, books, DVDs, videos, and the “Dog Psychology Center” (where he “rehabilitates” dogs) Millan almost single handedly taught generations of humans inhumane, aggressive, dangerous, callous, and scientifically inaccurate “dog training techniques.” In the US dog trainers and behaviorists are not licensed, and there are no standards to call yourself a “trainer.” it is important to note Millan has no credentials and no evidence of continuing education. His techniques are based on a total misunderstanding of the original captive wolf study, and a supreme lack of understanding of dog behavior. His work is based on the false notion that dog owners should establish themselves as “calm-assertive pack leaders” and this is accomplished by dominance, which included physically rolling the dog on their back until “they submit.”

REDEMPTION?

In 1999, Mech disturbed by the misuse of the term “dominance” and “alpha wolf” tried to reframe the narrative based on new knowledge obtained from field studies on the social structure and behavior of wild wolves. “In natural wolf packs, the alpha male or female are merely the breeding animals, the parents of the pack, and dominance contests with other wolves are rare, if they exist at all.” He continued “During my 13 summers observing the Ellesmere Island pack, I saw none. Thus, calling a wolf an alpha is usually no more appropriate than referring to a human parent or a doe deer as an alpha. Any parent is dominant to its young offspring, so “alpha” adds no information. Why not refer to an alpha female as the female - parent, the breeding female, the matriarch, or simply the mother? Such a designation emphasizes not the animal’s dominant status, which is trivial information, but its role as pack progenitor, which is critical information [9].” He also stated “The point here is not so much the terminology, but what the terminology falsely implies: a strictly strength-based dominance hierarchy.”

“Attempting to apply information about the behavior of assemblages of unrelated captive wolves to the familial structure of natural packs has resulted in considerable confusion. Such an approach is analogous to trying to draw inferences about human family dynamics by studying humans in refugee camps. The concept of the alpha wolf as a “top dog” ruling a group of similar-aged compatriots is particularly misleading [9].” Wolves in nature do not adhere to the concept of “pecking order” (dominance rules, where there is competition for “rank”). Posturing during social interaction is the only consistent behavior associated with “rank” in wild wolves – as Darwin described in 1877, dominant wolves assume the classic standing posture with tail horizontal and subordinate wolves lower themselves and “cringe.” It appears that submission is as importance as dominance in promoting friendly relationships and maintaining social cohesion [1, 5, 9].
WHERE ARE WE NOW?
Well, we have a much clearer understanding of the wolf’s basic social ecology, (pack structure, spacing, natural history and movements), but the “fall out” of misinterpretation of science continues to negatively affect the welfare of working and “pet” domestic dogs.

Mech distanced himself from the alpha dominance theory and the use of the term “alpha wolf” and “pack” instead preferring “breeding pair” and “family” [5, 10]. However, the terms and the aggressive human behavior they promote remain deeply ingrained in all aspects of our dog culture. Not all scientists agree that the terms should “be sanitized.” Beckhoff and other scientists believe that there are alpha wolves and alphas of other species simply refers to “first.” However, alpha animals are not by definition the most violent, ferocious, or domineering [1, 8].

With Karen Pryor’s book “Don’t shoot the dog” came enlightenment in some parts of the dog culture [11]. Sophia Yin’s work on low stress handling and training brought similar enlightenment to the training, behavior and veterinary space [12]. The notion of rewarding wanted behavior rather than physically dominating the dog to obtain desired behavior has slowly gained traction. With an increase interest in animal welfare, based on the expansion of our moral circle, came the desire to train and teach dogs humANELY. The creation of the American College of Veterinary Behavior also brought humane reward-based training directly into the veterinary world. The ACVB position statements reflect our views on dog training [13]. Additionally, they have recently issued an article “Done with the dog daddy;” criticizing Augusto DeOliveira (the Dog Daddy) use of aversive and harmful physical methods and tools [14]. Social media is overwhelmed with videos of aversive and harmful dog training techniques set to suspenseful music – they are dramatic, there might be an injury, a human may be bitten – people can’t get enough. It is unfortunate that to the general public positive reinforcement training is like watching paint dry.

CAN WE FIX THE PROBLEM?
Misinterpretation of scientific data is nothing new and not limited to dog professionals. However, in this case, total misunderstanding of the limits of the original study of unrelated captive wolves had wide ranging negative effects on all aspects of the dog community. As scientists we understand that the results from any study apply only to the population or individuals in the study – we may suggest in the discussion that our results MAY also apply to another different population, but it is equally true that they many not. Interpreting that behavior of unrelated captive wolves living in a small enclosure represents the behavior of all wolves is a prime example where the population, the environment, and the individuals were NOT considered. The Dog Whisper and the Dog Daddy are not alone in the use of aversive and harmful “training” methods based on a lack of understanding of dog behavior. The spectrum of dog trainers (and their training techniques) is like a bell-shaped curve: on one end are those who believe that positive reinforcement is the only way to train a dog and on the other end - are trainers who use (often inappropriately) aversive techniques and tools (shock and prong collars) to obtain the wanted behaviors. Most trainers are somewhere in the middle of the bell-shaped curve, with “cross-over trainers” being those who once used aversive methods but now choose not to and “balanced trainers” being those who use a combination of positive reinforcement and aversive tools. One should also note that dog training is not licensed – anyone can call themselves a dog trainer.

ARE WE PART OF THE PROBLEM?
As veterinarians we need to understand where the alpha dominant hierarchy came from, why it is inaccurate and inappropriate for both companion dogs and wild wolves, and not spread the myth. We should understand the different types of dog behavior and training methods and steer our clients to trainers who use humane methods.

Lana Kaiser, MD, DVM, is an Internal Medicine Specialist, and can be reached at kaiser@msu.edu

REFERENCES:
[6] Kjørstad E. Wolf packs don’t actually have alpha males and alpha females, the idea is based on a misunderstanding.
The Oxford Dictionary defines resilience as the capacity to recover quickly from difficulties; toughness. Stress resiliency was introduced in the 1970s when scientists began studying the psychological well-being of telecom executives under high stress during a corporate reorganization. Some telecom executives succumbed to heart attacks, divorce, and debilitated mental health. Other executives soared personally and professionally as evidenced by routine promotions. The scientists concluded some individuals are naturally more affected by stress than others. Individuals vulnerable to stress hold several beliefs including a chronic feeling of failure, despair, and self-pity; they focus on problems and believe they are stuck or downtrodden. Vulnerability to stress also led to a belief of little control over what happens. Individuals who are more resilient and less vulnerable to stress also have beliefs. Three key questions helped determine the beliefs of more resilient individuals.

1. **Can you control your response when you cannot control what’s happening?**

   Individuals can improve resilience and respond more positively to situations when they see themselves as a cause of their life. Nobody can control all situations, but constructively responding to situations is always an option. Control allows individuals to see that power lies in your mindset.

2. **Can you reframe unwelcome hardships as a challenge instead of a threat?**

   Reframing allows you to find something within the stressful event to learn and grow from. This growth comes from treating the problem as a challenge instead of a threat. Successful completion of small challenges hones skills to tackle bigger challenges.
3. Can you commit to the greater good beyond yourself?

Veterinary work settings include individuals, co-workers, and clients. Veterinary care givers take an oath to use their knowledge and skills to benefit both society and animals. Commitment to the team is more important than individual concerns. This commitment to the team is underscored by an intentional focus on diversity, equity and inclusion.

You all know that veterinary care settings can be stressful (and that’s putting it mildly). What I have not told you is that you can be born with resilience, or you can develop it with patience, willingness, and time. I was doing a relief shift last week and had the opportunity to relearn this lesson myself.

A client with a free exam coupon brought in a fractious dog with a wound on its tail. My technician went into the room first to get a history. What should have been a thirty-minute appointment dragged on for forty-five minutes, and I had yet to enter the room.

I was anxiously watching the clock and worried about my appointments backing up. I gathered the owner was either unable or unwilling to muzzle the dog, so my technician was attempting to do that. I kept going with my other appointments and stopped when I saw my technician come back to the treatment area. As he began giving me the history, I interrupted him to ask how he was doing. He said “Somewhat rattled, between the dog and the owner there is a lot going on. She unfortunately does not have money for any diagnostics or treatments, and the dog is really scared.” I said, “Okay. Before we go back in together, let’s take a minute to get on the same page.”

I didn’t know my technician well and wanted to give him a minute to gather himself. I asked him to tell me what he had been trying to do in the room. He informed me he had a strong interest in behavior and training. He was going slowly in the room in an attempt to build rapport with the dog. I asked if he had seen any improvement and he said there had been none. I thanked him for going slow and taking his time putting the muzzle on. He then took a deep breath, and I felt we could proceed.

We talked about the case, and I asked him for his recommendations. He reiterated the owner’s financial constraints and mentioned the owner used to be a groomer. He said the dog is good for the owner at home. She had been using oatmeal shampoo to treat the dog at home and maybe we could continue the baths to treat what he thought was a hot spot.

By moving past my irritation with this appointment running overtime, I was able to focus on my technician’s needs. Were we behind? Not really. I had gotten my other appointments out on time. The owner of the fractious dog was pleased with the extra time my tech had spent with her. More importantly, I acknowledged my technician’s effort and included him in the therapy plan.

After our talk, we went in together to focus our attention on the client and her dog. I spoke with the owner and did a physical exam. I looked at the dog’s tail last. The lesion did appear to be a hot spot. I recommended medical therapy, which the owner declined. I then recommended baths at home and a recheck if the area was not healing within 3-5 days. The owner was grateful for our efforts and said she would be coming back to us for regular appointments because other clinics did not take the time we had with her pet.

After the client checked out, I congratulated my tech on gaining us a new client. I commended him for handling the situation well. He then shared that the client reminded him of his mom and that he recommended a series of happy visits where the dog would only come into the office for treats.

Let’s revisit the three questions of resiliency to understand how resilience is related to diversity, equity, and inclusion. The first question is, what is in our control? I could not control whether the dog was fractious, nor could I control whether the owner was able to pay for care. I also could not control how much time my technician spent trying to work with the pet. I could control my response to what became an extended appointment. Remembering our obligation to use our knowledge and skills for the benefit of society, I was able to move from self to situational awareness. My technician spent the time he felt necessary to provide patient care, which is what we are trained to do. I knew that effort cost him. He was somewhat frazzled because of the energy and emotion spent on trying to provide care. I could control whether I acknowledged his contribution and solicited his opinion.
The second question was whether I could see this as a challenge and not a threat. Fractious animals are certainly threatening, and we need to keep ourselves and the patient safe. The threat of running behind in my appointments was my first thought. By reframing the situation, I was able to see the opportunity of providing an experience the client was not expecting. We gained a new client and were able to offer a solution beneficial to the pet and owner. We also noted in the patient record that this pet needs an extended appointment going forward.

The last question around resiliency is whether I could commit to the greater good beyond myself. I was genuinely concerned about my technician. I knew he was well aware of how much time he was taking, and I became curious as to why he had spent so much time with the client. He demonstrated equity by attempting to provide this client with what she needed to fully participate in her pet’s care. Working with a diverse team allowed me to leverage the life experience of my technician to improve the pet’s care. I did not know the client reminded him of his mother. By connecting with the client on a deeper level, he spent time ensuring the client understood our instructions for at-home care, which hopefully will lead to compliance.

I was also concerned about developing the best treatment plan for this patient. I included my technician in this plan by treating him as a peer and seeking his input. I had no idea he would tell me about his passion for pet training. Because I was intentional about ensuring he was okay, he felt safe to share additional information with me. This allowed me to cultivate relationships with both him and the client.

