



firstline®

The best read veterinary team journal. Bam.



Simply a-mange-ing
vet tech valentines

p20

Tips for handling
feline aggression
p4

Going Fear Free?
Don't get derailed
p6

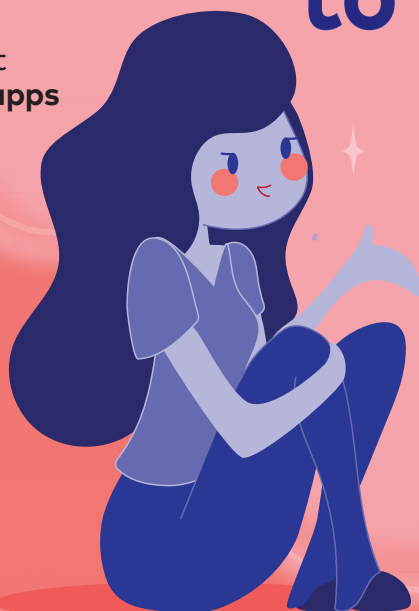
The perfect
parenting apps
p13

Those
(FIC)kle
FLUTD
cases
p14

Techs and
telehealth:
What's in store
for the future?
p18



'Mommy needs to save lives.'



The top 10
articles of
2018

p2



DISCOVER THE NEW, EASY WAY TO DELIVER HILL'S® TO YOUR PATIENT'S DOOR

Offer home delivery for better
care and business growth



BENEFITS FOR YOU AND YOUR CLIENTS

- No setup fees for your clinic
- Set your own prices and control your margin
- Free shipping and autoship discounts for your clients*

REGISTER TODAY!

Go to Vet.HillsToHome.com
or for questions, talk to your
Hill's Representative.



Transforming Lives™

*Shipping rates and discounts are subject to change. ©2018 Hill's Pet Nutrition, Inc. ®/™ Trademarks owned by Hill's Pet Nutrition, Inc.

THE GUIDE

January/February 2019

6

Going Fear Free? Don't get derailed

4 Weird and wonderful tips on feline aggression

5 Sharpen those dental instruments!

5 Handling employee reviews like a boss

11

Surviving work and parenthood in veterinary medicine

8

'Mommy needs to save lives.'



dvm360
leadership
challenge

What to do with those (FIC)kle FLUTD cases



14

18

Techs and telehealth: What lies just ahead?



Share the love with your a-mange-ing vet tech valentine

20

CREATIVE

News Channel Director | Kristi Reimer Fender
Business Channel Director | Brendan Howard
Medicine Channel Director | Mindy Valcarcel
Content Marketing Director | Adrienne Wagner
Senior Content Specialist | Jennifer Gaumnitz
Associate Content Specialists | Katie James, Sarah Dowdy
Assistant Content Specialist | Hannah Wagle
Multimedia Producer | Troy Van Horn
Clinical Techniques Course Manager | Jennifer Vossman, RVT, CMP
Digital Content Director | Jessica Zemler
Digital Design Director | Ryan Kramer
Associate Art Director | Nicolette Haigler
Designer | Roxy Townsend
Marketing Copywriters | Gabrielle Roman, Ericka Cherry

EDITORIAL ADVISORY BOARD

Our board members provide critical insights into the challenges veterinary team members face, and they help *Firstline* provide content that is relevant and useful to all practice team members.

Sharon DeNayer | Jennifer Graham
Bash Halow, CVPM, LVT | Shawn McVey, MA, MSW
Ciera Salles, CVT, VTS | Kyle Palmer, CVT
Nancy Potter | Oriana D. Scislowicz, BS, LVT, APHR

SALES

Sales Director | David Doherty
(913) 871-3870 | david.doherty@ubm.com
Account Manager | Angie Homann
(913) 871-3917 | angie.homann@ubm.com
Account Manager | Kelly Main
(913) 871-3872 | kelly.main@ubm.com
Account Manager | Emma Pierce
(913) 871-3873 | emma.pierce@ubm.com
Account Manager | Terry Reilly
(913) 871-3871 | terry.reilly@ubm.com
Sales Coordinator | Anne Belcher
(913) 871-3876 | anne.belcher@ubm.com

UBM ANIMAL CARE

Vice President & Managing Director | Christie McFall
Vice President, Business Solutions | Mark Eisler
Executive Creative Director | Marnette Falley
Medical Director | Theresa Entrißen, DVM
Fetch dvm360 Director | Peggy Shandy Lane
Business Manager | Chris Holston

