



Flub a low-stress veterinary visit

Check out this video from the dvm360.com vault

I'm pregnant.

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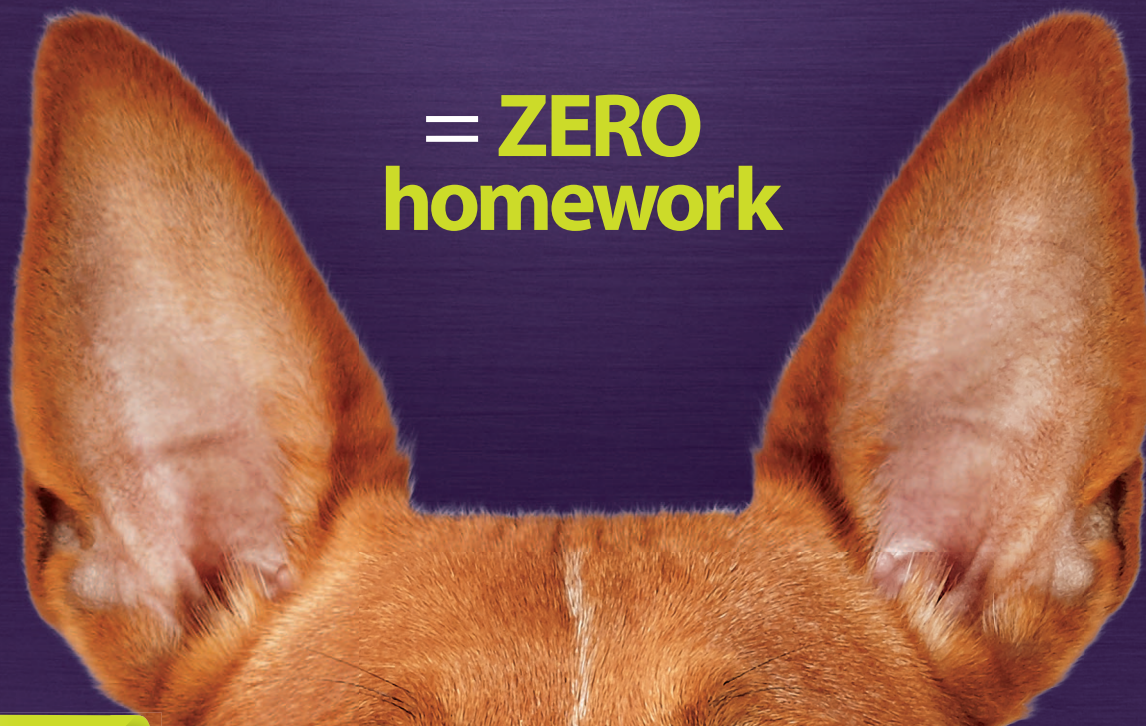
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**BIG
career
dreams?
Here's
help.** **p13**



3 active ingredients + 2 ears + 1-dose regimen

**= ZERO
homework**



NEW

Introducing



(florfenicol, terbinafine, mometasone furoate)
Otic Solution

the **only veterinarian-administered,**
single-dose regimen for canine otitis externa.

CAUTION: Federal (U.S.A.) law restricts this drug to use by or on the order of a licensed veterinarian. CONTRAINDICATIONS: Do not use in dogs with known tympanic membrane perforation. CLARO™ is contraindicated in dogs with known or suspected hypersensitivity to florfenicol, terbinafine hydrochloride, or mometasone furoate.

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OneDoseZeroHomework.com

See brief summary on page 06.

firstline®

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Mission

To inspire receptionists, credentialed technicians, practice managers and veterinary assistants to build strong relationships with coworkers, improve their communication skills and educate clients with confidence in order to enhance their contributions to a veterinary practice and maximize every patient's well-being.



How do pets spend their winter break? We've caught these holiday hounds redhanded on film. Check them out at **dvm360.com/winterbreak**.

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ASK SHAWN:

My secret pregnancy



***Q** I'm pregnant, and I'm afraid to tell my coworkers. But there are a few tasks as a veterinary technician I can't safely perform. How can I protect my baby without seeming like I'm slacking at work?*

The short answer: You need to tell your manager or practice owner immediately so you can avoid activities that may not be safe during pregnancy (you can find guidance here at dvm360.com/safepregnancy).

Next, when you're ready you may be able to engage your coworkers and rally them to your side. For example, for activities you can't do, like lifting, you may trade filing, paperwork or phone duties.

—Shawn

Got a question? Ask Shawn.

Shawn McVey, MA, MSW,

is a member of the *Firstline* and *Veterinary Economics* Editorial Advisory boards and CEO of McVey Management Solutions in Austin, Texas.

Email your questions for him to firstline@advanstar.com, then visit dvm360.com/mcvey to read McVey's advice on other hot topics.

See Shawn's full answer at dvm360.com/secretpregnancy or scan the QR code to watch now.



4 WAYS to flub a low-stress veterinary visit

It's as easy as pie to flub a low-stress veterinary visit, as revealed in this recently discovered low-stress training video from the dvm360 film vault. Dr. John Talmadge of Bigger Road Veterinary Center in Springboro, Ohio, guest stars in this classic educational film. Watch it now at dvm360.com/fearfreeflub.



Scan the QR code to watch now.

LIFE STAGES:

Senior care for senior cats

Ready to teach cat owners the care their senior kitties need?

The American Association of Feline Practitioners serves up some handouts and guides to make senior care simpler.

> **Handout on top 10 tips on caring for senior cats.**

Share with cat owners during their visits, post on social media and email it to your clients with senior cats.

> **Link to the AAFP's new web page on senior cats.**

Link to this page from your own website so pet owners are reading trusted pet care

information.

> **Cat owner brochure, Friends for Life.**

Use this step-by-step guide in your new pet packets or select specific tools to highlight during cats' regular wellness visits. For example, you can use the mature, senior and geriatric guides to talk about different stages that qualify as senior. Check it out at

dvm360.com/AAFPtools.

Caring for Your Senior Cat

We all want to grow old with grace and dignity and we want the same for our cats. As your cat's owner, there is much you can do to keep your senior cat healthy and happy. Check out our top 10 tips for caring for your senior cat.

1. Schedule Regular Kitty Check-ups

Feline experts agree that cats should see their veterinarian more often as they age. Every 6 months is a good guideline for checkups, even if your cat appears healthy. Six months is roughly equivalent to 2 years for a person—a lot can change in that time. Develop a close relationship with your cat's veterinarian while your cat is still healthy so they can really get to know your cat. As your cat ages your veterinarian will also recommend additional testing such as sampling blood and urine, as well as measuring blood pressure.

2. Set Your Senior Cat Up for Success at the Vet

Reduce the stress of veterinary visits by acclimating your cat to its carrier in advance of the appointment and making the carrier comfortable with soft, familiar bedding. Prepare a list of questions or concerns to ask your veterinarian. Find a veterinarian who is a member of the AAFP or part of its Cat Friendly Practice Program (CFPP) at www.catvets.com. CFPP designated practices have taken extra steps to assure they understand a cat's unique needs, have implemented feline-friendly standards, have made changes to decrease stress, and provide a more calming environment. To learn more about how you can benefit from visiting a CFPP, or search for one in your area, visit: www.catvets.com/cfcp.



4. Beware of Changes in Weight

Both weight gain AND unplanned weight loss require a visit to the veterinarian. While weight gain in mid-life can predispose to chronic diseases and shortened life span, weight loss in advanced age is usually a sign that something is amiss. Some of the most common diseases causing weight loss - hyperthyroidism, diabetes - occur with a normal or increased appetite. Gradual changes in weight are hard to notice, so your cat's weight is one of the most important examinations.

5. They're Not Just "Slowing Down"

Most owners assume that slowing down is just a sign of aging, but "slowing down" is often a sign of pain or discomfort. Arthritis, or degenerative joint disease, is the most common cause of slowing down in older cats and appropriate treatment can help them remain active and engaged. If your cat has been slowing down steps, does not jump like he used to, or avoids the litterbox, tell your veterinarian.



An idea that's full of beans

We recover our surgery patients in bean bags. They're easy to clean and they conform to the pet and keep the pet warm. Just remember, as with all recovering patients, it's critical for a trained technician to closely monitor the pet's recovery at all times.

—Carolyn Powell
Veterinary Technician, Manager
Dixie Veterinary Clinic, Dayton, Ohio



Want your own forms to share?
They're free at dvm360.com/forms. Download and share today!

In fine form ...

created binders with many of the dvm360 handouts to keep in the reception area and exam rooms. Clients love looking through them, and they often ask for copies to take home!

—Emilie Brucato
Practice Manager, Springtown Veterinary Hospital
San Marcos, Texas





MY BACK OFFICE BLUNDER:

People piddle in exam room 3

Maybe you're used to cleaning up pet piddle puddles at your veterinary practice, but what do you do when the pee *isn't* the pet's?

Back Office Blunders are true tales of unusual client encounters in the back office—and beyond. We recommend discussing this scenario at your next team meeting. Then discuss how you might handle this challenging client encounter.

By Rachael Simmons

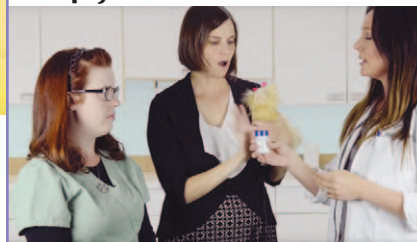
One afternoon a nicely dressed older lady came in with a tiny 4- to 6-week-old kitten. I escorted her into the exam room and the doctor went in to perform her exam. After several minutes had passed, the doctor poked her head out of the exam room and asked me to bring up the mop bucket to do a clean up. I went into the exam room to find this huge puddle on the floor. I looked at the kitten, then at the floor, then back at the kitten, wondering how it could have made such a mess. Shrugging, I mopped it up and left.