After the appointment, my technician and I had good laugh and recovered from what was initially a difficult situation. We understood the challenges of a fractious patient and owner with limited means. By building rapport with the client, my technician drove our business forward by establishing a new relationship with the client.

Resiliency is not about removing the difficult but about seeing difficult situations as learning opportunities the team and client can learn from.

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Case Example

On November 12th a client presented a 10-year-old beagle mix to the veterinarian for a second opinion regarding the dog’s currently prescribed heart medication, as well as an evaluation for an ongoing cough. Before this date, the dog was treated for about three years by a different provider for congestive heart failure.

The veterinarian examined the dog and recommended dose adjustments to the dog’s current medications, diagnosed the dog with periodontal disease, prescribed an antibiotic, and recommended a dental cleaning. After the appointment, a technician discussed costs and scheduled the dental cleaning appointment. An appointment for the dental cleaning was scheduled for December 2nd.

On November 30th, the client presented the dog to the facility for an emergency visit with reports that the dog was experiencing difficulties breathing and was reluctant to move. The allegation/complaint from the client states, the dog was having “trouble breathing and abdomen pain.” It was noted in the client complaint that the clinic was closing but they agreed to see the patient anyway.

The veterinarian noted that the dog appeared to experience pain when lifted onto or down from the examination table and showed moderate pain when the lumbar region was palpated and even more pain when pushing upward on the dog’s chest from below.

The veterinarian diagnosed this dog with intervertebral disc disease. The veterinarian then administered 30 mg of dexamethasone intravenously, a corticosteroid, along with prescribing a muscle relaxant, and also prescribing Rimadyl, a nonsteroidal anti-inflammatory.

On December 2nd, Owner A dropped off the dog for the scheduled dental cleaning. At that time, the technician went over costs and lab work, and radiographs were offered to Owner A. The office called Owner B (at Owner A’s request) to authorize the diagnostics. Owner B stated in the allegation that the owner agreed to the tests to “ensure the dog was ok for the dental procedure.” Owners did not receive follow up communication with regards to the diagnostic results prior to the dental cleaning. These results were abnormal. The veterinarian performed the dental cleaning procedure using injectable anesthesia(s). Following the procedure, the dog showed signs of congestion, dehydration, difficulty breathing, and the dog’s saliva was blood tinged.

At 2:15 PM the veterinarian called Owner B and reported that the dog was not doing well. Owner B went into the clinic with COVID restrictions. Owner B refused to wear a mask and provided a note from a medical provider. At this time, the veterinarian went over the abnormal lab work with Owner B and explained that the dog was struggling to breathe. The veterinarian gave the dog a diuretic to encourage urination and an antimicrobial injection to treat potential respiratory infection issues.

The veterinarian recommended Owner B take the dog to another facility that offered overnight care and had ultrasound capabilities. The closest facility was 60 miles away and Owner B opted to take the dog home. The veterinarian provided record copies and referral information for the owner to share with an emergency clinic. The owner took the dog home where the dog died in the evening of December 2nd.

The Board of Veterinary Medicine obtained an expert to review the case. The veterinarian was found to have failed to exercise due care and failed to conform to the standard of acceptable practice. The expert opined:

1. There is no record offering chest radiographs at the November 30th visit. Physical exams are not always able to pick up early congestive heart failure. Therefore, in a dog who is already known to have been in heart failure in the past, radiographs should be offered any time the owner feels the patient is having difficulty breathing.

In last June’s publication, we reviewed the findings of a March 31, 2023, report titled, “Health Professional Disciplinary Reform FY 2022 Report to the Legislature” that summarized actions taken from October 1, 2021, to September 30, 2022, on Michigan veterinary licensees. Based on the review of the FY 22 BVM disciplinary actions 5 out of the 22 cases, 22%, include steroid and non-steroid medication concerns such as wrong dose, concurrent usage, and lack of client consent. In this issue, we will review one case reviewed by the State Veterinary Medical Board (VMB) Disciplinary Subcommittee (DSC).
2. The veterinarian's treatment for the diagnosed back pain on November 20th was not appropriate. Using a corticosteroid and a non-steroidal anti-inflammatory together increases the risk of bleeding stomach ulcers and a corticosteroid should only be used when the benefit outweighs the risk for congestive heart failure.

3. Lab work and radiographs from December 2nd indicate early congestive heart failure and an enlarged heart. Further review of the radiographs suggested the dog had several health issues beyond dental disease including enlarged liver, slightly enlarged spleen, one-two radiopaque objects in the abdomen, decreased serosal detail in the area caudal to the stomach and mild spondylosis in the lumbar spine.

4. The veterinarian should have notified the client of the abnormal results before performing the dental cleaning, recommended assessment by a cardiologist and/or internal medicine specialist and offered an ultrasound and echocardiogram to help determine the appropriateness of pursuing the dental procedure. It would have been better to cancel the dental procedure, adjust the heart medications, and recheck in a few days. It was unnecessarily risky to place the dog under anesthesia following the abnormal test results.

5. The veterinarian's use of solely injectable anesthesia during the December 2nd dental procedure was inappropriate for a dog with underlying cardiac disease as they are contraindicated with cardiac abnormalities. The veterinarian did not place an endotracheal tube or use gas anesthesia to protect the airway and allow supplementation with oxygen which are important for patients with cardiac abnormalities and heart disease. Additionally, the records do not indicate that the veterinarian used an IV catheter which is below the standard of care.

6. The veterinarian's medical records were not complete. There are no documented communications with the client, including complications arising following the dental procedure. There is a Pre-Anesthetic Laboratory Waiver Form on file, but it is not signed by the client. The veterinarian's notes are minimal and there does not appear to be consent for treatment or an anesthesia monitoring form on file.

Discussion

It is important to note that we are reviewing the case as summarized by the state. There are many nuances that can’t be captured, and hindsight is 20:20. The veterinarian in the case offered veterinary services when the clinic was closing, allowed exceptions to the clinic COVID protocol to support the client’s needs, and also recommended a referral when the patient care needs exceeded the clinic’s capabilities. The veterinarian also provided medical records (even if not complete) for the client to take to help ensure continuity of care.

However, additional steps should have been taken to ensure proper patient care, valid client consent, and medical records that reflect the diagnostics, procedures, and treatment plan. Valid client consent is the result of a shared decision-making process that requires proper client education. This may be related to prescribing a medication, offering diagnostics available such as radiographs or cytology, and documenting this conversation and client decision in the patient record. For our limited discussion, we will highlight client consent, communications, and medical record-keeping as it relates to NSAID use.

The 2015 AAHA Pain Management Guidelines is a consensus of expert opinion and industry guidelines for ways to minimize the risks of nonsteroidal anti-inflammatory drugs. Figure 3 of these Guidelines includes steps to consider when using an NSAID in a patient. The first is to ensure that you have taken a thorough history to include specific questions about the administration of aspirin, other NSAIDS, "steroids", cortisone, or nutritional supplements that may be contraindicated. It is critical to discuss this with the client, both verbally and provide written instructions, to avoid medications that may increase risk factors of an adverse event and to discontinue the medication immediately if signs of decreased appetite or an episode of vomiting occurs. It is important to tell them that these adverse events typically show up within 2-4 weeks but can occur at any time.

You will also want to discuss the need for increased laboratory monitoring. The frequency will be variable but ideally within the first month of initiating and then every 6 months after if your patients are low risk. What if the client does not consent to laboratory testing or fails to follow up with subsequent monitoring but wants to continue to use the medication? Ongoing prescribing of an NSAID will be a professional judgment decision. It is important that you draft records that will help a BVM to better understand how and why a plan was implemented. Think of your records as a third-party witness.

Dr. Mark E. Epstein, DVM, Dipl. ABVP C/F, CVPP, lead author of the cited Guidelines recommends discussing the risks and signs of adverse events associated with NSAID use both verbally with the client and also provide written instructions. An individualized consent form specific for NSAIDS may also be beneficial for your practice formatted to allow the client to initial key points and at a minimum provide a signature. As a side note, the missing signature from the waiver cited by the expert in #6 was also a breach of duty highlighting the expectation of client signatures. But remember the consent is more than a form, it’s the discussion between the veterinarian and the client.

Other easy steps to minimize the risks of NSAID use include appropriate patient selection, client consent and ongoing education, recognizing the earliest sign of an adverse effect and withdrawing the medication, appropriate laboratory monitoring, use of NSAID sparing strategies such as multi-modal approaches to pain management and finding the lowest effective dose, washout when possible before initiating NSAIDS, and gas troprotection’s if necessary. The failure to ensure the client is aware of the risks and benefits can result in the failure to obtain valid client consent and subsequent disciplinary action.

[To learn more on this topic, go to www.animalandveterinarylaw.com for a review of the Michigan FY 22 veterinary license disciplinary actions and recommendations for steps you can take to avoid common pitfalls related to common medical records deficiencies; client consent and communications; regulation of the profession, ethics, and controlled substance awareness.]

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Do you ever feel that anything that might go wrong is going wrong? My father-in-law used to say, “That is life.”

Our daily life is full of challenges, traumas, and stressors. Stuff happens, life happens, and we have many negative thoughts and feelings about all the happenings. For veterinary teams, these feelings are magnified beyond the ordinary because our workplace is designed to address others’ life challenges while we balance our own. That is veterinary life.

We all know that life is hard, and if we did not have challenges, we would not learn to appreciate the happy things when they happen. This is by design, but it stinks when circumstances are not going well and we need to practice skills to keep us from bending too far into negativity. To handle both our life and work challenges, we must develop a strong ability to be more resilient.

Being resilient does not mean that we won’t experience difficulty or emotional distress. Building resilience will involve appreciable pain, but coping strategies may be learned and developed to increase our resiliency. Becoming more resilient will empower us to grow and improve our lives.

The American Psychological Society states, “Resilience is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands.”

You may be tasked to practice resilience while going through many demands in your life. For example, I recently was faced with my older dog, Trent, suffering from a month-long battle with coughing, sneezing, and snorting that eventually ended as a diagnosis of gastric reflux secondary to (or in addition to) a gall bladder mucocele. We went through various blood tests, radiographs, ultrasound, and ultimately a CT scan, then surgery to get to the resulting cure. Still, as this eleven-year-old dog bounces back from a major surgical procedure, I see a great example of resilience in him and myself. I am not patient when it comes to the diagnosis of any pet, so having the patience to get him diagnosed was an emotional challenge for me.

“A number of factors contribute to how well people adapt to adversities, predominant among them: how individuals view and engage with the world, the availability and quality of social resources, and specific coping strategies.” - The American Psychological Society explains.

When challenges come, what can we do to build our capacity for resilience?
Start with connection. When faced with adversity, people need people. When working through my challenge with Trent, I talked to veterinary friends of mine to help me work through his symptoms and treatments—nights spent texting back and forth to see what they would do with their pet if they were in my situation. I needed others, friends and specialists, to help me mentally sort through my emotions and get logical about my dog. When you are involved in a challenge, you also must stay close to others to help validate your feelings and keep you supported. Connections with empathetic people will support you emotionally and help you to bounce back from adversity. It is always good to know that you are not alone. If you struggle to find peace and balance, seek professional help from a therapist or coach. It often takes an outside perspective to help us sort out all our thoughts and stressors.