UBM AMERICAS, LIFE SCIENCES GROUP

Executive Vice President &
Senior Managing Director | Tom Ehardt

Subscriber Services: Visit dvm360.com to request or change a subscription, or call our Customer Service Department toll-free at 888-527-7008. **Reprints:** Call 877-652-5295 ext. 121, or write to bkolb@wrightsmedia.com. Outside the US, UK, direct dial 281-419-5727 ext. 121. **Books and Resource Guides:** Visit industry.matter.com. **List Rental Sales:** Call Anne Belcher at 913-871-3876, or write anne.belcher@ubm.com. **Editorial Offices:** UBM Animal Care, 11140 Thompson Ave., Lenexa, KS 66219; 913-871-3800. **Websites:** dvm360.com; fetchdvm360.com; UBMAmericas.com; ubm.com.

Firstline (Print ISSN: 1095-0613, Digital ISSN: 2150-6574) is published 6 times/year as combined issues in Jan/Feb, March/April, May/June, July/Aug, Sept/Oct & Nov/Dec by UBM LLC, 325 W 1st St STE 300 Duluth MN 55802. Subscription rates: one year \$21.00, two years \$36.50 in the United States & Possessions; \$31.50 for one year, \$57.00 for two years in Canada and Mexico; all other countries \$42.00 for one year, \$78.00 for two years. Single copies (prepaid only) \$10.00 in the United States; \$14.00 in Canada, Mexico, and \$16.00 in all other countries. Periodicals Postage Paid at Duluth, MN and additional mailing offices. POSTMASTER: Please send address changes to *Firstline*, P.O. Box 6086, Duluth, MN 55806-6086. Canadian G.S.T. number: R-124213133RT001. PUBLICATIONS MAIL AGREEMENT NO. 40612608. Return Undeliverable Canadian Addresses to: IMEX Global Solutions, P.O. Box 25542, London, ON N6C 6B2, CANADA. Printed in the U.S.A. © 2019 UBM. All rights reserved. No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical including by photocopy, recording, or information storage and retrieval without permission in writing from the publisher. Authorization to photocopy items for internal/educational or personal use, or the internal/educational or personal use of specific clients is granted by UBM for libraries and other users registered with the Copyright Clearance Center, 222 Rosewood Dr. Danvers, MA 01923, 978-750-8400 fax 978-646-8700 or visit <http://www.copyright.com> online. For uses beyond those listed above, please direct your written request to Permission Dept. fax 732-647-1104 or email: jillyn.frommer@ubm.com. UBM Life Sciences provides certain customer contact data (such as customers' name, addresses, phone numbers, and e-mail addresses) to third parties who wish to promote relevant products, services, and other opportunities that may be of interest to you. If you do not want UBM Life Sciences to make your contact information available to third parties for marketing purposes, simply call toll-free 866-529-2922 between the hours of 7:30 a.m. and 5 p.m. CST and a customer service representative will assist you in removing your name from UBM Life Sciences's lists. Outside the U.S., please phone 218-740-6477. *Firstline* does not verify any claims or other information appearing in any of the advertisements contained in the publication and cannot take responsibility for any losses or other damages incurred by readers in reliance on such content. *Firstline* cannot be held responsible for the safekeeping or return of unsolicited articles, manuscripts, photographs, illustrations, or other materials. Address correspondence to *Firstline*, 11140 Thompson Ave, Lenexa, KS 66219; (913) 871-3800; email firstline@ubm.com. To subscribe, call toll-free 888-527-7008. Outside the U.S. call 218-740-6477.

firstline®

Healthy team members = healthy pets



FROM THE TOP: The 10 most popular team articles of 2018

Personal stories of cyberbullying, in-depth advice on canine pancreatitis, confessions from your peers about the emotional wear and tear that comes with working in the veterinary profession. Here are the 10 most-read team articles from the past year.

We don't normally get excited about popularity contests (who needs the cringeworthy high school flashbacks?), but we make an exception when it comes to the top dvm360 articles of the year. It's always fascinating to see what caught readers' (ahem, your) eyes, and 2018's list is no different.

That's why we're counting down the most-read team articles from the past year. They include everything from guidance about coping with anesthesia loss to advice from an internist about using insulin from Walmart. Not ringing any bells? Get reading at dvm360.com/team2018.