Minutes after the client left the doctor came out shaking her head and explained what happened. The puddle came not from the kitten, but the owner. She spread her legs a bit and just let loose! After doing her business, she looked straight at our doctor and said, "Well, at least I wasn't wearing nylons today."

Celebrity vaccine recommendations ...



Pet psychics ...



Alien babies ... and more!



Watch the Back Office Blunders caught on tape at

dvm360.com/backofficeblunders.



Do you have a Back Office Blunder to share? Or a solution to the one you've just read?

Email your stories and advice to firstline@advanstar.com. We'll pay **\$50** for every Back Office Blunder we publish.

CLARO™**(florfenicol, terbinafine, mometasone furoate)****Otic Solution**

Antibacterial, antifungal, and anti-inflammatory

For Otic Use in Dogs Only

CAUTION: Federal (U.S.A.) law restricts this drug to use by or on the order of a licensed veterinarian.**DESCRIPTION:**

CLARO™ contains 15.0 mg/mL florfenicol, 13.3 mg/mL terbinafine (equivalent to 15.0 mg/mL terbinafine hydrochloride) and 2.0 mg/mL mometasone furoate. Inactive ingredients include purified water, propylene carbonate, propylene glycol, ethyl alcohol, and polyethylene glycol.

INDICATIONS:

CLARO™ is indicated for the treatment of otitis externa in dogs associated with susceptible strains of yeast (*Malassezia pachydermatis*) and bacteria (*Staphylococcus pseudintermedius*).

DOSAGE AND ADMINISTRATION:**Shake before use.**

CLARO™ should be administered by veterinary personnel.

Administer one dose (1 dropperette) per affected ear. The duration of effect should last 30 days.

1. Clean and dry the external ear canal before administering the product.

2. Verify the tympanic membrane is intact prior to administration.

3. Remove single dose dropperette from the package.

4. While holding the dropperette in an upright position, remove the cap from the dropperette.

5. Turn the cap over and push the other end of the cap onto the tip of the dropperette.

6. Twist the cap to break the seal and then remove cap from the dropperette.

7. Screw the applicator nozzle onto the dropperette.

8. Insert the tapered tip of the dropperette into the affected external ear canal and squeeze to instill the entire contents (1 mL) into the affected ear.

9. Gently massage the base of the ear to allow distribution of the solution.

10. Repeat with other ear as prescribed.

Cleaning the ear after dosing may affect product effectiveness.

CONTRAINDICATIONS:

Do not use in dogs with known tympanic membrane perforation (see **PRECAUTIONS**).

CLARO™ is contraindicated in dogs with known or suspected hypersensitivity to florfenicol, terbinafine hydrochloride, or mometasone furoate.

WARNINGS:

Human Warnings: Not for use in humans. Keep this and all drugs out of reach of children. In case of accidental ingestion by humans, contact a physician immediately. In case of accidental skin contact, wash area thoroughly with water. Avoid contact with eyes. Humans with known hypersensitivity to florfenicol, terbinafine hydrochloride, or mometasone furoate should not handle this product.

PRECAUTIONS:

Do not administer orally.

The use of CLARO™ in dogs with perforated tympanic membranes has not been evaluated. The integrity of the tympanic membrane should be confirmed before administering the product. Reevaluate the dog if hearing loss or signs of vestibular dysfunction are observed during treatment.

Use of topical otic corticosteroids has been associated with adrenocortical suppression and iatrogenic hyperadrenocorticism in dogs (see **ANIMAL SAFETY**).

Use with caution in dogs with impaired hepatic function (see **ANIMAL SAFETY**).

The safe use of CLARO™ in dogs used for breeding purposes, during pregnancy, or in lactating bitches has not been evaluated.

ADVERSE REACTIONS:

In a field study conducted in the United States (see **EFFECTIVENESS**), there were no directly attributable adverse reactions in 146 dogs administered CLARO™.

To report suspected adverse drug events and/or obtain a copy of the Safety Data Sheet (SDS) or for technical assistance, contact Bayer HealthCare at 1-800-422-9874.

For additional information about adverse drug experience reporting for animal drugs, contact FDA at 1-888-FDA-VEIS or online at <http://www.fda.gov/AnimalVeterinary/SafetyHealth>.

PHARMACOLOGY:

CLARO™ Otic Solution is a fixed combination of three active substances: florfenicol (antibacterial), terbinafine (antifungal), and mometasone furoate (steroidal anti-inflammatory). Florfenicol is a bacteriostatic antibiotic which acts by inhibiting protein synthesis. Terbinafine is an antifungal which selectively inhibits the early synthesis of ergosterol. Mometasone furoate is a glucocorticosteroid with anti-inflammatory activity.

MICROBIOLOGY:

The compatibility and additive effect of each of the components in CLARO™ solution was demonstrated in a component effectiveness and non-interference study. An *in vitro* study of organisms collected from clinical cases of otitis externa in dogs enrolled in the clinical effectiveness study determined that florfenicol and terbinafine hydrochloride inhibit the growth of bacteria and yeast commonly associated with otitis externa in dogs. No consistent synergistic or antagonistic effect of the two antimicrobials was demonstrated. The addition of mometasone furoate to the combination did not impair antimicrobial activity to any clinically significant extent.

In a field study (see **EFFECTIVENESS**), at least 10 isolates from successfully treated cases were obtained for *S. pseudintermedius* and *M. pachydermatis*.

EFFECTIVENESS:

In a well-controlled, double-masked field study, CLARO™ was evaluated against a vehicle control in 221 dogs with otitis externa. One hundred and forty six dogs were treated with CLARO™ and 75 dogs were treated with the vehicle control. All dogs were evaluated for safety. Treatment (1 mL) was administered once on Day 0 to the affected ear(s). Prior to treatment, the ear(s) was cleaned with saline. The dogs were evaluated on Days 0, 7, 14, and 30. Blood work and urinalysis were obtained on Day 0 pre-treatment and Day 30 at study completion. Four clinical signs associated with otitis externa were evaluated: erythema, exudate, swelling, and ulceration. Success was based on clinical improvement at Day 30. Of the 183 dogs included in the effectiveness evaluation, 72.5% of dogs administered CLARO™ solution were successfully treated, compared to 11.1% of the dogs in the vehicle-control group ($p=0.0001$).

ANIMAL SAFETY:

In a target animal safety study, CLARO™ was administered aurally to 12-week-old Beagle puppies (4 dogs/sex/group) at 0X, 1X, 3X, and 5X the recommended dose once every 2 weeks for a total dosing period of 28 days (3 times the treatment duration). No clinically relevant treatment-related findings were noted in hearing tests, body weight, weight gain, or food consumption. CLARO™ administration was associated with post-treatment ear wetness or clear aural exudate, increased absolute neutrophil count, decreased absolute lymphocyte and eosinophil counts, suppression of the adrenal cortical response to ACTH-stimulation, decreased adrenal weight and atrophy of the adrenal cortex, increased liver weight with hepatocellular enlargement/cytoplasmic change, and decreased thymus weight. Other potentially treatment-related effects included mild changes to AST, total protein, inorganic phosphorus, creatinine, and calcium.

STORAGE INFORMATION:

Store between 20°C-25°C (68°F-77°F), excursions permitted 10°C-30°C (59°F-86°F).

HOW SUPPLIED:

CLARO™ solution is supplied in a single-use dropperette in a blister. Each dropperette contains one 1 mL dose. CLARO™ is available in cartons of two, ten, or twenty dropperettes.

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Bayer



Get happy @ work: A doggone good lunch

This veterinary team member says her lunch has gone to the dogs—and that's just the way she likes it.

At lunch break I sit with the dogs who are stressed out. They actually nap on my lap and are better after lunch for the rest of the stay. Here's a little Jack Russell named Chester who came in with a temperature. He wasn't able to settle down, so I sat with him until he was more calm. I actually crawled into his cage, and he crawled into my lap.

—Gail Jackson
Dixie Veterinary Clinic
Dayton, Ohio



Get paid for your GREAT IDEA

Have a pearl to share?
Send it to **firstline@
advanstar.com**.

We'll pay **\$50** for
every tip we publish.



(Mini) Team Meeting in a Box

The scoop on poop: *Lock in fecal exams*

Only have a few minutes to train? Turn your educational team meeting into a quick team building workshop that offers real, instant results for your practice.

Whether you're a scrapbooker or a savvy social media diva, you can use your skills to improve pets' health. Use these tips and tools to turn your next team meeting into an interactive workgroup (think Pinterest activities) that helps you boost compliance and educate pet owners (and team members too)!

Before the meeting

Collect any supplies for the activities at dvm360.com/FecalTeamMeeting. For example, if you choose the scrapbooking activity to build an educational bulletin board in your practice, you'll want to supply scrapbooking materials (or invite team members to bring their own). If you opt for a social media planning

session, you might want to plan to hold meetings at a computer, where you can compose your Facebook and Twitter posts and schedule them in a social media tool, like Hootsuite.

We recommend you begin by reviewing your fecal test client compliance numbers, if you track them. (Oftentimes this data is available in your practice management software if you're a paperless practice.) How many clients complied with your recommendations for fecal exams? Share these numbers with your team. And remember, if the answer isn't 100 per-

cent, you still have a little room to improve! If you're doing a great job locking in compliance, we still recommend the online activities to reinforce the value of fecal exams to your clients.

We don't use practice management software. What now?

If you need a little help here, try this tip. A week before your meeting, print the tracking tool at dvm360.com/FecalTeamMeeting. Ask all of your customer service representatives to record the data on every patient your practice sees. It only takes a minute, and if you post the form at the front desk, where it's easy to see and record, you can get a snapshot of fecal compliance.

Next step: Download the free activities and training scripts online to guide your workshop. And have fun!



Ready to get started?