Work to find meaning and purpose in your life. When facing adversity, it helps if you go back to finding your reason for doing the work that you do. Why did you get into veterinary medicine in the first place, and what do you love about it? Working to rekindle your “Why” will help you build your resiliency muscle and begin to work towards springing back. Setting some new realistic goals and reaching out to help others will also help you to create purpose. I am always surprised how much better I feel about life when I spend some time volunteering or helping someone else in need. If you can’t volunteer, work to set a small, achievable goal for yourself. Taking action always feels better than spinning in inaction and negative thoughts.

Focus on your wellness. Taking care of yourself physically is as essential to resilience as taking care of your mind. When we are unwell, we have a more difficult time with our emotional stressors. Working to improve your lifestyle by sleeping better, proper hydration, improved nutrition, exercise, fresh air, and sunshine will add to your capacity to learn resilience. Take a short vacation or retreat, get out of your routine, and try not to shame yourself for not working. Working on your physical health will increase your capacity to be resilient when bad things happen. Avoid things like social media, alcohol, drugs, or other substances that cover up your feelings. It is tempting to ignore your challenges by covering them up, but it will lead to more problems later.

Practice more mindfulness. Creating mindful journaling, practicing yoga, and spiritual practices like prayer or meditation can help us restore hope, which will help us deal with situations that require resilience. When you journal or meditate, concentrate on gratitude and positive aspects of your life to help you build a more positive outlook. Understanding where you are struggling will open you up to new solutions.

Keep some perspective. How you think is ultimately linked to how you feel. It seems too simplistic to say that your thoughts create your feelings, but it is true. Notice when your thinking turns into “catastrophe thinking” about your situation. Remind yourself that your brain is wired to keep you safe, but it will also wind you up into unrealistic worry and anxiety. You will not be able to change what is happening, but you do have the ability to think of it more rationally. Small failures do not have to become the story of your future life.

Try to accept that change and challenges are part of life. You have power over the response that you give to a situation, even when you cannot change your circumstance. Focus on building your resilience and your future problems will be easier to overcome.

*Life doesn’t get easier or more forgiving, we get stronger and more resilient.*

Steve Maraboli, *Life, the Truth, and Being Free*

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Julie Cappel, DVM, CCFP, hosts the Veterinary Life Coach Podcast, and can be reached at jacappeldvm@gmail.com
Resilience is defined as the capacity to recover quickly from difficulties. As veterinary professionals, we recognize that our patients are quite resilient and often hide pain extremely well. Frequently, medication alone is not the solution. Rehabilitation therapy can accelerate the level of veterinary care, improving quality of life for animals of all ages dealing with a plethora of different conditions.

Most commonly, people think about orthopedic or neurologic conditions as those in need of rehabilitation care. However, this fails to consider the breadth of potential cases that might benefit from rehabilitation. Realistically, rehab may be useful for any condition causing the following:

- Lameness or gait abnormalities, like scuffing of paws or knuckling
- Discomfort, restlessness or requiring the use of pain medications
- Muscle atrophy
- Mobility problems

Veterinary rehabilitation has become more mainstream over the last 25 years. Veterinary patients now regularly receive specialty care and rehabilitation therapy are part of this trend. Multimodal pain management is broadly utilized in veterinary medicine and frequently includes rehabilitation therapy along with integrative medicine modalities such as manual therapy, acupuncture, and veterinary spinal manipulative therapy. All of these are included in the 2015 AAHA/AAFP Pain Management Guidelines for Dogs and Cats. The foundation of veterinary rehabilitation is manual therapy and therapeutic exercise. There are many other tools, which may also be beneficial, but simply using a laser or an underwater treadmill is not rehabilitation. From diagnosis to the delivery of care, rehabilitation relies on the practitioner’s hands to communicate physical findings, alleviate muscle tension and promote neuromuscular feedback. In many cases, the subtle changes felt by thorough palpation can direct the pain relief stage of care, which is essential before any active rehabilitation can begin.

The following canine mini cases are shared as examples of patient resilience and how rehabilitation can help extend comfort, mobility, quality of life and the duration of time in which pets can remain with their families.

Brandy presented to the clinic in April 2016 at 12 years of age with acute onset hind limb weakness and a history of stifel arthritis and spondylosis. Her rehabilitation assessment revealed bilateral hind limb ataxia, myofascial back pain, and significant arthritis in most of her joints (limbs and spine). She responded well to her initial rehabilitation program and her gait improved allowing her to resume walks with her family. In July 2016, she experienced a setback. Her family pursued an MRI that revealed multiple pro-
truding discs but surgical intervention was not indicated. Ongoing rehabilitation was advised by the neurologist. Brandy rallied again with manual therapies, therapeutic exercise, laser therapy and acupuncture. She transitioned into once monthly maintenance rehabilitation sessions and enjoyed an active senior lifestyle for another three years until she was diagnosed with lymphosarcoma.

Indie came to the clinic in 2016 after being diagnosed with bilateral hip dysplasia and mild subluxation of the left femoral head at nine months of age. A customized rehabilitation program was developed for Indie including a dynamic home exercise program. We have continued to see Indie at least every six months to monitor her mobility and comfort, ensure that her body condition score remains a 5/9, and adjust her home exercise program. Currently, she receives Meloxicam® intermittently and takes daily nutritional supplements. She has remained comfortable and active over the last seven years with conservative management and will be walking 2.5 miles with us in the local Christmas parade in December!

Schnitz arrived at the clinic in 2015 with severe degenerative changes to his right tarsal joint, secondary to hit-by-car injuries three years prior. He was not a good candidate for surgical arthrodesis and was referred for alternative options. We evaluated him for Veterinary Orthotic-Prosthetic (VOP) options since amputation was likely the only other choice but not a good choice because Schnitz also had hip issues. A custom clam-shell tarsus-paw orthosis was created for Schnitz. His orthosis, combined with rehabilitation therapy, allowed him to be comfortable and mobile for four years.

At that point, he developed some aversion to his device and radiographs revealed that his tibia had migrated distally along side the lateral tarsal joint. Schnitz was re-casted and a new articulating stifle, non-articulating tarsus-paw orthosis was developed for him. His new orthosis provided more integrated support for the entire limb and Schnitz's mobility was improved for another three years. Ultimately, rehabilitation therapy and conservative management of his advanced tarsal degeneration kept Schnitz mobile for seven years without amputation of his limb.

Ultimately, the rehabilitation goal is to improve our patients' quality of life by reducing pain and improving mobility. Clinical improvement is gauged with measured parameters like goniometry, muscle mass and weight loss. Subjective assessment is also important and includes comparing ease of movement via progress videos, along with client feedback. We all love the "miracle cases" in which patients can walk again, despite the odds. However, sometimes the most rewarding measure of success is found by looking for the little things – helping a pet with developmental issues live a long life, getting them to greet the family at the door again, aiding them in getting outside for elimination, enabling them to walk a few more minutes during their walk or resume playing with toys again. Simply stated, being able to spend

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Earlier this year, a survey was conducted by the MVMA to allow its members to evaluate their compensation and benefit policies compared to those of other MVMA members. In the spring of 2023, we asked 661 practice owners who were MVMA members to respond to this survey. We received just an 18% response rate.

Practice owners were asked to answer questions regarding the compensation and benefits offered to their associates and the practice team (office/practice managers, LVTs, unlicensed staff/assistants and front office staff). Owners were asked to exclude their own compensation. Survey responses were gathered through the survey website.

The survey examined several areas (type of practice, years in practice, location, etc.) and evaluated their effects on the level of compensation for associate veterinarians and the practice team.

In the compensation categories, we’ve reported median figures. The median is the mid-point of all responses (50th percentile). A generally accepted way of analyzing compensation data, the advantage of using the median is that the results are not influenced by extreme (high or low) responses, whereas the average (mean) would be.

Other Key Points:

- Annual compensation for associates includes production based compensation, where applicable.

- Full-time is considered 30 hours per week or more.

- Part-time is considered less than 30 hours per week.

- Where there were fewer than two responses, data is not reported due to confidentiality (mostly equine and food animal).

- Compensation data reported by practice owners may be influenced by factors unknown to us.

- Compensation data for health care team members was collected as annual salary and/or hourly rates. For consistency, we have shown all compensation as an hourly rate for health care team members.

The following information is just a portion of the data collected for the state of Michigan. Additional demographics and benefits information for the state as well as full reports for seven geographic regions around Michigan are available on the MVMA website at https://mivma.memberclicks.net/compensation-and-benefits-survey-2023.
### Full Time Associate | 30+ hours/week

**TABLE 1: Type of Medicine**

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Compensation</th>
<th>Range</th>
<th>Experience</th>
<th>Range</th>
<th>Hours</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>All</td>
<td>$120,000</td>
<td>$62,284-348,000</td>
<td>7</td>
<td>0-45</td>
<td>36</td>
<td>30-65</td>
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<tr>
<td>Companion</td>
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<td>8</td>
<td>0-45</td>
<td>36</td>
<td>30-50</td>
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<tr>
<td>Mixed</td>
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<td>5</td>
<td>2-36</td>
<td>40</td>
<td>30-50</td>
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<tr>
<td>Equine</td>
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<td>4-4</td>
<td>50</td>
<td>50-50</td>
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<tr>
<td>Food/Farm</td>
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<td>$85,000-144,000</td>
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<td>0-2</td>
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<td>35-65</td>
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**TABLE 2: Experience**

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<th>Years</th>
<th>Compensation</th>
<th>Range</th>
<th>Experience</th>
<th>Hours/Week</th>
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</tr>
<tr>
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</tr>
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<td>$89,000-200,000</td>
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<td>$150,000-255,000</td>
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<tr>
<td>26 - 30</td>
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<td>$75,000-158,000</td>
<td>30</td>
<td>40</td>
</tr>
<tr>
<td>31 +</td>
<td>$121,698</td>
<td>$90,000-185,000</td>
<td>36</td>
<td>40</td>
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### Part Time Associate | < 30 hours/week

**TABLE 1: Type of Medicine**

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<tr>
<th>Medicine</th>
<th>Compensation</th>
<th>Range</th>
<th>Experience</th>
<th>Hours/Week</th>
</tr>
</thead>
<tbody>
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<td>Companion</td>
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<td>$16,900-195,000</td>
<td>15</td>
<td>5-29</td>
</tr>
</tbody>
</table>

*Insufficient data was received on mixed practice, equine, and food animal associates*

**TABLE 2: Experience**

<table>
<thead>
<tr>
<th>Years</th>
<th>Compensation</th>
<th>Range</th>
<th>Experience</th>
<th>Hours/Week</th>
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<tr>
<td>11 - 15</td>
<td>$95,000</td>
<td>$16,900-113,000</td>
<td>14</td>
<td>28</td>
</tr>
<tr>
<td>16 - 20</td>
<td>$81,631</td>
<td>$50,864-120,000</td>
<td>20</td>
<td>21</td>
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<tr>
<td>21 - 25</td>
<td>$70,000</td>
<td>$50,864-102,000</td>
<td>25</td>
<td>18</td>
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<tr>
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<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>31 +</td>
<td>$63,051</td>
<td>$35,830-110,000</td>
<td>43</td>
<td>15</td>
</tr>
</tbody>
</table>

### Relief Compensation

**TABLE 1: How Relief Veterinarians are Paid**

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Hourly</th>
<th>Daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>All</td>
<td>37</td>
<td>6</td>
</tr>
<tr>
<td>Companion</td>
<td>37</td>
<td>6</td>
</tr>
</tbody>
</table>

*Insufficient data was received on mixed practice, equine, and food animal relief work*

**TABLE 2: Hourly & Median Pay Rates**

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Hourly Rate</th>
<th>Range</th>
<th>Daily Rate</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>All</td>
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<td>55-150</td>
<td>$875</td>
<td>400-1,000</td>
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<tr>
<td>Companion</td>
<td>$85</td>
<td>55-150</td>
<td>$875</td>
<td>400-1,000</td>
</tr>
</tbody>
</table>

*Insufficient data was received on mixed practice, equine, and food animal relief work*

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Kara Henrys is MVMA’s Director of Learning & Strategic Partnerships, and can be reached at henrys@michvma.org
The 2024 AVMA Veterinary Leadership Conference (VLC), will be held Jan. 4-6, in Chicago, and is the veterinary profession’s premier conference for leadership development. Through a unique mix of CE sessions, AVMA governance meetings (The House of Delegates will hold their winter meeting during this conference), and networking, attendees will expand and hone leadership skills while connecting with a diverse network of colleagues from all walks of the veterinary profession.