Visit dvm360.com/teammeeting for these free tools and more.

Find it all here
dvm360



3 food-free + Fear-Free tips

Looking for ways to relax your patients that don't involve stuffing them with treats? We've got you covered.

By Mikkel Becker, CPDT

This year my pug, Bruce, needed treatment for a thymoma at a specialty hospital in Seattle. The department we were in dealt mostly with special testing and surgeries where food is, for the most part, prohibited.

This is where comfort items can provide some relief. Bruce had a stuffed horse with my daughter Reagan's scent on it that traveled with him during his procedures, surgery and recovery.

1. TRY COMFORT ITEMS

These can be useful as a toy reward, snuggle buddy and comforting companion while away from home.

Looking for toy recommendations? Here are a few for starters:

> **Scents of Security** is a toy you can fill with articles containing the animal's familiar scents.

> **Snuggle Puppy** has an automated heartbeat and warming packs.





Smart is... 6-in-1 protection.



Take parasite protection further
with a broad coverage chewable dogs will love.

**sentinel
spectrum**
(milbemycin oxime-lufenuron-praziquantel)



HEARTWORMS



ROUNDWORMS



HOOKWORMS*



WHIPWORMS



FLEAS†



TAPEWORMS

Trifexis¹
(spinosad + milbemycin oxime)



HEARTWORMS



ROUNDWORMS



HOOKWORMS



WHIPWORMS



FLEAS

Heartgard²
Plus
(ivermectin/pyrantel)



HEARTWORMS



ROUNDWORMS



HOOKWORMS

Offer chewy, tasty, and easy coverage against both internal
and external parasites. To order, contact your distributor or call
your Virbac representative at **1-844-4-VIRBAC (1-844-484-7222)**.



Dogs should be tested for heartworm prior to use. Mild hypersensitivity reactions have been noted in some dogs carrying a high number of circulating microfilariae. Treatment with fewer than 6 monthly doses after the last exposure to mosquitoes may not provide complete heartworm prevention. Please see full product label for more information, or visit www.virbacvet.com.

See brief summary on page 10.

References: 1. Trifexis® [product label]. Indianapolis, IN: Elanco; 2014.
2. Heartgard® Plus [product label]. Duluth, GA: Merial Inc; 2011.

* *A. caninum*.

† Prevents flea eggs from hatching; is not an adulticide.

**sentinel
spectrum**
(milbemycin oxime-lufenuron-praziquantel)

Virbac

Shaping the future of animal health

(milbemycin oxime-lufenuron-praziquantel)

Caution
Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian.

Indications
SENTINEL® SPECTRUM® (milbemycin oxime/lufenuron/praziquantel) is indicated for the prevention of heartworm disease caused by *Dirofilaria immitis*; for the prevention and control of flea populations (*Ctenocephalides felis*); and for the treatment and control of adult roundworm (*Toxocara canis*, *Toxascaris leonina*), adult hookworm (*Ancylostoma caninum*), adult whipworm (*Trichuris vulpis*), and adult tapeworm (*Taenia pisiformis*, *Echinococcus multilocularis* and *Echinococcus granulosus*) infections in dogs and puppies two pounds of body weight or greater and six weeks of age and older.

Dosage and Administration
SENTINEL SPECTRUM should be administered orally, once every month, at the minimum dosage of 0.23 mg/lb (0.5 mg/kg) milbemycin oxime, 4.55 mg/lb (10 mg/kg) lufenuron, and 2.28 mg/lb (5 mg/kg) praziquantel. For heartworm prevention, give once monthly for at least 6 months after exposure to mosquitoes.

Dosage Schedule				
Body Weight	Milbemycin Oxime per chewable	Lufenuron per chewable	Praziquantel per chewable	Number of chewables
2 to 8 lbs.	2.3 mg	46 mg	22.8 mg	One
8.1 to 25 lbs.	5.75 mg	115 mg	57 mg	One
25.1 to 50 lbs.	11.5 mg	230 mg	114 mg	One
50.1 to 100 lbs.	23.0 mg	460 mg	228 mg	One
Over 100 lbs.	Administer the appropriate combination of chewables			

To ensure adequate absorption, always administer SENTINEL SPECTRUM to dogs immediately after or in conjunction with a normal meal.
SENTINEL SPECTRUM may be offered to the dog by hand or added to a small amount of dog food. The chewables should be administered in a manner that encourages the dog to chew, rather than to swallow without chewing. Chewables may be broken into pieces and fed to dogs that normally swallow treats whole. Care should be taken that the dog consumes the complete dose, and treated animals should be observed a few minutes after administration to ensure that no part of the dose is lost or rejected. If it is suspected that any of the dose has been lost, redosing is recommended.

Contraindications
There are no known contraindications to the use of SENTINEL SPECTRUM.

Warnings
Not for use in humans. Keep this and all drugs out of the reach of children.

Precautions
Treatment with fewer than 6 monthly doses after the last exposure to mosquitoes may not provide complete heartworm prevention.
Prior to administration of SENTINEL SPECTRUM, dogs should be tested for existing heartworm infections. At the discretion of the veterinarian, infected dogs should be treated to remove adult heartworms. SENTINEL SPECTRUM is not effective against adult *D. immitis*.

Mild, transient hypersensitivity reactions, such as labored breathing, vomiting, hypersalivation, and lethargy, have been noted in some dogs treated with milbemycin oxime carrying a high number of circulating microfilariae. These reactions are presumably caused by release of protein from dead or dying microfilariae.

Do not use in puppies less than six weeks of age.
Do not use in dogs or puppies less than two pounds of body weight.

The safety of SENTINEL SPECTRUM has not been evaluated in dogs used for breeding or in lactating females. Studies have been performed with milbemycin oxime and lufenuron alone.

Adverse Reactions
The following adverse reactions have been reported in dogs after administration of milbemycin oxime, lufenuron, or praziquantel: vomiting, depression/lethargy, pruritus, urticaria, diarrhea, anorexia, skin congestion, ataxia, convulsions, salivation, and weakness.

To report suspected adverse drug events, contact Virbac at 1-800-338-3659 or the FDA at 1-888-FDA-VETS.

Information for Owner or Person Treating Animal
Echinococcus multilocularis and *Echinococcus granulosus* are tapeworms found in wild canids and domestic dogs. *E. multilocularis* and *E. granulosus* can infect humans and cause serious disease (alveolar hydatid disease and hydatid disease, respectively). Owners of dogs living in areas where *E. multilocularis* or *E. granulosus* are endemic should be instructed on how to minimize their risk of exposure to these parasites, as well as their dog's risk of exposure. Although SENTINEL SPECTRUM was 100% effective in laboratory studies in dogs against *E. multilocularis* and *E. granulosus*, no studies have been conducted to show that the use of this product will decrease the incidence of alveolar hydatid disease or hydatid disease in humans. Because the prepatent period for *E. multilocularis* may be as short as 26 days, dogs treated at the labeled monthly intervals may become reinfected and shed eggs between treatments.

Manufactured for: Virbac AH, Inc.
P.O. Box 162059, Ft. Worth, TX 76161

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02/15

2. CONSIDER NATURAL SUPPLEMENTS

Two products that may work for both cats and dogs are Zylkene, a milk byproduct, and Anxitane, containing L-Theanine, an amino acid naturally found in green tea leaves.

You may also try pheromone products in the exam room using dispensers or spritzed on key areas like the animal's crate or a towel placed on the exam table to invite relaxation.



3. USE PET MASSAGE

Can you trick pets into thinking the V-E-T word really means spa? A gentle pet massage might be the first step. Massage and petting are profoundly impactful on animals who enjoy being touched. This can be a great way to calm pets pre-exam with a short massage session. Animals are almost always more relaxed and receptive to care after this care.

It's also useful as a distraction during exams. For example, a person the dog or cat is comfortable with can pet while another person integrates their hands into the touch. This helps allow for examination or procedures, such as palpating the heart.



For more low stress tips, visit
www.dvm360.com/fearfree.

PHOTOS COURTESY OF MIKKEL BECKER/OTHER ART IN-HOUSE

Happiness is a reasonable wait

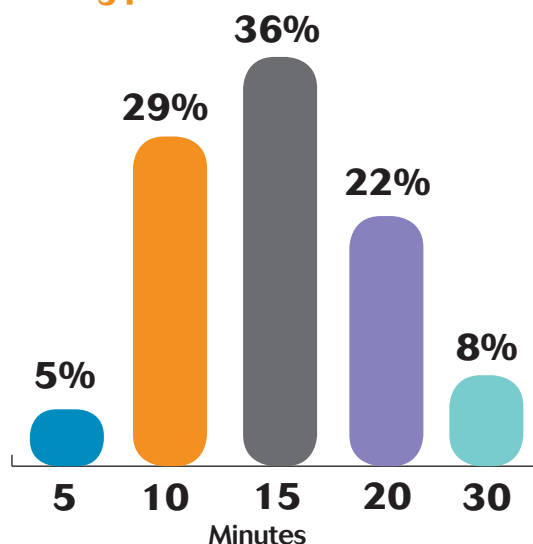
Remember Charlie Brown's friend Linus? He was famous for saying, "Happiness is a warm blanket." But for many pet parents, the source of true happiness is a short wait at their pet's veterinary visit.

A recent VHMA Insider's Insight survey polled respondents about how waiting is addressed in their practices. The majority—59 percent—reported that the practice doesn't track client wait times.

How long is too long?

According to a national study of the veterinary industry, patients wait an average of 17 minutes before seeing a veterinarian. VHMA respondents were asked how long their clients will wait before their patience is tested. The results: respondents reported their clients have a low wait time threshold. Seventy percent reported that after less than 15 minutes of waiting, clients become irritated.