The conference will offer more than 20 hours of leadership programming covering such topics as mentorship, building emotional intelligence, overcoming perfectionism, achieving a better work-life balance, and improving your communication skills. This year’s keynote speaker, Richard Boyatzis, is a leading expert in leadership development and emotional intelligence. For more information, please visit avma.org/VLC.

WELLBEING

The AVMA, in collaboration with many other veterinary associations and groups, remains committed to offering members access to a wide range of resources that support healthy individuals, teams, and workplaces.

The “AVMA Reputation Management Toolkit” offers step-by-step, comprehensive advice for coping in real time with cyberbullying incidents and social media firestorms and restoring reputational damage to the veterinarian or practice in their aftermath. The new tools for veterinary teams are available to AVMA members and non-members alike, thanks to an educational grant by Banfield Pet Hospital.

The toolkit augments existing AVMA resources and is available to all veterinarians, not only AVMA members, who represent approximately three-quarters of U.S. veterinarians. The new toolkit and other cyberbullying and wellbeing resources are available at avma.org/REPUTATION.

AVMA members who are facing an immediate cyberbullying situation also have existing access to a half-hour of free consultation and advice from crisis management experts at Bernstein Crisis Management. For more information, members can log in to avma.org/resources-tools/practice-management/reputation/cyberbullying-help-AVMA-members.

The AVMA continues to partner with the American Foundation for Suicide Prevention (AFSP), leading suicide prevention experts, and a wide range of national and international veterinary associations to develop resources specifically for the veterinary community.

A resource guide developed by the AVMA and partner organizations provides strategies and practical actions that veterinary professionals can take to help prevent suicide.

The Suicide Prevention Resource Guide for Veterinary Settings outlines societal, community, relationship, and individual approaches, and can steer veterinary professionals and groups in developing a comprehensive suicide prevention plan.

The AVMA’s Train-the-Trainer Wellbeing Educator Program, made possible through an educational grant from Merck Animal Health, focuses on the link between effective communication and workplace wellbeing. It highlights core communication skills that build trust, increase rapport, and help create healthy, sustainable work cultures. For more information, please visit avma.org/TrainTheTrainer.

AVMA’s Workplace Wellbeing Certificate Program, available on AVMA Axon, provides the knowledge and skills needed to create a culture of wellbeing in the veterinary workplace. The program is free to AVMA and SAVMA members and is accessible to all members of the veterinary team.

Be sure to look to avma.org/wellbeing for resources designed to support all members of the veterinary team.
GET INVOLVED WITH THE AVMA

There are various ways that you as an individual can get involved with the American Veterinary Medical Association. Becoming involved as an advocate for the profession or joining a committee are great ways to start. Here are some of the ways to get involved:

A. Join the AVMA Congressional Advocacy Network (AVMA CAN) - By joining the CAN you will play an essential role in helping to promote the profession and guide its success in Washington D.C. You will be kept up to date on issues appearing before Congress and will be asked to reach out to your representatives and senators. By doing so you will be a key advocate for veterinary medicine. New to the CAN is a system where you can earn points, win prizes and work up the ladder of four levels of advocacy. The AVMA-CAN may be reached at AVMA.org/AVMACAN or by searching the AVMA website.

B. Donate to the AVMA Political Action Committee - By donating to the AVMA PAC you will help the AVMA gain greater access to our legislators in Washington. The PAC is non-partisan and donates equally to both parties. The simplest way to contribute is to donate at the time of renewal for your AVMA dues.

C. Become an AVMA Ambassador - Becoming an AVMA Ambassador will allow you to directly interact with your federal representative. Hosting tours of your veterinary clinics, attending in district events, and being a resource for your rep are some of the ways to be involved. If interested, please contact Larry Letsche (MVMA Alternate Delegate) at remrock02@aol.com or Brian Davis (AVMA Grassroots Director) at bdavis@AVMA.org.

D. Become an AVMA Volunteer - The AVMA is continually trying to recruit volunteers for its committees and councils. There are a wide range of committees to cover many interests. To see what openings are available go to https://AVMA.org/membership/volunteering-AVMA.

AVMF

As the charitable arm of the AVMA, the American Veterinary Medical Foundation (AVMF) is your Foundation, providing veterinarians and veterinary students with charitable resources and programs that advance the science and practice of veterinary medicine to improve animal and human health.

AVMF Veterinary Charitable Care Funding

The REACH™ (Reaching Every Animal with Charitable Healthcare™) Animal Care Program provides grants to AVMA members providing charitable veterinary care in their communities. Members can get up to $500 per case; maximum of $2,000 per member per year. Members can find more information about REACH grants at avmf.org/programs/veterinary-charitable-care.

AVMA PAC

The AVMA PAC is the AVMA’s nonpartisan professional advocacy committee—a separate fund supported by AVMA members to support candidates that champion our profession in Congress. So far in 2023, the AVMA PAC has raised more than $173,000 from members. Still, just under 2 percent of AVMA members contribute each year. Similar-sized associations average 10-20 percent participation. As we head into a busy election year, the AVMA PAC board is expanding fundraising efforts by addressing state and allied groups, as well as AVMA councils and committees. Reach out to Conor Noonan to learn more at cnoonan@avma.org. The AVMA PAC has made more than $190,000 in contributions to candidates, allowing AVMA member Ambassadors and staff to attend over 125 different events with legislators. Members can learn more about which candidates received PAC contributions and the AVMA PAC contribution guidelines and approval process on the AVMA PAC website, pac.avma.org.

The AVMA is a not-for-profit association representing more than 102,000 veterinarians working in private and corporate practice, government, industry, academia, and uniformed services. The AVMA acts as a collective voice for its membership and for the profession.

Jill Lynn, DVM, is the MVMA’s Delegate to the AVMA, and can be reached at jill.lynnvdv@yahoo.com or 517.331.2009.

Larry Letsche, DVM, is the MVMA’s Alternate Delegate to the AVMA, and can be reached at remrock02@aol.com.
Working with highly pathogenic avian influenza (HPAI) since early 2022 has revealed an important lesson: responding to a foreign animal disease (FAD) is a team effort. As a response grows in scale and complexity, state and federal resources will be in high demand, and there must be a way to supplement this need. If African swine fever or another FAD affecting swine were ever detected in the United States, swine would need frequent diagnostic and surveillance testing to allow for the safe movement of healthy animals through control zones and across state lines. This demand for sample collection would create a pace that cannot be fulfilled by state or federal veterinarians alone. In this situation, Michigan veterinarians can help to fill this critical need by learning how to properly collect, handle, and submit the samples needed and training others to do the same.

While there is a national training program designed to provide this specialized learning opportunity, the Michigan Department of Agriculture and Rural Development (MDARD) has been working diligently with stakeholders to bring a Certified Swine Sampler Collector (CSSC) Program to the state to make this training more widely available and better tailored to the needs of Michigan's pork industry.
**Michigan’s CSSC Program:**

In establishing a Certified Swine Sample Collector Program in Michigan, two training tracks have been developed.

### Accelerated Trainer Track

The first track, the Accelerated Trainer Track, was designed for experienced veterinarians with an extensive background in swine health or who work within the industry and are confident in their teaching skills. For this track, members of MDARD, the Michigan State University Veterinary Diagnostic Laboratory (MSU VDL), Michigan Pork Producers Association (MPPA), and Dr. Pam Zaabel from the National Pork Board virtually onboard these veterinarians, eventually preparing them to instruct the next class of Certified Swine Sample Collectors. The veterinarians even receive customized submission forms from MSU VDL for processing samples and educational materials to guide their communications with the laboratory. Once registered and onboarded, the veterinarians are given full access to the educational materials and allowed to arrange instruction and hands-on training for others at locations within the veterinarians’ farm system—ultimately adding to the network of certified swine samplers. Those learning from these veterinarian trainers will have their performance records submitted to MDARD for credentialing and reference. To initiate this training track and test its feasibility and effectiveness, a pilot was hosted by Dykhuis Farms and led by their swine veterinarian, Dr. Cara Haden, who trained 17 candidates across two sessions in June and July. MSU VDL reviewed the samples submitted during the pilot and provided feedback on their quality. Currently, the CSSC workgroup (consisting of members from MDARD, MSU VDL, MPPA, and MSU Extension) is meeting to review the results, assess the pilot, and make improvements to benefit the statewide rollout of this training track later this year.

### Traditional Trainer Track

The second track, the Traditional Trainer Track, will be designed for accredited veterinarians who are less experienced in swine health and need more training before they teach the curriculum.

While the specifics of this training track are still in development, the immersive content will be based on the CSSC training course provided by the Swine Medicine and Education Center and Iowa State University. Those participating in the Traditional Trainer Track would receive the same classroom instruction and hands-on training as the candidates they will be responsible for training in the future. Once they are proficient in collection themselves, these veterinarians can move forward to train their own candidates, just like the veterinarians who went through on-boarding as part of the Accelerated Trainer Track.

The goal is to be ready to roll out the Traditional Trainer Track in 2024 and host the sessions over two days at the MSU Swine Farm in East Lansing, Michigan. Also, as an additional incentive, funding sources to cover the training costs and any overnight accommodations are currently being explored, along with getting continuing education credits for veterinarians who participate.

As the planning for this training track continues, your feedback is essential. To help gauge interest in this track, schedule course availability, and more, we encourage any veterinarian who is interested in participating or learning more about this program to take a brief survey or directly reach out to MDARD’s Swine Program Manager, Dr. Daniel MacArthur, at MacArthurD4@Michigan.gov or 517-930-4661.

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Resilience does not just happen; it needs to be actively cultivated. Bringing the CSSC Program to Michigan will establish another tool (beyond emergency management exercises and Incident Command System trainings) to protect the swine industry and increase our state’s capacity for responding to a FAD outbreak. While responding to a FAD is undoubtedly a team effort, preparing for the next disease threat is an even more significant work of collaboration. With your help, we can continue to build our resiliency in the face of an animal disease outbreak, as well as the resiliency of the food supply chain.

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Nora Wineland, DVM, MS, DACVPM, is MDARD’s Director of the Animal Industry Division, and can be reached at WinelandN@Michigan.gov

Daniel MacArthur, DVM, oversees poultry and swine for MDARD’s Animal Industry Division, and can be reached at MacArthurD4@Michigan.gov
Michigan State University Veterinary Diagnostic Laboratory Awarded $1.1M to Lead Midwest Region in New National Disease Detection Partnership

By Kimberly Dodd, DVM, PhD, MS

The Michigan State University Veterinary Diagnostic Laboratory, a member of the National Animal Health Laboratory Network (NAHLN), has been selected to represent the Midwest region in a nationwide effort to enhance diagnostic capabilities for early detection of emerging diseases. This new partnership is funded through the United States Department of Agriculture (USDA) Animal and Plant Health Inspection Service (APHIS).