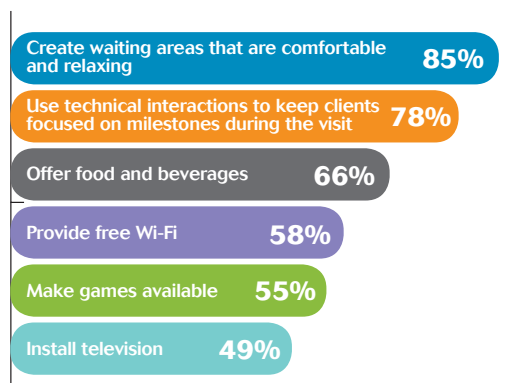
When does wait time reach a boiling point for clients?



Creating a stress-free environment

Almost all practices surveyed have introduced strategies to reduce waiting room stress. Ninety percent believe honesty is the best policy. These respondents strive to inform and update clients about delays that affect scheduled appointments.

Tactics practices use to reduce stress:



Seventy-four percent noted that if a strong bond between the client and veterinarian exists, clients are more likely to abide long wait times.

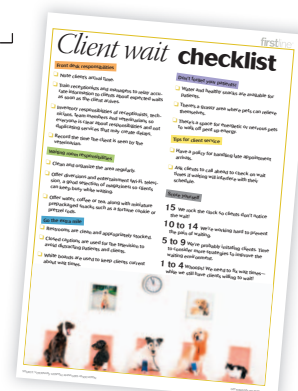
Waiting may be hard, but with proactive measures in place practices can reduce stress levels for clients—and for patients.



Christine Shupe, CAE, is the executive director of the Veterinary Hospital Managers Association. The association is dedicated to serving professionals in veterinary management through education, certification and networking.

METHODOLOGY

A recent VHMA Insider's Insight survey polled respondents about how waiting is addressed in their practices. 220 VHMA members responded.



Visit dvm360.com/VHMA for a quick quiz to test your team on your practice's wait times.

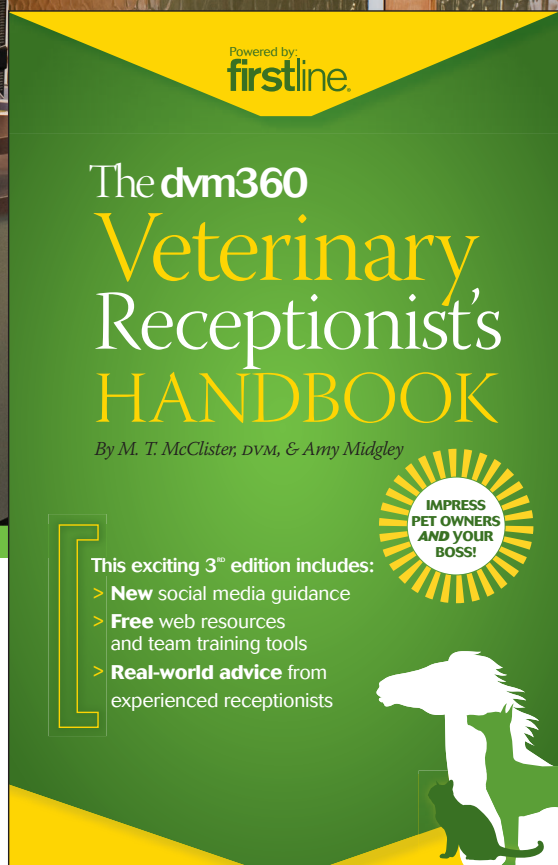


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otitis

Otitis externa management: You could be doing it wrong

From "that smell" to potential ear hematomas and ablations, otitis externa can be a tricky clinical challenge. **p02**



A special monthly package designed to help boost client compliance and make it easy for your team to educate pet owners about regular pet wellness care.

TOOLS:

Practice tips

- >> Manage expectations
- >> Do your diagnostics
- >> Don't bail. Schedule the freaking rechecks.

p04

Feline focus

Expert Q&A: How do I manage ceruminous otitis in cats?

p05

Client handouts

- >> What did you say? Helping clients understand hearing loss
- >> All ears over here: What's otitis externa?

p06

Pictorial guide

Low-stress ear cleaning gets it right the first time

p08

Expert audio clips

- >> Dogs lie about ear disease
- >> Undertreating ears is (partly) your fault
- >> Ear problems so frustrating you want to ... do what?
- >> Quit plucking that hair.

p09

Takeaways

Five final tips to manage your nastiest ear cases

p11

Otitis externa management:

You could be doing it **WRO**

From “that smell” to potential ear hematomas and ablations, otitis externa can be a tricky clinical challenge. Wayne Rosenkrantz, DVM, DACVD, answers some of the most common questions about his approach to the management of this odorous condition.

ng

Q. To clean or not to clean ears in the clinic?

A. Cleaning ears is important, and most cases of otitis externa require some degree of ear cleaning or flushing before therapy. Excess debris and purulent material left in the ear prior to therapy can reduce the efficacy of your therapy. In addition, without cleaning you often are unable to perform a complete examination of the ear canal.

Q. What if you just can't see that tympanic membrane?

A. If the tympanic membrane cannot be visualized, then perform further cleaning and flushing. Most optimally, this should be done under sedation or anesthesia and may require a combination of tube flushing, ear loops and video otoscopy. If the tympanic membrane is documented to be ruptured or you suspect it is ruptured, this can influence the type of therapy that is applied into the ear canal. Certain cleansers and antimicrobials are more contraindicated when the tympanic membrane is ruptured and more likely to create an ototoxic reaction.

Q. Should we do culture and sensitivity testing on newly diagnosed cases?

A. I do not perform a culture and sensitivity in every case of otitis externa. I start with my otoscopic and cytologic examinations and my review of the history of medications previously used to base my decision on whether culture and sensitivity testing is indicated.

Culture and sensitivity testing does not always isolate the entire bacterial population or yield accurate sensitivity testing depending on the site or level in the ear from where the sample was taken. When I do take samples, I like to put a small amount of sterile saline solution in the ear, massage the canal, aspirate a small amount of the fluid out, and then use this fluid to do my culture and sensitivity testing.

Q. What are you finding are the most common pathogens causing infection in otitis externa cases these days?

A. The most common pathogens in dogs include yeasts (*Malassezia* species) and bacteria (*Staphylococcus*, *Pseudomonas*, *Escherichia* and *Proteus* species).

Q. What do you experience as the biggest obstacle for successful outcome of treating otitis externa?

A. Controlling the underlying primary cause for the otitis. If you identify and control the primary disease, then success is more common. Early identification and control of infection and underlying disease is critical to avoid more chronic proliferative changes.

Another important issue is owner compliance and getting clients to properly treat and medicate the ears.

Q. What are some common underlying causes of chronic otitis externa?

A. Both atopic dermatitis and adverse food reactions are common primary diseases for otitis externa. After looking at the history and physical examination findings, I may pursue one of these diseases more than the other. For example, adverse food reaction cases are more commonly year-round and may also have a concurrent history of gastrointestinal abnormalities.

Q. How important do you think it is to caution owners about the possibility of recurrence of otitis externa?

A. It is extremely important. This is particularly true when you are dealing with underlying primary diseases that are not well-controlled. Without proper control and management of the underlying disease, recurrences are highly likely. In clinical practice this is most commonly due to poorly controlled atopic dermatitis or adverse food reaction cases.



Tips to keep otitis from being a total pain in the ear? **Sounds good.**

Ear infections totally suck (and um, stink, while we're at it). Get clients on board with better care, and together you'll make otitis *ear-relevant*. *By Kathryn Primm, DVM*

We all know about ear infections and we have all had clients frustrated because of them. People like speedy resolutions and they think that if you are a good vet, you'll just "fix" it. But that's neither *ear* nor there. Turn otitis cases from a pain in the ear into a place where your care and compassion can really shine with these three tips.

1 Manage expectations.

Make sure that owners know that ear infections are no picnic. At the very first visit for the ears, warn clients that you are probably beginning a journey together. And no, not a walk in the park. Explain that there can be underlying factors for ear itching and inflammation that can only be managed, not cured—but that you are their partner in the process.

2 Do your diagnostics.

Offer to do all the suggested diagnostics: ear cytology, culture and sensitivity, etc. beginning at the initial visit. Clients might not agree to the entire workup at the start, but you are planting the seed right away. Make the

standard full workup a part of your treatment plan and make sure all staff members understand those recommendations. Each step should be explained and every team member needs to be aware of the rationale behind the steps in order to answer client questions.

3 Don't bail. Schedule the freaking rechecks.

Make sure that you follow up with owners about their dog's response to treatment. Don't just leave them to their own devices—an easy thing to do when it comes to ear visits—which results in you feeling like a careless and ineffective veterinarian and veterinary team. **DO NOT DO THAT.** You need to know if the ears responded to your first-line treatment plan and you need a maintenance schedule. Build a recheck visit into the cost of your initial otitis examination so that when you call you can explain that follow-up was so crucial that it was already included in the price of the first visit. The maintenance plan, which can include applying drops or cleaning, helps the dog in multiple ways because it forces the owner to really look in the ears and to take ownership of some of the success (or failure) of your treatment plan.

Don't forget about the cats!

Although you probably aren't seeing many cats with ear disease, check out this Q&A with Dr. Paul Bloom for more on otitis in cats.

Q I frequently see cats presented for wellness evaluations that have unilateral or bilateral ceruminous otitis externa. These cats' aural pruritus ranges from none to severe; most cats have minimal or no pruritus. Cytologic examination often reveals *Malassezia* species. Please comment on this problem—the cause, the therapy, and your views.

A Regarding the cause and treatment of ceruminous otitis externa in cats, remember that otitis externa, regardless of the type of discharge, is a sign of an underlying disease. So you need to consider both primary and perpetuating factors.