The NAHLN is a national network of 63 academic, state, and federal laboratories that serve as the first line of defense against high-consequence animal diseases. These laboratories work closely with USDA National Veterinary Services’ Laboratories reference laboratories based in Iowa and Plum Island. When the Plum Island operations move to the new National Bio and Agrodefense Facility (NBAF) in Kansas, the USDA mission will expand to include high-consequence zoonotic diseases such as Ebola and Rift Valley fever viruses. The new partnership, the NAHLN-NBAF Partnership to Improve Early Detection of Emerging Diseases, seeks to build stronger diagnostic detection capabilities for important diseases of animals and humans.

Five laboratories within the network were selected to identify diagnostic capacity needs in their respective regions, create a strategy to fill existing gaps, and develop new tests for emerging diseases. The scientist based at the MSU Veterinary Diagnostic Laboratory will lead initiatives across the eight Midwest laboratories and work collaboratively with the four scientists representing the other regions, the NAHLN Program Office and the NBAF. Together the five regional scientists will be responsible for evaluating local, regional, national, and international threats, and ensuring the NAHLN laboratories have the tools necessary to diagnose emerging animal and zoonotic pathogens.

“We are thrilled to announce this partnership,” said Dr. Rosemary Sifford, USDA’s Chief Veterinarian.
“Our goal is to ensure all network laboratories are poised to combat the threat of transboundary and emerging diseases to protect our nation's agricultural and food supply systems.”

Each of the host laboratories will have a specific focus related to their expertise and/or the region’s geographic location or agricultural commodities. The MSU Veterinary Diagnostic Laboratory will leverage its team’s broad diagnostic expertise to identify and implement emerging technologies to enhance disease detection capabilities.

“I am honored that the MSU Veterinary Diagnostic Laboratory was selected to represent our region in this exciting new national partnership. Most emerging human diseases arise from an animal source. The laboratories within the NAHLN test millions of animal samples every year, creating a unique opportunity to build more robust early detection capabilities to detect and identify both known and novel pathogens before they cause severe disease in animal or human populations,” says Dr. Kimberly Dodd, laboratory director at the MSU Veterinary Diagnostic Laboratory.

“Our laboratory has proven we can respond quickly to protect animal and public health in Michigan from emerging and reemerging diseases. In recent years, we provided rapid diagnostics for highly pathogenic avian influenza and SARS-CoV-2. We’re also actively partnering with stakeholders statewide to plan and prepare for potential incursions of foreign animal diseases. We look forward to hosting a regional scientist who will elevate and advance capacity and collaboration across the Midwest.”

The MSU Veterinary Diagnostic Laboratory will receive $1.1 million over four years to recruit a highly qualified and collaborative scientist with extensive expertise in infectious disease diagnostics.

In a separate APHIS partnership, the MSU Veterinary Diagnostic Laboratory was recently selected as the implementing partner for the USDA’s new Unusual Morbidity/Mortality Event program, established to help chase down diagnoses when initial diagnostic tests fail to identify a cause for significant illness or deaths in animals. The Laboratory’s role will be to administer and distribute funds or, as a NAHLN laboratory, to perform testing if requested.

The MSU Veterinary Diagnostic Laboratory, a service unit in the MSU College of Veterinary Medicine, is a premier, full-service, fully accredited veterinary diagnostic laboratory. On average, the Laboratory performs over one million tests per year for more than 300,000 animals. The Laboratory is a member of key federal networks charged with protecting animal and public health, and their core diagnostics, expert service, and innovative solutions have earned them over 10,000 clients in all 50 states and more than 25 countries.

Kimberly Dodd, DVM, PhD, MS, is the Director of the MSU VDL, and can be reached at doddkimb@msu.edu
EVENTS

MVMA Small Animal Series | Nutrition
Maryanne Murphy, DVM, PhD, DACVN
March 6, 2024 | 9:30am - 4:30pm

MVMA Small Animal Series | Orthopedics for General Practice
Clara S.S. Goh, BVSc, MS
April 10, 2024 | 9:30am - 4:30pm

MVMA Small Animal Series | Practice Management
Wendy S. Meyers, CVJ
May 8, 2024 | 9:30am - 4:30pm

Great Lakes Veterinary Conference
GLVC | June 11-13, 2024
Mission Point Resort
Mackinac Island, MI

Michigan Veterinary Conference
MiVetCon | November 1-3, 2024
DeVos Place, Grand Rapids, MI

MEETINGS

MVMA Board Meeting
GLAR | March 13, 2024

MVMA Board Meeting
Mission Point | June 11, 2024
In conjunction with GLVC

MVMA Board Meeting
Fall Meeting Date & Time | TBD

MVMA Board Meeting
GLAR | December 11, 2024
Thorpe Animal Hospital offers a full suite of specialty equipment and encourages advancement of surgical and diagnostic skills. Equipped with digital x-ray, digital dental x-ray, endoscope, ultrasound, surgical laser, therapy laser, and a full in-house laboratory, we provide our clients with state-of-the-art medicine. The staff, which includes five LVTs, are hardworking, dedicated, passionate, motivated, and love keeping current on veterinary education. We offer a VERY competitive salary depending on experience, motivation, and work ethic. Also offered are a $10,000 sign-on bonus, and benefits package. Benefits include health, dental, and vision insurance, pet insurance, pet discounts, profit-sharing, 401K retirement plan with up to a 3.5% match, CE and uniform allowances, paid licensing fees, professional membership fees, paid vacations, paid holidays, and more. Future leadership and ownership possibilities in a thriving area are here for the right individual. We do not have after-hours shifts or emergency rotations. If you would like to meet us and see how Thorpe Animal Hospital does things differently, please submit your resume to jwaterman@thorpevet.com.

Kalamazoo Animal Hospital strives to provide a workplace with a positive work culture and work-life balance. If you are seeking this type of culture our clinic is the place for you! We are currently seeking a full-time associate to join our team. We are a well-established and growing 3-doctor small animal practice in Southwest Michigan focusing on preventative health care and building lasting relationships with our clients and their pets. Our veterinary team prides themselves on practicing high-quality veterinary medicine, surgery and dentistry and our newly remodeled hospital is well equipped with in-hospital lab, digital x-ray and digital dental x-ray. We offer a competitive salary and benefits package, including a signing bonus and a schedule that helps maintain a positive work/life balance. We would love the opportunity to share with you more about our practice and the community we serve! Please reach out to Alyse at 269-381-1570 or visit www.kalamazooanimalhospital.com for more details about our practice. If you are interested in joining our team, please send your resume to kzooanimalhospitalmanager@gmail.com.

Friendship Animal Hospital is a privately owned small animal hospital in Kalamazoo, MI looking for a full-time or part-time associate veterinarian. New graduates are encouraged to apply. We offer high quality medicine and surgery with excellent quality of life, and we always go home on time! Our practice is equipped with digital radiography (including dental), ultrasound, therapeutic laser, patient monitoring and warming devices, IVF pumps, tonopen, and Antech lab services. We are open Monday through Friday, with no holidays or weekends required. All after hour and weekend emergencies are referred to local emergency hospitals. We heavily utilize our support team and employ LVTs and VAs. Our hospital offers a competitive salary with health care stipend, retirement plan, student loan assistance program, CE allowance, paid professional fees and vacation. Please email resumes to drbillings@friendshipanimaldoc.com or call 269-372-7900.

MedVet has an opportunity for a strong Medical Director (MD) at our Commerce, MI hospital. Everything Starts with Our Caregivers. Our doctors are eligible to become shareholders - a rare opportunity to have ownership and share in the growth and success of MedVet & VEI hospitals across the country. We offer all the benefits you expect, plus a Generous Signing Bonus, Competitive Compensation, Shareholder Opportunity, Student Loan Repayment Program and Paid Parental Leave. For more information about MedVet, please visit our website at www.medvet.com or to submit a confidential CV, email Brian Stearns at Brian.Stearns@medvet.com.

Traverse City's Oakwood Veterinary Hospital is seeking a full-time associate for our 4-doctor privately-owned small animal practice. Established in 1977, we moved into a new state of the art facility in 2019 equipped with digital radiography, full laboratory, and ultrasound. We have a high doctor to staff ratio to provide superior patient care and client communication. Our experienced and dedicated team shares a vision for top quality medicine, surgery, and dentistry while maintaining a fun work environment. A 4-day work week with no nights or after hours call provides ample opportunity to enjoy our beautiful resort area. We also act as a referral hub for a variety of specialists. Visit our website at www.oakwoodvethospital.com to learn more. Send résumé to Dr. Drew Henshaw at drhen2@aol.com or mail to 2421 Aero Park Dr, Traverse City, Michigan 49686.
NEW in 2024! We're northern Michigan's private family-owned Veterinary Urgent Care and Specialty Hospital. We innovate to drive care forward while ensuring employee wellness and job satisfaction. We are seeking a full-time or part-time Urgent Care Veterinarian or Boarded Specialist to join our team. We offer a competitive salary and benefits program, prioritize a flexible work schedule and work-life balance. If you want to live and work where others vacation, please consider joining our new and exciting work culture. Email resumes to info@omnivet.org.

Join our motivated team at Wixom Family Pet Practice! We are an independently owned, 2-doctor, small animal practice in Southeastern Michigan. We are AAHA accredited and are Fear Free certified with a focus on working together to form long-term client and patient relationships. We are looking for an experienced Associate Veterinarian to add their passion, skills, and education to our team. Must project a professional image and embrace the core values of the hospital while striving for the highest quality of care for our patients. We practice high quality medicine including: preventative care along with behavior and nutritional counseling, soft tissue surgery, dental surgery, high level diagnostic testing, team cooperation and training. The clinic offers Heska diagnostic machines, digital dental radiographs, access to abdominal ultrasound and echocardiogram, and Cuattro digital radiography system. Candidates would need to provide leadership and demonstrate strong interpersonal skills with the ability to communicate effectively with clients, CSR’s, technicians, doctors, referring veterinarians, hospital management and consulting professionals. We keep a high tech to doctor ratio so that you can be a doctor and are open Monday through Friday. We offer a base salary plus production and have full benefits available - Health Insurance, PTO, 401K with matching, Continued Education Allowance, Malpractice insurance and license fees, AVMA and VIN dues, short and long-term disability, maternity leave, and Personal Pet Care Credit. Please send resume and references to dfroster@familypetpractice.com.

Generous Hiring bonus for full-time candidates! Need work/life balance? Love surgery? Want to truly make a difference in the animal welfare field by helping to reduce animal overpopulation? The PAWS Clinic, a non-profit, affordable spay/neuter clinic in Taylor, Michigan, is seeking to add a full-time or part-time veterinary surgeon to our talented, mission-driven staff. A typical day is 7:30am – 4:30pm. No Fridays, evenings, weekends, or holiday work is required, and our veterinarians have very little direct contact with clients. Public Service Loan Forgiveness credit available working for our non-profit. Our lifesaving mission is to reduce pet overpopulation. We work with the public, shelter/rescues, and feral cat caregivers to make sterilization affordable and accessible. The environment is fast-paced, but our staff is well-trained (intubation, placing IV caths, testicular blocks, CPR, etc.), friendly, supportive, and work together as a strong team to achieve our mission. Our support staff to doctor ratio is a minimum 3:1. Our clinic adheres to strict, high-quality protocols to ensure the highest degree of patient safety and facility cleanliness. Our Salary is Competitive (up to $450/day), we offer allowances - each year towards licenses, memberships, or continuing education. Employee medical paid at 80% for full-time employees, PTO and wonderful work/life balance with a 4-day work week. The ideal candidate can perform 25+ spay/neuter surgeries per day, with a goal of 30+ over time. Interested? Contact Terra - terra@thepawsclinic.com.

Veterinary Associates LLC, located in Port Huron, MI is seeking a small animal veterinarian to join our energetic AAHA accredited team. We are in the beautiful Blue Water Area minutes away from Lake Huron. We are open to new grads or experienced veterinarians. You will thrive at our practice if you value healthy life/work balance, a family-like team culture, and dedication to providing the best possible medical care to patients and their owners. Our established practice is equipped with digital radiology, IDEXX in-house lab suite, as well as a dedicated and very friendly staff. Continuing education opportunities are offered. Our ideal candidate should be an enthusiastic team player with excellent communication skills and passion for caring for pets and their people. Please contact us at veterinaryassociates@comcast.net.

Five Points Animal Hospital is a privately owned hospital looking for a full-time or part-time associate veterinarian. New graduates are encouraged to apply and will be embraced with a supportive team and excellent mentorship. We are located in Albion, MI. We recently added a 2,700 square foot addition to our hospital including modern treatment and exam rooms with state-of-the-art equipment. Some of the services we provide are laser therapy, shockwave therapy, PEMF, Digatherm Thermal Imaging, Ultrasound and digital radiography in addition to full in-house lab with IDEXX. In addition to our board internal medicine service for our companions, we enjoy soft tissue and orthopedic surgeries. Albion is a beautiful college town, centrally located in lower Michigan with easy access to Chicago, Detroit, Grand Rapids and Lansing. If you love the outdoors there are many activities to choose from. We are looking for an associate that would like a long-term relationship. We offer potential partnership or buy-out for the right individual. Our hospital offers a competitive salary with health care benefits, retirement plan, CE allowance, paid professional fees and vacation. We are open 9 am - 5 pm, Monday - Friday with no after-hour emergencies. Please email resumes to ulliklotz@gmail.com or call 517-629-5549.

Animal Clinic of Holland is looking for an associate veterinarian, either full-time or part-time to join our team. We love to learn, collaborate, have a good time, while also striving to enjoy a good work/life balance. Two positions available. New graduates welcome! We are located in the beautiful town of Holland, MI, just minutes from the shores of Lake Michigan. The practice is a long-standing member of the community with an excellent reputation. We are a 3.5 doctor, privately-owned small animal practice working almost exclusively with dogs and cats. No emergency work required. Two of our current doctors are looking to reduce-
their hours in the future. We have a great support staff, some of whom have been with us for many years. We believe in team spirit, both at work and away from work, and prioritize a healthy work/life balance. Our practice equipment includes Avimark software, Imagyst, client communication platform, digital radiography, ultrasound, new therapy laser, Tonovet, In-house IDEXX CBC, chemistry and urine analyzers and more. The right candidate will be a motivated, team-oriented individual with good communication skills and a good work ethic. A strong interest in surgery is a plus. Mentoring is offered and encouraged. Pay is competitive, based upon experience. Salary range $100-130,000, negotiable based upon experience. Salary or Pro-Sal considered. Licensing fees and a yearly CE stipend are also included. A $20,000 signing bonus is being offered, half available upon signing and the remainder to be paid throughout the year. This can be discussed in detail upon inquiry and submission of a resume. Please submit inquiries to: suedvedogcat@gmail.com, 616-396-6543 attn Dr. Sue Vanderjagt. Cell 616-886-9452. Business location: 1106 Washington Ave. Holland, MI 49423, animalclinicofholland.com.

Enjoy work-life balance. No weekends, no on-call, no emergencies, flexible schedule. St. Johns Animal Clinic is a privately owned small animal clinic that has been serving the people of St. Johns and the surrounding community for over 50 years. We are located just 30 minutes north of Lansing and Michigan State University. We currently have two full-time and two part-time DVMs, four LVTs with two additional LVTs graduating in May of 2024. Seeking a full or part-time DVM to join our team. We are looking for a team player to practice collaborative medicine so we can work together to consistently provide the best care for our patients and their owners. We pride ourselves on practicing high-quality medicine, soft tissue surgery and dentistry; and our newly remodeled hospital is well equipped with in-hospital lab, digital x-ray, digital dental x-ray, and a large, dedicated surgery suite. We offer a competitive base salary with quarterly production bonuses, BCBS health care with vision and dental, paid time off, paid holidays, 401(k) with match, State of Michigan and DEA licensure, continuing education allowance including additional paid time off for CE, uniform allowance, professional liability insurance, and pet care benefits. Contact us at dcats@sbcglobal.net or 989-224-6495.

Kibby Park Animal Hospital in Jackson, Michigan is in search of an Associate Veterinarian to join our team! We are located in a great community with many biking and walking trails, recreational lakes, and a growing downtown area; it is an easy drive to Ann Arbor or East Lansing. We are a small animal and exotic pet practice, and our hospital has been in operation for over fifty years in the community. Our current practice owner is a past President of the MVMA, 2020 MSU CVM Distinguished Alumnus, and a member of VMG. An interest in practice ownership and business operations is encouraged but not a requirement for joining our hospital medical team. Our Associate Veterinarians are encouraged to utilize mentorship, teamwork, and continuing medical education to develop an ideal veterinary career with a-

strong emphasis on work-life harmony. Our medical support staff strive to support the veterinarians and to provide fantastic care for patients and clients alike. Excellent compensation and benefits package and a flexible schedule are offered to allow a fulfilling life outside of the workplace. Contact us at drowings@kibbypark.com or 517-787-5807.

If you love your work and understand the love in the human-animal bond, we love you, and you will always be supported here. Animal Medical Center in Lapeer, Michigan and Fohey Veterinary Hospital in Clio, Michigan is welcoming new associates and would LOVE a new grad or an established associate. Four-day work week, 20K sign-on bonus, Pro-Sal up to 130k annual. PT/FT at one or both hospitals, multiple flexible schedule options to accommodate the active veterinarian. Great surgical load for the interested individual as well as an owner willing to foster specific interests of a new hire such as surgical advancement, exotics, ultrasound and/or Eastern treatment therapies. No emergency rotation, fully equipped hospital including digital dental xray, ultrasound, surgical laser. Pay and benefits commensurate with skills and experience including Health Insurance. The challenging cases are always a team effort, we win together, we lose together. Dr. Deciechi loves to teach and learn and he promotes a warm clinic that enjoys diversity. Sense of humor is the most valued asset we desire. Please forward interest to our Practice Manager, Cord Johnson at cordmjohnson@comcast.net or fax to 810-686-4471.

Looking for a work family you love? Stop searching now! Click here and apply: https://dundeevetclinic.com/employment-opportunities/. You can also send us a CV at jobs@dundeevets.com. Amazing salary and benefits package along with a cooperative and team-based work environment you won’t believe until you see it. Our mission is to make veterinary medicine a field that is challenging, rewarding and sustainable. Our veterinarians work short weeks to stay fresh and enthusiastic. We are available to cover for each other when needed. We are looking to add another doctor to our team who loves doing doctor things and having fun! No after hours, weekends or overnight treatments; 9-5 workdays. Schedule is managed to go home on time. 3 days a week is full-time and qualifies for all benefits. CSRs, Assistants and technicians are trained to their capacity, average of 3-4 staff per DVM per shift so you can focus on diagnosing, prescribing and surgery.

Associate veterinarian with experience is required for a part time or full-time position in an active hospital in Detroit area, Michigan, with good payment and working hours. New graduates are welcomed. If interested, please send your application letter with resume to alfacare.sh@gmail.com.

Heritage Animal Hospital is a privately-owned, AAHA accredited, multi-doctor practice in southeast Michigan (Dundee), located approximately 20 minutes between Ann Arbor and Toledo. Our services include general medicine/preventative care, laparoscopy, flexible endoscopy, advanced orthopedics (TPLO), -
dentistry/oral surgery, acupuncture and reproductive services. Our support staff is highly trained and well-utilized in all areas of our hospital. Our doctors average 3-4 days a week and one Saturday a month, with no on call. We offer a competitive salary with benefits including health insurance, matching 401K and the equivalent of 4 weeks of PTO. Our mentorship plan for new graduates includes additional CE in dentistry and general surgery through Colorado State University, as well as leadership training in a formal setting. Our ideal applicant is not only focused on providing compassionate patient care and excellent customer service, but it is also essential that they enjoy working with others and collaborating to support a positive work culture for all employees. If interested, please contact Dr. Amanda Bolyard at dramanda@hahvet.com and visit our website at www.hahvet.com to learn more about our hospital.

Eastwood Veterinary Hospital is a small animal practice located in Eaton Rapids, Michiga near Lansing. We are seeking a full-time veterinarian to join our team. Our hospital is well supplied to help you practice medicine and surgery with the latest technologies and equipment. We have a welcoming, supportive work environment and enjoy collaborating on cases. This position will include routine surgery and appointments, and there is no on-call or after-hours emergency duty. We offer a competitive salary and benefits that include health and dental insurance, retirement plan and match and CE budget. Enjoy a four-day work week with paid holidays and paid time off for vacation and CE! Our clientele is friendly and our workspace is relaxed and pleasant. Interested candidates can review the hospital at www.eastvet.com. Please submit resumes or inquiries to Kristen Weber at contactus@eastvet.com.

The Animal Hospital of Kentwood, in Grand Rapids Michigan, is looking for a full or part-time veterinarian to join our team. We are a veterinarian owned practice for companion animals. We are dedicated to providing the best care for our patients through client education and empathetic communication. We currently are a two full time doctor practice with one doctor looking to transition into retirement. The right candidate should be excited to practice high quality medicine in a team-oriented environment. Typical full time schedule is four days a week (8:30am to 6pm) with one Saturday (8:30am to 1pm) a month alternating between doctors. Closed on Sunday. Appointments are scheduled as 20 and 40 minutes. Urgent cases are seen as the schedule allows, but true emergencies are referred to an emergency clinic. We have surgical/dental appointments three mornings a week that are rotated between doctors. Our licensed technician is responsible for anesthesia monitoring and dental cleaning. We are equipped with digital radiography, digital dental radiography, therapy laser, Avimark software, in-house IDEXX blood analyzers, and ultrasound. Experienced DVMs and new graduates are encouraged to apply. New grads would receive mentoring because we want our doctors to thrive. The ideal candidate would have a desire to learn and grow their skillset, have effective communication skills to build relationships with clientele, and be a cooperative team member and leader. Surgical and/or dental experience would be a plus. Interests in ultrasound and/or Traditional Chinese Veterinary Medicine would be welcomed. Compensation is negotiable and competitive. A signing bonus is offered based on experience. Other benefits include: paid licensing and liability insurance, health insurance cost offset, paid time for continuing education, three weeks of paid time off, pet care discounts, and available 401K savings program with match. Please send resume to scottdsmith211@gmail.com.