Primary factors—such as *Otodectes* species, cutaneous adverse food reactions, environmentally triggered atopic dermatitis, and aural polyps—cause otitis externa. Perpetuating factors do not initiate

the problem but will cause the disease to continue unless they are also treated. Perpetuating factors include:

>>> Bacteria (cocci, most commonly *Staphylococcus pseudintermedius* [acute infections]; beta-hemolytic streptococci and rods, most commonly *Escherichia coli*, *Pseudomonas* species [chronic infections]; and *Proteus*, *Klebsiella*, and *Corynebacterium* species)

>>> Fungi (*Malassezia pachydermatis*, which may cause a hypersensitivity reaction; therefore, small numbers may be relevant)

>>> Progressive pathologic changes (e.g., fibrosis or hyperplastic ceruminous glands from chronic inflammation)

>>> Otitis media

>>> Contact hypersensitivity or irritant (identified when an owner reports at a recheck examination that the pet was doing well the first three to five days of treatment but now resents having its ear treated; typically on this examination an erythematous papular eruption is present on the pinna).

>>> Treatment errors (most commonly undertreatment)

So when I diagnose otitis externa in a cat that has never had skin or ear disease in the past, I eliminate *Otodectes* species as the cause and always

treat the perpetuating factor. I also discuss with the owner the possibility of needing to perform other diagnostic tests if the otitis recurs or does not resolve. In those cases, I investigate the primary factor in addition to treating the perpetuating factor.

— Paul Bloom, DVM, DACVD, DABVP

The incidence of ear disease in the cat is reported as

2-6% much lower than in the dog.

Though no studies have compared chronic otitis I would speculate that is even much lower compared to dogs. The relative importance of *Otodectes* is also greater in cats than dogs which likely contribute to this observation. — Craig E. Griffin, DVM, DACVD.





Scan the QR code to download this handout.



What did you say?

Helping clients to better understand hearing loss

Dogs suffering from hearing loss can still live happy lives. Help pet owners learn how to care for their hard-of-hearing pup.

FROM YOUR VETERINARIAN

What did you say?

Understanding hearing loss

Dogs suffering from hearing loss can still live happy lives. Learn more about hearing loss and how you can help your hard-of-hearing pup.

What should I know?

Hearing loss is a common complaint from dog owners, especially as dogs grow older. The most common cause is an age related change called otosclerosis. This process makes the tiny components of the inner ear less pliable and unable to function as they should. Because the precise function of the ear is to transmit sound waves, the suppleness of the inner structures is critical to function.

A dog that has suffered from chronic recurrent otitis (inflammation of the ear) is even more likely to suffer from brittleness of these tiny structures because of scar tissue and swelling. Other causes that can impact hearing can include ototoxicity (adverse effects to the ear from certain drugs) and effects from loud noises.



What should I do?

If you think that your dog suffers from hearing loss, ask your veterinarian to make sure that there is no infection or other concern present. Your vet may suggest seeing a veterinary neurologist like Dr. Shull to be sure of the cause. Both Canine Cognitive Dysfunction and Otosclerosis are common in aging pets and can occur in tandem. Each issue needs to be addressed to improve quality of life.

There are things you can do to make a hearing impaired dog's life easier.

• **Teach her visual cues so that the impact of the hearing deficit is minimized in daily life.**

Senior dogs can learn to respond to hand signals for rewards. Time spent teaching the new cues is a great investment in your relationship.

GETTY IMAGES

• **Investigate vibration collars designed for this purpose to rouse and interest your dog the way sounds used to.** Hearing loss can make the rituals enjoyed by both you and your dog (like greetings) different and impact your bond. Vibration collars are remote controlled and you can train your dog that the vibration means you are home, so he can meet you at the door.

• **Teach your dog appropriate responses to the cues so that he feels secure even without his hearing.** Dogs love consistency and knowing the response you want, makes for a calm and confident dog.

Hearing loss doesn't mean your dog can't lead a full and happy life, but you should be mindful of your dog's new challenges and ask your veterinarian about any concerns you have with your hard-of-hearing pup.

Whether caused by chronic ear infections, injury or plain old age, hearing loss doesn't mean a dog can't live a happy, fulfilling life. If you have patients suffering from hearing loss and clients who need information on how to cope, try using this handout. With it, pet owners will learn effective communication and proper care for their hard-of-hearing pup.

DON'T MISS THIS:



Licking, itching, scratching, biting, head-shaking, red-hot sore spots ... dermatology cases are beyond uncomfortable for the pet, the owner

and often, the veterinary team. They can be confounding and frustrating for everyone (not to mention, every pet) involved. But we're encouraging you to approach your dermatology cases armed with all the tools you might need to bring about sweet relief from all that scratching. Get what you need at dvm360.com/dermatologytoolkit.



All ears over here: What's otitis?



Ear problems are no fun for dogs OR their owners. Educate your client about how otitis externa affects their dog and offer tips on kicking ear problems for good.

FROM YOUR VETERINARIAN

Ear for this: Learning about otitis externa

Ear problems are no fun for dogs—or their owners. Learn more about how otitis externa affects your dog and make sure he or she has an ear-to-ear grin again soon.

What the heck is this?

Otitis externa is an inflammation of the external ear canal that begins at the outside opening of the ear (called the pinna) and extends inward to the eardrum (tympanic membrane). Many things can cause and contribute to otitis including bacteria, fungi, debris, foreign bodies and allergic disease.

The environment in the ear is ideal for the growth of bacteria and fungi because it is moist and warm and a fairly protected hiding place. We forget that the ears are lined with skin and many dogs suffering from allergic disease will have inflamed and itchy skin. It stands to reason that the ears would be a place where itchy skin could lead to otitis externa.



What do I need to know?

1. Medication. All medication and treatments must be given as directed and on schedule. Please call if you cannot complete any of the treatments or doubt the adequacy of your treatment.

2. Diet. Otitis externa has been thought to be a symptom of food allergy or intolerance. A food trial may be necessary to rule out a food allergy.

3. Cleaning the ear. This is sometimes helpful if your dog can tolerate it. Let us guide you on which products are appropriate for your dog and how to use them.

4. Pain management. Because of the level of pain associated with otitis externa, general anesthesia is

often necessary to allow thorough cleansing of the ear canal and to obtain specimens for culture. We can better choose the appropriate medication if we know the exact identity of the infection in the ears.

5. Recurring infection. The longer the infection has been present, the more difficult it is to clear up. In severe long-standing or recurrent infections, surgery may be necessary. We can help you know what is best for your dog.

Otitis externa is sometimes less of a curable condition, but instead must be managed. By following your veterinarian's recommendations, you have the best chance for an outcome you can both live with.

GETTY IMAGES

Ear problems in dogs can be notoriously difficult to treat, and often those difficulties boil down to seeing a dog for regular rechecks. Since we all know that getting clients back in for ear problems can be an uphill battle, it's imperative that you educate pet owners about otitis and the importance of regular rechecks. Here's where dvm360.com comes in—try giving this handout to your client after your next otitis diagnosis. It covers what clients need to know about medication, diet, ear cleaning, pain management and protecting against recurring infection.



**Scan the QR code
to download this
handout now.**

80%
of dogs who have environmentally
triggered atopic dermatitis have
concurrent otitis externa.

Source: Paul Bloom, DVM, DACVD



A pictorial guide to *Low-stress* ear cleaning

We're all ears to learn about this five-step, lower-stress approach to cleaning a pet's ears in veterinary practice.

By Ciera Miller, CVT



1



2

1 Gather your supplies

Before attempting to clean your patient's ears, be sure to have all necessary supplies ready. If you're using an exam table, put a blanket down to make it more comfortable. We used a pheromone spray on the blanket to help create a calmer environment. If your patient will take them, it's always a good idea to have treats ready to help your patient feel more at ease.



3

2 Remember less is almost always more

When you're able, try to use the least amount of restraint to help your patient feel calm and less defensive. Speak in a low and encouraging voice.



4



5

3 Treat the pet

Before attempting to clean the patient's ears, try offering treats to start the process off on the right paw!

4 Keep treating while you treat

Using minimal restraint and continuing to give treats, begin cleaning your patient's ears.

5 Treat a little more

Be sure to offer treats afterward as well to reward the pet's good behavior!



Ear cases getting you down?

Shake it off.

Famous (and famously funny) dermatologist Dr. Paul Bloom is here with genius tips that are both practical and clinical—and sure to help you with those frustrating otitis cases.



Dogs are liars.

We've all seen dogs who come in for routine exams that have ear disease—which is why you have to make checking the ears a priority, says Dr. Bloom, even when the client swears the dog isn't showing clinical signs. **Scan to listen to his tip.**



We're undertreating ears and it's (partly) your fault

Perpetuating factors of otitis externa come down to one root cause: Undertreatment of ears. Dr. Bloom suggests a few ways you can get better at re-checks—**scan to listen now.**



Ear problems make you wanna shoot yourself.

We've all been there ... you have a bad day and something scathingly honest slips out of your mouth. Dr. Bloom understands the frustration when it comes to treating ears—after all, a dog can “have pus pouring out of its ears” and the owners barely blink an eye. Hear his impromptu script on talking to clients about ears by **scanning the code, right.**



Quit plucking that hair.

In which Dr. Bloom warns against the rampant plucking of hair from dogs with normal, noninfected ears. Don't do it. **Scan to listen why.**



Take Control of Otitis Externa

Treatment from start to finish

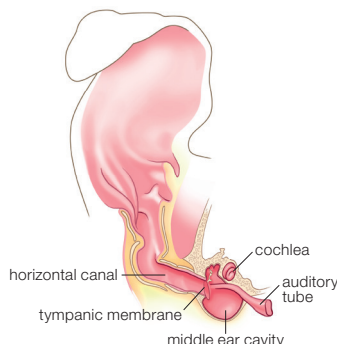
Otitis externa is an inflammation of the outer ear, including the pinna and the L-shaped ear canal. Ear infections are among the ten most frequent reasons dogs visit the veterinarian.¹ An estimated one in five dogs will experience the discomfort of otitis externa.²

Recurring problem

Canine otitis externa has a recurrence rate of 50 to 60 percent, and pet owners become frustrated when they see their dogs experiencing repeated pain and discomfort.³

A new, easy-to-use treatment option

OSURNIA® (florfenicol/terbinafine/betamethasone acetate) is a simple new treatment for otitis externa in dogs.* Two doses per ear should be administered in the veterinary clinic one week apart to maximize successful dosing. In-clinic dosing can also help ensure that appropriate follow-up occurs.