Busy, well established small animal clinic in Milford, Michigan looking for a veterinarian to join our team. We have in-house blood and urine laboratory equipment, digital radiography and dental, cold laser therapy and portable ultrasound. We offer base salary with production percentage, continuing education budget, health insurance and profit-sharing plan. Flexible scheduling for full or part-time. If interested, please send a resume to georgia@milfordveterinaryclinic.com.

We are seeking a veterinarian with an interest in integrative medicine to join our team here in the beautiful Upper Peninsula of Michigan. Currently our clinic is a small animal general practice and in the near future we will be expanding our horizons to become a mixed animal practice with the addition of integrative therapies including acupuncture and physical therapy. Our practice has a culture that is warm, welcoming, encouraging, and supportive. We strive to create work/life balance for all our staff – we want you to love coming to work. Know that your time and opinions are valued. Our compensation package includes a competitive annual salary, PTO, CE allowance, State and DEA license fees paid, uniform allowance, and personal pet discounts. Please reach out to Emily at powersveterinary@gmail.com or 906-498-2239 if you are interested in learning more about this opportunity to take a new path. Our area is often overlooked, but we invite you to consider the Upper Peninsula of Michigan. The UP has much to offer – year-round outdoor activities, historical places to explore, adventures to experience, and a community to welcome you.

Heritage Veterinary Hospital is seeking a full or part time veterinarian to join our three-doctor small animal companion practice in Genesee Township. We are located two miles south of the town of Genesee, MI and surrounded by multiple parks to bike, hike, and boat. Our practice offers boarding, grooming, and full small animal care including soft tissue and orthopedic surgery, digital radiology, ultrasound, CO2 laser surgery, Cold laser therapy, full in clinic Heska laboratory, and dentistry. The clinic is open five days a week and closed on the weekend with Wednesday afternoons off. We use a hybrid appointment system for scheduling and doctors have no after hour emergencies on the weekdays or on the weekend. Full time benefits include professional licenses and dues, BCBS healthcare, uniform allowance, continuing education allowance, profit sharing, pet care allowance, discounts for family members, paid holidays, paid vacations, a competitive salary based on experience (140K+), and a signing bonus. If interested, please send your resume to heritagevet@comcast.net.
Are you a passionate Veterinarian seeking a fulfilling opportunity in Grand Rapids, Michigan? Breton Village Animal Clinic, a privately owned small animal hospital boasting an impressive array of equipment and facilities, is excited to welcome a PT/FT DVM to our compassionate and collaborative team. We encourage doctors of all levels of experience to apply, and offer a formal mentoring program for new/recent graduates and plenty of support for experienced DVMs to build on their clinical interests. Our doctors collaborate constantly, fostering a positive and enjoyable work environment. You’ll never feel isolated—you’ll be part of a vibrant and supportive community of twelve doctors and over 90 dedicated support staff members between our two locations. We value your well-being and offer a flexible schedule with weekday hours at our Breton Village location and only one-in-four Saturdays at our primary location, Cascade Hospital for Animals. No Sunday or after-hours duties, allows you to enjoy a healthy lifestyle. We believe in recognizing your hard work and dedication. You’ll receive a highly competitive salary with production and milestone bonuses based on your experience. Additionally, we offer a signing bonus to welcome you to our team. We provide benefits such as vacation and sick pay, contributions for medical, dental, and vision insurance, a retirement plan, and reimbursements for professional licensure, membership dues (including VIN), and continuing education with paid time off. If you have a heart for animals, a dedication to compassionate veterinary medicine, and a desire to work in a smaller practice environment that feels like a close-knit family, we want to hear from you! Learn more about our practice, core purpose, and values at www.chfa.net. If you are ready to join our team and contribute your skills to our mission, please email your resume to thertel@chfa.net.

Associate Veterinarian wanted to join our small animal hospital in beautiful Northern Michigan. Potential future buy-in for the right candidate. Minutes from Torch Lake, Lake Bellaire, Lake Michigan and some of the best ski, mountain bike and snowmobile trails that Michigan has to offer. Enjoy practicing high quality medicine and surgery with a terrific support staff and wonderful clients. All in a small town setting just 45 minutes from Traverse City, Petoskey, and Gaylord. Enjoy all that Michigan has to offer with ample time off to enjoy it. Full time (3-4 day work week) or part-time considered with no emergency duty and flexible scheduling. Enjoy a good work-life balance! We are a full-service clinic equipped with digital radiography, IDEXX in-house lab equipment, laser therapy, and digital dental x-rays. We strive to provide the highest quality medical and surgical care. Looking for a team player with great communication skills, medical skills, and surgical skills. We offer a generous base salary with possible production-based bonus, 401K match, medical benefits, liability coverage, CE allowance, and professional dues paid. No after-hours emergency and flexible schedule. Contact Dr. Loretta Pantenburg, 110 S. Division Street, Bellaire, MI 49615, 231-533-6522, bellaireanimalhospital@gmail.com.

Patterson Veterinary Hospital in Clinton Township, MI is adding an associate veterinarian to our team! We are a small animal practice that has served the surrounding community, and multiple generations of clients, since opening in 1953. Our 5-doctor team is backed by a phenomenal support staff, which allows them to truly practice the best medicine. We’re also equipped with state-of-the-art tools that allow our doctors to work through all kinds of cases; these include ultrasound, digital radiology, endoscope, in-house lab, and more. We welcome DVMs of all experience levels (many of our doctors are Ross alums), especially those looking to grow professionally and build a strong rapport with clients! For new grads, we offer a strong mentorship program and the commitment to support/foster your veterinary skills. To make sure our DVMs all have an adequate work-life balance, we offer a flexible schedule and are closed on weekends! To apply, please send resumes to Libby Wallace at lwallace@heartlandvetpartners.com.

We are looking for a full or part-time veterinarian to join our team! Howell Animal Hospital is a busy, non-corporate, established practice. We provide a wide range of surgical procedures, dentals, laser therapy, acupuncture, TCVM, ultrasound, digital and dental x-ray and in-house labs. We are seeking an associate with effective communication skills to join our current veterinarians and skilled team. We welcome all levels of experience. Compensation includes salary commensurate with experience, healthcare, disability, malpractice insurance, professional dues, paid vacation, and 1 week paid CE. Please send resume to howellanimalhosp@gmail.com attention: Dr. Kettel.

Sheridan Animal Hospital is searching for a FT or PT veterinarian to join our team of 4 dedicated DVMs (experience ranging 3-30 years). We predominantly see small animals (with the occasional pocket pet) and are open to veterinarians of all experience levels including new graduates! We have a large facility, positive team, a dedicated surgery associate, a Fun Committee, and provide a wide range of services (average 100 patients/day between 2 doctors). Great benefits package plus NO weekends, holidays, or on-call/emergency hours! Contact Megan to learn more about the role/benefits: Mhenry@westernvetpartners.com.

Snow Animal Health Care is a privately owned clinic located in Eaton Rapids, Michigan. Eaton Rapids is a small town in Eaton County, near Lansing and Michigan State University (Go Green!). Our clinic takes care of Companion Animals only. Our building has just been expanded to a second level, we have plenty of room to learn and practice. We strive to give pets and clients great quality care. We value working as a team, and humor is very important to us! Mentorship is key to Snow Animal Health Care, as we all share in the treatment of our patients. We enjoy teaching new staff members and value continuing education. Our schedule is a 4-day work week for all staff members, and we are not open on the weekends. Benefits include a wage of $120,000, health care with an HSA, three weeks of paid time off, paid holidays (if on a weekday), including the day after Thanksgiving, SIMPLE IRA with a 3% match, licensure, continuing-
Are you tired of working for a corporation? Are you sick of working late nights and weekends with no work life balance? Are you a new or recent graduate looking for a clinic with strong mentorship and collaboration? Schoolcraft Veterinary Clinic in Schoolcraft, Michigan is a privately owned four-doctor, full service small animal practice that has provided care to clients in the Southwest Michigan area for more than 30 years. We are currently seeking additional veterinarians to join our team to help meet the needs of our thriving Veterinary Clinic. We strive to provide exemplary medical, diagnostic, therapeutic and surgical care to our patients. Most of our diagnostics are performed in-house so that we can provide our clients with timely information and the most beneficial treatment plans for their pets, all while being cognizant of their economic concerns. We believe strongly in teamwork and work life balance. Our practice is not just a job site; it is a career path where everyone is valued as a person, not a commodity. We strive to provide a fun, but professional work environment where employees can learn and collaborate while feeling respected and appreciated. To promote work life balance, we no longer offer late night appointments, we do not offer Saturday office hours and we do not see after-hour emergencies. We offer a generous benefits package and a flexible work schedule. Compensation will be based on experience and number of work hours per week. We are looking for motivated, compassionate, people persons who love working in and contributing to a team-focused, positive environment. Our dedication to the clients and their pets shines through in everything we do. If we sound like a good fit for you, please email Dr. Paula Sauer at office@schoolcraftvet.com.

LVTS AND VETERINARY ASSISTANTS

Veterinary Associates LLC is a small animal veterinary hospital seeking a full or part-time Licensed Veterinary Technician to join our AAHA accredited practice. We are a privately owned 1-doctor practice located in beautiful Port Huron, Michigan. We provide top-tier services to our patients and clients. If you enjoy a great work/life balance, we are the right practice for you! Continuing education, health insurance, 401k, weekends off, PTO, and employee discounts. We pride ourselves on a warm work environment and our compassionate care of every patient. Candidate must be a team player with an ability to multi-task. We welcome recent graduates and experienced candidates alike! Please send resumes to veterinaryassociates@comcast.net.

Heritage Veterinary Hospital is seeking a full-time licensed veterinary technician to join our small animal companion practice in Genesee Township. Our practice offers boarding, grooming, and full small animal care including soft tissue and orthopedic surgery, digital radiology, ultrasound, CO2 laser surgery, Cold laser therapy, full in-clinic laboratory, and dentistry. The clinic is open five days a week and closed on the weekend. Our practice does not have late night hours or emergency services. Full-time benefits include professional licenses and dues, BCBS health-care, uniform allowance, continuing education allowance, profit sharing, pet care allowance, discounts for family members, and a competitive salary based on experience. If interested, please send your resume to heritagevet@comcast.net. Part time also considered.

If you are a licensed veterinary technician seeking an opportunity to utilize and further develop your professional skills, Oakwood Animal Hospital (located in Kalamazoo, Michigan) may be exactly what you are looking for. One of our talented veterinary technicians attained the AVTCP certification while working with us! You will work collaboratively with all of our experienced veterinarians. We provide opportunities for anesthetic induction/monitoring, dentistry (including dental radiology) and cytology of fine needle aspirates. You will enjoy working with a full array of in-house laboratory equipment from IDEXX and Abaxis. We possess state-of-the-art radiology and ultrasound capabilities. Our Avimark software is user-friendly. Good communication skills and initiative will allow the candidate to be successful. Full-time benefits include health insurance, PTO, access to 401(k), paid holidays, continuing education allowance, professional dues, licensing, uniform allowance and discounted employee pet care. Part-time and relief applicants are also encouraged to apply. Competitive salary is commensurate with experience. Please respond to Lori Nemeth at oakwood@nva.com.

Oakwood Animal Hospital in Kalamazoo, Michigan is looking for a lead licensed veterinary technician. The successful candidate will mentor, guide and supervise our talented team of technicians. The lead technician will exemplify our standard of care as they accomplish this important work in a consistent and practical manner. The lead technician will work closely with all of our doctors and team leaders. As this is a key role at our hospital, full time benefits include health insurance, PTO, access to 401(k), paid holidays, continuing education allowance, professional dues, licensing, uniform allowance and discounted employee pet care. Competitive salary is commensurate with experience (up to $30/hour for a candidate with the necessary leadership and technical skill set for this position). Please respond to Lori Nemeth at oakwood@nva.com.

We are a busy, progressive and technologically advanced private small animal exclusive practice in Tecumseh, MI looking for a full or part-time LVT to join our team. We are well established in the community; having cared for patients and giving excellent client service for over 40 years. We offer competitive compensation including health insurance, retirement plan with company match, continuing education, flexible scheduling and paid vacation. If interested, please send your resume to cacjpy@yahoo.com.
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Buying or selling a veterinary practice? Rely on the expertise of Total Practice Solutions Group. See display ad in the printed issue. Contact us for a free consultation. We are happy to help. Contact Total Practice Solutions Group – Great Lakes at 440-933-4522 or kurt@tpsgsales.com.

Central Michigan. Gross $1.2M. Long standing and well-equipped practice. Facilities are well-maintained and practice is well staffed. Px is offered at $730K, RE is offered at $250K. Call for more information. (MI-9410) Contact Total Practice Solutions Group – Great Lakes at 440-933-4522 or kurt@tpsgsales.com.

Southern Michigan in Kalamazoo/Jackson Area. Gross $1.3M Long standing practice with strong staff. Call for more information. (MI-9350) Contact Total Practice Solutions Group – Great Lakes at 440-933-4522 or kurt@tpsgsales.com.

Northwest Detroit Suburbs. Gross almost $988K. Long standing and well-equipped practice in an excellent location. Facilities are well-maintained and practice is well staffed. Call for more information. (MI-9330) Contact Total Practice Solutions Group – Great Lakes at 440-933-4522 or kurt@tpsgsales.com.

Western Michigan Veterinary Hospital For Sale Motivated seller looking for buyer in western Michigan. $767K in collections for 2020. High potential property also for sale. Contact corey@omnipg-vet.com or 614-450-0993 for more information. (MIV102)

Small Animal Hospital located in Jackson County Michigan for sale. Real estate has a current appraisal of $330,000 and includes 2.69 acres with a 3844 sq. ft. hospital and a 1344 sq. ft. attached 3+bedroom living quarters. Grossing nearly $400,000/yr. with an average client transaction of $171 and High Net. Open M-F, 40 hr/wk (No weekends and no emergency calls). Willing to help with transition if desired. Asking appraisal value of $330,000 for everything. Please email practice4sale@currently.com.

We have the following used equipment for sale in Jackson County, Michigan. If interested please send all reasonable offers to Practice4sale@currently.com: Abaxis VS-2 (VetScan) Chemistry analyzer. Triac Multi-Function Centrifuge ( Urine, Blood, MHCT). Swift Model 1000-D Binocular Microscope. (100 Power). VMed Vet-Dop 2 Veterinary Doppler Blood Pressure Kit with Various sized cuffs. Two VSSI Model 121-0215-14 Ceiling Mounted Adjustable Surgical Lights (One Still in Box). Stainless Steel IV Stand. Engler Son-Mate Polisher/Scaler with portable water supply. VSSI Stainless Steel V-Top Adjustable Surgical Table with Extension. Ohio Anesthesia Machine (Oxygen/Nitrous) With Isoflurane Vaporizer. Suburban Surgical Stainless-Steel V-Top Adjustable Surgical Table. Two Kenmore 3.2 Cu. Ft. Mini Fridges with Freezer, Single Door. A Bank of Stainless Steel Kennels Measuring 8ft.Longx6.5ft. Ht.x28.25” Deep. (10 Kennels in total) Inside Dimensions are Four 16”x16”x28.25” (one 21.5”x16”x28.25”, Two 27.5”x27.5”x28.25”, One 33.5”x27.5”x28.25”. Two 46”x27.5”x28.25”. Universal-Easymatic 200 X-Ray Machine with Gridded Table. Two Exam room tables with stainless steel tops 45” long x 21.25” wide x 38” ht. (drawers underneath). Two Mayo Stainless Steel adjustable instrument stands. Henry Schein low profile walk-on scale 37” long x 20” wide x 2” ht. Two Exam room small wall counter cabinets with small hospital sinks and drawers. A Bank of Fiberglass Kennels with Aluminum doors Measuring 11’3” Long x 7’2” Ht. x 33” deep. (15 Kennels in total). Inside Dimensions are 14@24” Long x 24” ht. x 28” deep. One @ 20.5” long x 20.5” ht. x 25” deep. A Bank of Fiberglass Kennels with Aluminum doors Measuring 10’ long x 33.25” ht. x 28” deep. (3 Kennels Total). Inside Dimensions are 1@ 41” long x 33.25” ht x 28” deep. 2@ 36” long x 33.25” ht x 28” deep. 15 Waiting room chairs with Stainless Steel frames and Blue solid Plastic Backs and seats. Legal Filing Cabinets. Various Literature racks and wall cabinets for pharmaceuticals.

For sale - G E Logiq P5 ultrasound console model with 5 probes: E8C microconvex, C4 convex, L9 linear and 2 L12 linear. Doppler Power Doppler and color flow. Used in equine sports medicine in hospital, good working condition 7.500. wessumdvm@gmail.com

Central Michigan. Grossing $1.2M. Long standing practice. Well-staffed with an office manager and five other staff. Practice and real estate are offered at $980,000 (MI-9410) Contact Total Practice Solutions Group – Great Lakes at 440-933-4522 or kurt@tpsgsales.com.

Northwest Michigan Coast - Small Animal Veterinary Practice: 4,300 SF Facility with 2 Exam Rooms. Includes Real Estate. 2022 Gross Revenue $1.26 million (12% Growth over 2021). Excellent Location on Main Thoroughfare. Contact PS Broker: info@psbroker.com, (800) 636-4740, https://go.psbroker.com/MI9 (Listing MI9)

**RELIEF ADS**

Anvita Bawa, DVM | 517-927-6863

(MSU 08, MVMA Member) Available for SA GP or general surgery in southeast MI/metro Detroit. bawaanvi@gmail.com

Sharisse Berk, DVM | 248-851-0739

(MSU 95, MVMA Member) Available for SA relief or part-time work in Southeast MI.

Rhonda Bierl, DVM | 248-467-1987

(MSU 00, MVMA Member) SA relief work within one-hour of Highland. General medicine, soft tissue surgery, ultrasound experience. rhondabierl@gmail.com
Catherine Collins, DVM | 517-980-0528
(MSU 06, MVMA member) Offering case by case soft tissue & orthopedic surgical services as well as general surgery relief. Based in the greater Lansing area, travel negotiable. presspawsplc@gmail.com

Kenneth Corino, DVM | 248-217-5235
(MSU 94, MVMA Member) Small animal relief work. SE Michigan, medicine and surgery. corinodvm@aol.com

Bryan Cornwall, DVM, MBA | 248-227-0562
(MSU 89, MVMA Member) SA medicine and general surgery in SE Michigan; practice owner for 24 years. Great with clients and staff. bcornwalldvm@gmail.com

Sandra Danes, DVM | 734-649-8622
(MSU 97, MVMA Member) Available for SA general surgical relief services. Ann Arbor area. danesvet@outlook.com

Jennifer M. Dec, DVM | 248-224-1990
(MSU 04, MVMA Member) Small animal general practice and emergency relief. Surgery, ultrasound, and excellent communication skills. drrockstarbc@gmail.com

Julie K. Eberly, DVM | 616-218-8105
(MSU 93, MVMA Member) 13 years mixed practice. SA relief since 2016. Soft tissue, spay/neuter, dentistry, good communication and charting skills. W. Michigan/Lakeshore/Holland/GR. docjulie5@msn.com

Heather Ferguson, DVM | 734-260-3098
(MSU 90, MVMA Member) General SA medicine and surgery. Practice owner 25 years. SE Michigan. Excellent client and staff communication. fergdvm90@gmail.com

Lisa Harris, DVM | 616-204-2670
(MSU 89, MVMA Member) Available for relief in Grand Rapids/Lakeshore area. Experienced SA medicine and surgery, avian, exotics. Friendly, good communicator. drllharris@gmail.com

Sean D. Hughes, DVM | 517-552-0993
(MSU 76, MVMA Member) SE Michigan SA relief since 1999. Part-time, prefer SE; will travel for the right circumstances. hughesdv@aol.com

Sarah Jones, DVM | 248-910-1329
(Tuskegee University 12, MVMA Member) SA/urgent care relief in SE Metro Detroit area. 11 years of experience. Great with staff, communication, and record keeping. Will travel up to an hour from the Detroit area. sarah.hopkins12@yahoo.com

Cindy Kalicki, DVM | 313-291-2466
(MSU 94, MVMA Member) Eight years full-time, two years relief in SA general medicine/soft tissue surgery. SE MI, part-time or relief.

Lynn A. Lawitzke, DVM, DABVP | 517-474-3811
(Canine and Feline Practice) (MSU 82, MVMA Member) Small animal relief work. Based in Jackson. lynnlawitzkedvm82@gmail.com or lynnlawitzkedvm.com

Amy Lin, DVM | 269-888-4288
(MSU 97, MVMA Member) Quality SA relief medicine, surgery, and dentistry. High volume S/N proficient. Excellent communication, adaptable, amiable. SW MI Kalamazoo, Lakeshore area. dramyvetrelief.com, dramyvetrelief@gmail.com

Katherine O’Connor, DVM | 248-207-3528
(MSU 14, MVMA Member) Exceptional medicine when you need it most. SA/exotics/emergency relief. Based in Southeastern, MI. References available. MyReliefVet.com

Amy Peck, DVM | 231-557-4423
(MSU 97, MVMA Member) Available for relief in West MI/Grand Rapids/Lakeshore area. SA general medicine. Excellent communication skills, experienced and reliable. apeckdvm@gmail.com

Hollie Rebo, DVM | 517-673-8281
(MSU 06, MVMA Member) SA relief in metro Detroit/Downriver. Will consider travel. Excellent client education and surgery skills. PawsForReliefPC@gmail.com

Jim Sharp, DVM | 810-533-3598
(MSU 71, MVMA Member) SA relief, SE Michigan. Former practice owner. Proficient in sophisticated dentistry and medicine. Excellent communicator. vetseanarian@comcast.net

Margaret Sudekum, DVM | 616-676-2720
(MSU 89, MVMA Member) Available for part-time SA relief work in Grand Rapids and the surrounding areas. Good client communication skills. msdvm@sdkm.us

Linda Vanassche, DVM | 517-896-9086
(MSU 90, MVMA Member) SA medicine, surgery and emergency; excelling in dermatology and internal med. Travel negotiable more than 1½ hours from Lansing. Excellent written/verbal communication and record keeping. drmomma789@aol.com

Amy Wildrose, DVM | 517-420-5891
(MSU 00, MVMA Member) Experienced, proficient, dependable, and convivial. Available for SA relief or part-time. Based in Lansing. Willing to travel. a_wildrose@hotmail.com

Jennifer Zablotny, DVM | 517-896-9146
(MSU 97, MVMA Member) Experienced SA relief for SE and mid-Michigan. References. drzablotny@gmail.com

Catherine Collins, DVM | 517-980-0528
(MSU 06, MVMA member) Offering case by case soft tissue & orthopedic surgical services as well as general surgery relief. Based in the greater Lansing area, travel negotiable. presspawsplc@gmail.com
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