OSURNIA is administered in a premeasured, single-dose tube with a flexible, soft tip that is gentle on a dog's ears. OSURNIA is an adaptable gel — not a liquid or ointment — which spreads easily with gentle massage, and the active ingredients remain in the ear canal for weeks.⁴

*OSURNIA is indicated for the treatment of otitis externa in dogs associated with susceptible strains of bacteria (*Staphylococcus pseudintermedius*) and yeast (*Malassezia pachydermatis*).

Important Safety Information

OSURNIA® (florfenicol/terbinafine/betamethasone acetate) is for otic use only under veterinary supervision. Do not use in dogs with known tympanic perforation or a hypersensitivity to florfenicol, terbinafine or corticosteroids. Adverse reactions observed during clinical trials include vomiting, increased liver enzymes and transient loss of hearing. Please see product insert on p.11 for full prescribing information.

References

1. "VPI reveals top 10 pet disorders." Apr. 2015. Vet. Pract. News. Accessed 10/29/2015. <http://www.veterinarypracticenews.com/VPI-Reveals-Top-10-Pet-Disorders/>. 2. Angus, J. 2004. "Otic cytology in health and disease." Vet. Clin. North Am. Small Anim. Pract. 34:411-424. 3. Kadence USA. Sept. 2013. "Gauging interest in a new OE treatment: quantitative results." 4. Elanco Animal Health. Data on file.

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"Pet owner compliance is one of the biggest challenges veterinarians face when treating otitis externa in dogs. With OSURNIA, effective treatment can be administered in just two doses. It's much more convenient for pet owners and will increase the likelihood that the entire treatment program will be completed."

Wayne Rosenkrantz, DVM, ACVD
Animal Dermatology Clinic
Tustin, CA

"Cleaning and medicating pets' ears once or twice a day for 10 to 14 days can be stressful for many pet owners. OSURNIA is a wonderful option because I professionally clean and treat my patients' ears over a period of a week. Clients are thrilled because they're no longer responsible for daily ear treatment. And I'm assured that the medication is properly administered."

Donna Solomon, DVM
Animal Medical Center of Chicago
Chicago, IL

Osurnia®
(florfenicol • terbinafine • betamethasone acetate)

For more information, talk to your Elanco sales representative or call 1-877-352-6261.

Elanco

Use these takeaways to
manage your nasty ear cases with

ease.

- 1 Infectious otitis** is a secondary occurrence and a perpetuating factor and needs resolution.
- 2 Identification and treatment** of an underlying or co-existent problem is important in all cases of chronic recurrent otitis. Use a systematic approach to the diagnosis and treatment.
- 3 Always base therapy upon results** of otic smears and bacterial cultures when obtained. Thoroughly clean and dry the ear canal before commencing treatment.
- 4 Systemic therapy** is usually indicated in otitis media cases but may be beneficial in chronic cases of non-Gram negative otitis externa and Gram negative problems excluding otitis media.
- 5 Maintenance ear flushing** every 7-14 days can be helpful to avert recurrent infection in cases of chronic otitis externa.

For more, visit
dvm360.com/otitistoolkit.

Otic gel

Antibacterial, antifungal, anti-inflammatory

For Otic Use in Dogs Only

Before using this product, please consult the product insert, a summary of which follows:

Caution:

Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian.

Indication: OSURNIA is indicated for the treatment of otitis externa in dogs associated with susceptible strains of bacteria (*Staphylococcus pseudintermedius*) and yeast (*Malassezia pachydermatis*).

Contraindications: Do not use in dogs with known tympanic perforation (see **Precautions**). Do not use in dogs with a hypersensitivity to florfenicol, terbinafine or corticosteroids.

Warnings: Not for use in humans. Keep this and all medications out of reach of children. Consult a physician in case of accidental ingestion by humans. In case of accidental skin contact, wash area thoroughly with water. Avoid contact to the eyes.

Precautions: Do not administer orally. The use of OSURNIA in dogs with perforated tympanic membranes has not been evaluated. The integrity of the tympanic membrane should be confirmed before administering this product. Reevaluate the dog if hearing loss or signs of vestibular dysfunction are observed during treatment. Use of topical otic corticosteroids has been associated with adrenocortical suppression and iatrogenic hyperadrenocorticism in dogs. Use with caution in dogs with impaired hepatic function. The safe use of OSURNIA in dogs used for breeding purposes, during pregnancy, or in lactating bitches, has not been evaluated.

Adverse Reactions: The most common adverse reactions reported during the course of a US field study for treatment of otitis externa in dogs treated with OSURNIA with 1 tube per affected ear(s) and repeated after 7 days were Elevated Alkaline Phosphatase, Vomiting, and Elevated AST, ALT, ALP* *Aspartate aminotransferase (AST), alanine aminotransferase (ALT), alkaline phosphatase (ALP). Two dogs with pre-existing elevations in ALP were reported to have an increase in liver enzymes (ALP, ALT and/or AST) at study exit. Subsequent clinical chemistries returned to pre-treatment levels in one dog, while no follow up was performed for the second dog.

To report suspected adverse drug events, contact Elanco Animal Health at 1-800-332-2761. For additional information about adverse drug experience reporting for animal drugs, contact the FDA at 1-888-FDA-VETS or <http://www.fda.gov/AnimalVeterinary/SafetyHealth>. For technical assistance, contact Elanco Animal Health at 1-800-332-2761.

Effectiveness:

Effectiveness was evaluated in 235 dogs with otitis externa. The study was a double-masked field study with a placebo control (vehicle without the active ingredients). 159 dogs were treated with OSURNIA and 76 dogs were treated with the placebo control. All dogs were evaluated for safety. Treatment (1 mL) was administered to the affected ear(s) and repeated 7 days later. Prior to the first administration, the ear(s) were cleaned with saline but not prior to the Day 7 administration. Six clinical signs associated with otitis externa were evaluated: pain, erythema, exudate, swelling, odor and ulceration. Total clinical scores were assigned for a dog based on the severity of each clinical sign on Days 0, 7, 14, 30 and 45. Success was determined by clinical improvement at Day 45. The success rates of the two groups were significantly different ($p=0.0094$); 64.78% of dogs administered OSURNIA were successfully treated, compared to 43.42% of the dogs in the placebo control group.

NADA # 141-437, Approved by FDA

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Manufactured for: Novartis Animal Health US, Inc., Greensboro, NC 27408 USA
Eli Lilly and Company has purchased the Novartis Animal Health business to be combined with Elanco, Lilly's animal health division.

Made in UK

NAH/OSU-GEL/BS/2

Treating otitis externa just got easier.

Just two doses per ear,
dosed one week apart

done.

The simple treatment for otitis externa*, with easy application.

- Just two doses per ear, dosed one week apart
- Same dose for every dog
- Single-dose tube with soft, flexible tip is gentle on a dog's ears
- Easy application may lead to better compliance



Ask your Elanco Animal Health sales
representative about OSURNIA today.

NEW

Osurnia[®] 
(florfenicol • terbinafine • betamethasone acetate)

Important Safety Information

OSURNIA[®] (florfenicol/terbinafine/betamethasone acetate) is for otic use only under veterinary supervision. Do not use in dogs with known tympanic perforation or a hypersensitivity to florfenicol, terbinafine or corticosteroids. Adverse reactions observed during clinical trials include vomiting, increased liver enzymes and transient loss of hearing. Please see brief summary on page 11 for additional information.

*Associated with susceptible strains of bacteria (*Staphylococcus pseudintermedius*) and yeast (*Malassezia pachydermatis*).

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Unleash your career

Ready to rule the world (or at least your practice)? Before you race for that promotion, you need to learn to manage your manager. Consider these three examples to untether your career and get ready for greatness.

By Erika Ervin, MBA, CVT

Bored Betty is so over the mundane reality of the job she once loved. She comes to the hospital and does the same tasks every day. She longs for new challenges to tackle. And if she doesn't feel fulfilled soon, she may start looking for a new job.

She can fence herself in by ...

➤ Sporting a bad attitude about her position. Negative behaviors are like infectious diseases. They'll only perpetuate her bad feelings about work.

She can unleash her career by ...

- Seizing the day to take responsibility for her own career and happiness.
- Making a list of what would challenge her and benefit her hospital. For example, improving efficiency by suggesting checklists for all departments or improving patient care and client education by updating hospital forms and handouts.
- Meeting with her manager to present her new ideas. This way Betty's manager knows she's interested in new responsibilities and concerned with the hospital's wellbeing and growth—traits that all good managers must possess.

1



2

Carla Career is interested in the new client service supervisor position at her hospital. She's always wanted to advance her career in veterinary medicine and she knows she would do a great job. She just isn't sure whether her manager knows she's interested.

She can fence herself in by ...

➤ Assuming her manager knows she wants the new position. She shouldn't wait until a position opens up to demonstrate that she's the perfect pick for this promotion.

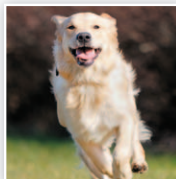


She can unleash her career by ...

➤ Making the client service team more effective and more efficient.

➤ Asking peers for their input on how the team can change for the better.

➤ Meeting with the manager. Carla can detail all her plans with enthusiasm and explain why she's the right choice to implement changes with the team. Critical point: Carla must mention that she sought input from her peers. This shows she's a team player who realizes how important it is to involve the team in decisions—and to value the team's input. This will also help her gain her team's respect.



More career builders

1. Offer solutions. Don't complain about problems and expect someone else to fix them.
2. Go above and beyond every day. Don't just stick to the normal scope of your job.
3. Cross train. Be sure to learn as much as you can about all areas and positions in your hospital.
4. Get CE... lots of it. Learn as much as you can about the industry and topics you're passionate about.
5. Step out of your comfort zone often. Challenges will always present an opportunity for you to set yourself apart.

More career busters

1. Don't focus on the past. You can't change it. Focus on the future and changes you can influence.
2. Don't keep your ideas to yourself. Voice all of your ideas and solutions to your manager and offer to help make the change.
3. Don't wait for someone else to get the job done. Take the initiative to stand out and be ahead of the game.
4. Don't feed into gossip and unnecessary drama. Starve the rumors and feed into the opportunities they may present for bettering your hospital.
5. Don't be reactive, be proactive. When you see a potential for a problem, don't wait for the problem to occur to create a solution. Stay ahead and help prevent it by solving it before it happens.

3

Helpful Heather has noticed her manager's been crazy busy and a little overwhelmed. Heather wants to help her boss so her boss can focus on other things.

She can fence herself in by ...

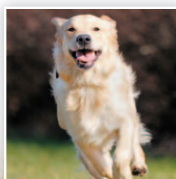
➤ Failing to take initiative to complete her own tasks. Heather shouldn't add to her boss's workload by failing to take initiative to get her own tasks done.

➤ Making comments about how tough it is to do her manager's job. This could seem unappreciative, and her boss may not see Heather as a team player.



She can unleash her career by ...

➤ Pitching in with gratitude. Heather can tell her boss she's happy to help and grateful for the opportunity that helps her learn more about the business and her manager's duties. She can thank her boss for the chance to help out.



Erika Ervin, MBA, CVT, is the hospital manager at VCA Twin Rivers Animal Hospital in East Windsor, New Jersey.

5 steps to reduce the recurrence of bladder stones

Sick of seeing “stoned” cats and dogs at your veterinary practice? Don’t pass the chance to stop the strain by preventing recurring bladder stones in dogs and cats.

By Nichole Reyes, DVM

Pet owners are often surprised to learn their cat or dog is suffering from bladder stones, also known as cystic calculi. While bladder stones may be caused by a variety of underlying conditions, such as chronic urinary tract infections, abnormal metabolism and liver disease, it’s also possible for otherwise healthy dogs and cats to suffer from this condition. A pet with a history of bladder stones may be more likely to experience a recurrence in the future. The good news: We can educate pet owners to lower a pet’s risk for a recurrence.

Ultimately, preventing a recurrence will depend on the type of stone a pet has developed and the underlying causes that led to its formation. Understanding which type of stone the pet is prone to forming can help the veterinarian make a treatment plan and more effectively direct any changes to a pet’s diet or lifestyle.

Diagnosis

Some stones may dissolve with simple diet adjustments, while others may require surgical removal. (Figure 1.)

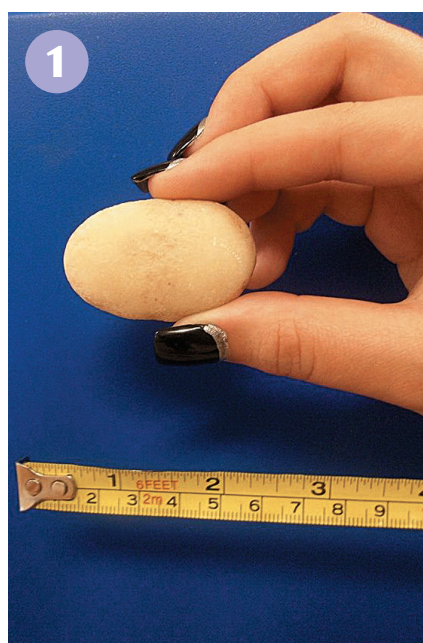
Diet

Prescription urinary health diets are formulated to reduce the likelihood of crystal/stone formation in the bladder by altering the pH levels of the urine and minimizing levels of specific potential stone forming nutrients. High levels of certain

minerals and nutrients may contribute to the formation of cystic calculi in cats and dogs—for example, high oxalate foods should be avoided in pets with a history of calcium oxalate stones. And feeding a pet multiple small meals a day can help to maintain more consistent urine pH levels throughout the day.

Supplements

Remind pet owners to be cautious when using nutritional supplements in pets with a history of cystic calculi, particularly those containing calcium or



Check out these examples of bladder stones. Ouch!



Water fountains and walks may help keep pets drinking and urinating. Fair warning: Kitties may prefer water straight from the tap. (They're cats—they do what they want.) The side-by-side drinking approach pictured here isn't an Olympic sport—yet.

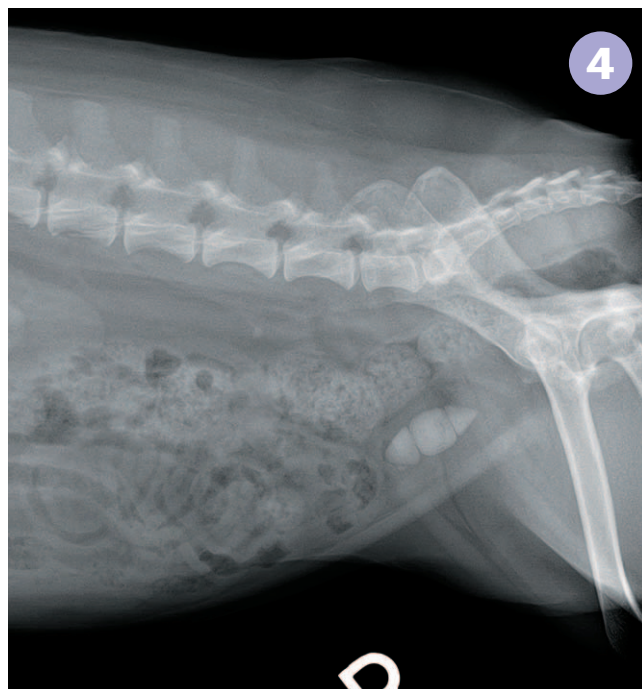
Vitamins C or D. However, in some instances, veterinarians may recommend supplement options to decrease the incidence of bladder stone recurrence. For example, potassium citrate supplements may be used to help prevent recurrence of calcium oxalate stones. (Figure 2.)

More water, more walks

Increasing a pet's water intake helps avoid a buildup of crystals and inflammatory sediment that can contribute to bladder inflammation and stone formation. Owners can help increase a pet's water consumption by switching from dry to canned pet food or adding extra water to the pet's food. Small pet drinking fountains are widely available at pet stores, and constantly circulating water may be especially enticing to cats. Taking the pet out to urinate more frequently can be beneficial, as prolonged urine retention can lead to increased formation of crystals and stones in the bladder. (Figure 2.)

Follow up

Monitoring changes to a pet's urine concentration (USG) and pH (either



in the clinic or at home) may provide helpful indicators of the effects of lifestyle or diet changes. Routine testing of blood and urine (Figure 3) as well as imaging of the bladder (Figure 4)—even when the pet isn't showing any clinical signs—allow veterinarians to screen for indicators of subclinical bladder health issues that may not be visible or causing symptoms.

Nichole Reyes, DVM, is a veterinarian at Westchase Veterinary Center and Emergency in Tampa, Florida.

A beagle dog is sitting on a train platform, looking up at a red train car. The dog is wearing a brown collar and a leash. The train car has large windows and doors. The platform is made of concrete. The background shows the train tracks and the sky.

Is your training a train wreck?

Managers, I went from nearly 100 percent turnover to 0 percent. What changed? Me—and how I trained new team members.

By Alex Espinosa

Let's talk about the two ways I derailed our team training first—so you don't make the same mistakes I did. I was promoted from veterinary assistant to manager with little leadership experience. I was an expert in the area of technical abilities and knowledge, but my leadership abilities sucked. Worse, I inherited employees with patterns of tardiness, bad attitudes, theft of company property and other crappy behaviors. My struggles with these employees were extensive and, well, that's a story for another day. Basically, we told them to ditch these behaviors or we'd ditch them. Then they got to choose whether they wanted to play with the new team or find a new path. Next task: Hiring and training some rock star veterinary assistants.

METHOD 1

TREATING NEW TEAM MEMBERS LIKE THE CABOOSE

My first failed training program: Hire an employee quickly without outside input, give the new employee a day or two of training and dump the employee into exam rooms.

The perceived advantage: a quick return to normal numbers of employees, which should reduce overtime and increase efficiency.

The reality: The only benefit is false hope. What happens to that employee, who is immediately thrown into an overworked, stressful environment, is disastrous. The employee will feel underappreciated

because the other team members will resent her small knowledge base and high inefficiencies. Clients who see this employee realize the lack of skill and confidence and wonder if everyone in the practice is like that. Team members and clients think this employee is of below-average intelligence, and the new employee starts to wonder if everyone's right. She feels stressed, depressed and realizes this horrible mistake of working at a veterinary hospital.

The result: Nearly 100 percent of the time, the new employee quits within the first two months.

UNCOUPLED CARS GET LEFT BEHIND

METHOD 2

The second method of training: A slightly more thought out, but still missing the mark approach. It started with a careful, time-consuming screening of applicants by myself. The newly hired employee often had experience in a related field, sometimes just a good personality and willingness to learn.

After hiring someone I thought was promising, the employee was attached to whichever exam room assistant was working that day. It was this exam room assistant's responsibility to instill the practice's *raison d'être* and all knowledge pertaining to being a stellar veterinary assistant.

This training process would last an average of two weeks, depending on how desperate I was for a position to be filled. The new employee would learn techniques on restraint, venipuncture, history taking and other necessary topics

from various exam room assistants.

The reality: Often during this period the new employee is around clients. This method results in the employee feeling somewhat more valued than the previous method. This remedies stress, self-doubt and underconfidence to an extent. Clients see the new employee being trained by someone, which eases their concerns.

However, because the new employee isn't surgically attached to the trainer, the client will still have some alone time with a clearly inexperienced person who's tasked with their pet's well-being. Yikes.

The result: an employee with a somewhat haphazard knowledge of veterinary medicine. She has a 50 percent chance of staying with you, and will at best grow into an average employee.



If you're following along at home, here's the score:

I was losing. Badly. Here's why:

Problem No. 1: Hiring by myself. Several people should actively be involved in the hiring process. At my practice, this includes my human resources and finance manager and my pharmacy manager, who has a degree in psychology, which makes her invaluable on interviews. I realize most hospitals don't have a psychology major, so my advice would be to have any other managers sit in on interviews.

Problem No. 2: Having more than two to three people involved in the new employee training. Consistency is key to minimize the trainee's confusion on different methods and mind sets. Many roads lead to the same place, but learning all roads when you have little to no knowledge of where you are will seriously confuse you.


Problem No. 3: Having multiple paths for veterinary assistants without a clear focus. I have five different positions for nonveterinarians:

1. kennel assistant
2. receptionist
3. veterinary assistant, support: tasked with performing diagnostics, ensuring all other members function efficiently and general orchestration of the day
4. veterinary assistant, surgery/large animal: admits, preps, monitors and discharges surgeries and assists with all large animal farm calls
5. exam room assistant: brings patients and owners from the lobby to exam room, collects signalment and history and restrains the patient for doctor. This team member has more client interaction than all other veterinary assistant positions.

With so many paths, I needed to make sure training was balanced and helped team members thrive along each career path.

METHOD 3

A BETTER ENGINE FOR TRAINING



It begins with a slow selection process involving one manager (me) and two of my employees, all with different backgrounds and viewpoints.

- > After hiring the perfect employee, that employee will be trained by only two specific people for the first month. One particular support assistant and one particular surgery/large animal assistant for four weeks. The trainee will learn many aspects of those two positions and how to handle most common procedures for those positions.
- > Downtime will be managed by memorizing facts on heartworm and flea prevention, vaccine protocol and drug uses.
- > Practice *raison d'être* will be explained by the practice manager.

After the initial month, the employee will then sit for about four receptionist shifts to learn the basics of checking clients in and out, as well as client interaction skills.

It's only after this five week period that I allow client interaction at the side of one particular senior exam room assistant. Because the assistant is familiar with so many aspects of the job description by this point, training in the exam room is minimized. Clients perceive a well-educated assistant who is familiar with all aspects of what the hospital offers.


The results: With training limited to three trainers, the trainee learns quickly and efficiently, reducing confusion and boosting the rate of learning. The trainee feels confident and intelligent, because the practice manager hand-selected the trainers and gave the trainee the necessary time and tools to succeed. The employees we've trained this way have shown significantly above average performance and an astonishing 0 percent turnover rate.

Cost: Sure, it's easily 15 times more expensive than method 1 and three times as costly as method 2. Is the cost worth it? Absolutely. Developing confident, knowledgeable team members who will stick with you for years is priceless. Not only does it reduce training costs in the long run, but your clients will feel confident in your team members' abilities and will respect your practice more.


Alex Espinosa is the practice manager of Clarkesville Veterinary Hospital.

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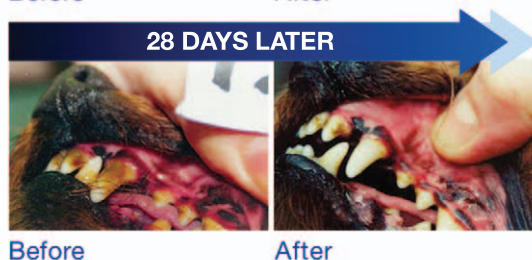
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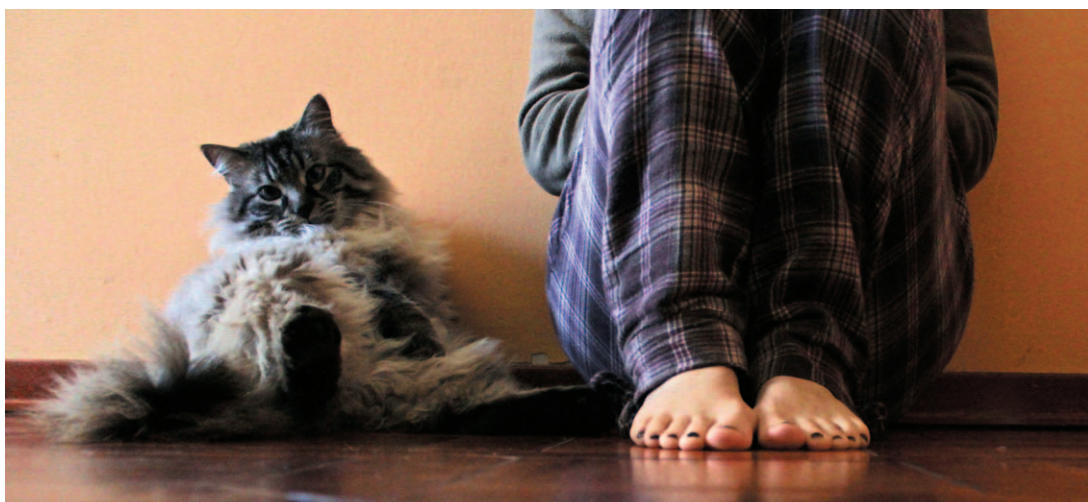
QUICK CAT STAT:

Avoid the 2 a.m.

FOODIE CALL

Despite clients' best efforts to help shed extra weight from their overweight cats, middle-of-the-night hunger can derail

diets, with begging and persterning at 2 a.m. Encourage clients to try these tactics to sleep well knowing their pets' weight loss regimen remains on track.



Feed a high-protein diet

These tend to provide longer periods of satiety than high-carbohydrate foods. This mimics a cat's native diet, where it might eat eight to 10 mice a day.



Offer bedtime snacks

A high-protein meal or morsel of meat or fish just before bedtime could be the difference between a cat waking up hungry at 6 a.m. instead of 3 a.m.



Use automated feeders

An automatic feeder that can dispense a measured meal four to six times a day and nourish a feline's 4 a.m. hunger pangs may prevent wake-up calls.



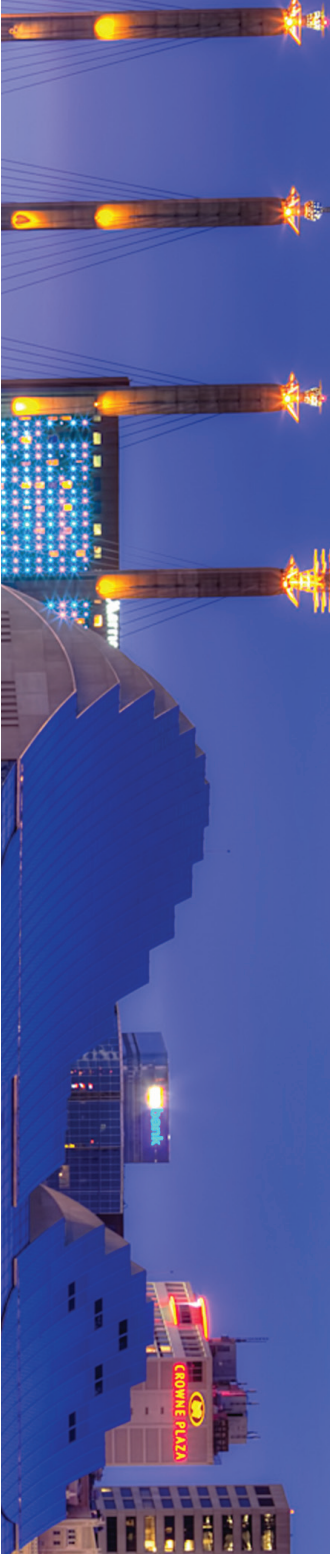
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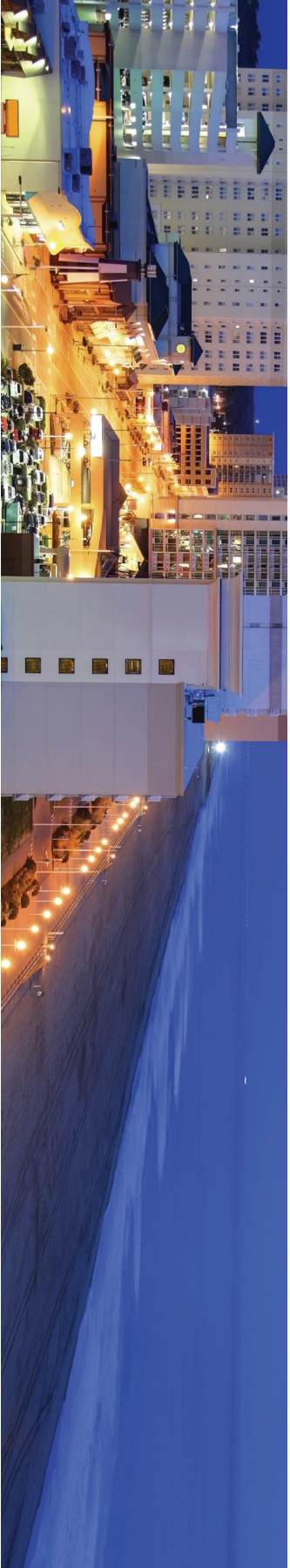
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