PHOTO COURTESY OF PORTIA STEWART





We believe in evidence-based learning (and fun)

At our conferences you'll find yoga and meditation and the opportunity to tackle your issues and focus on yourself. But you'll also find top-notch clinical CE that keeps you up to date on the most important issues delivered by thought leaders and innovators in the field.

At Fetch dvm360 conference, you'll get:

- ✓ Resources you need for every problem you face
- ✓ Inspiration to love your job again
- ✓ Connections with like-minded peers



Take your CE to the next level.

We have three dates and locations each year.

Go to fetchdvm360.com to learn more.

Register today.

PEARLS

(Lustrously good advice and tips)



WEIRD AND WONDERFUL: tips for handling feline aggression

The veterinary team plays a key role in helping de-escalate battles cats wage against their owners and other pets in the household.

By Lisa Rodasta, DVM, DACVB

Feline aggression, whether toward other animals or people, can send veterinary team members scrambling for solutions. However, this problem doesn't have to be mysterious. Here are some simple tips for feline aggression disorders that can help your team help cats and their owners.

Make the history count

The first step in a feline aggression evaluation is to assist the doctor in getting an accurate history, including the cat's age when the aggression started, progression of the problem, and any risk to the public. Next, help determine if the behavior is normal or abnormal. Normal behaviors can often be treated with behavior modification, but abnormal behaviors often involve fear,

arousal or anxiety. In these cases, the doctor will want to consider medication and environmental changes along with modification.

Consider medical causes

Often if a veterinary team can fix a cat's constipation, dental pain, back pain or urinary tract infection, the behavior problem goes away. Pain and discomfort can increase irritability, and cats don't always display clear clinical signs when there's a medical problem.

Apply the Band-Aids first

Band-Aid treatments can give the owner and the pet some immediate relief. And the veterinary team is essential in educating the cat owner about these strategies and teaching them how to use them at home.

Ask this question

Tell owners to be honest (no judgment!), and ask, "Are you so frustrated you might euthanize or give away your cat?" If the answer is yes, Band-Aids become even more important.

Remember, aggression cases can be challenging, so follow-up with the team is essential. Technicians are perfectly positioned to check in with clients over time to assess how treatment is going and, with the doctor's input, adjust the plan as necessary.

Dr. Lisa Radosta owns Florida Veterinary Behavior Service West Palm Beach, Florida. This article is adapted from a session she conducted at the Fetch dvm360 conferences.

Want more tips? Check out dvm360.com/WonderfullyWeird

Sharpen those dental scalers and curettes

It's imperative that for the sake of your patients (and your practice's bottom line), you keep your dental instruments at maximum efficiency. Dentistry expert Mary Berg is here to help.

Dental disease is a widespread problem among veterinary patients. Consequently, the practice of dentistry can play a pivotal role in your clinic's cash flow. To keep that crucial segment of medicine and business at its most productive, Fetch dvm360 conference speaker Mary Berg, BS, RVT RLATG, VTS (dentistry), says you need to keep your hand instruments sharpened for maximum efficiency.

To start, here are the materials you'll need: a flat Arkansas stone, a conical stone and sharpening oil. Berg also suggests having an acrylic stick or similar item to confirm the sharpness of the tools.

Berg's method—adapted from "It's About Time," the classic manual for maintaining human dental tools put out by the Hu-Friedy company—uses the face of a clock to establish angles for sharpening. The techniques are quick and easy.

"Realistically, it only takes a few seconds to sharpen your dental instruments if you keep them sharpened on a regular basis," Berg says.

She also points out that if you're not comfortable performing this upkeep on your own, it's possible to send your tools out to be serviced. Just be sure you keep enough instruments on hand for dental appointments scheduled in the meantime.

Watch step-by-step instructions on keeping your scalers and curettes at their most effective at dvm360.com/BergSharpening.

ASK KATIE

Q: How should I handle my employee reviews?

A: First of all, I love that you have employee reviews. Not everyone does and I think that's a missed opportunity to communicate with team members. I like 360-degree reviews, and I like conducting them every six months. If you aren't familiar, a 360 review means that everyone who works directly with the team member has an opportunity to provide them with feedback, typically anonymously. (Editor's note: Check out our guide to 360-degree reviews here.) The caveat is that when folks are providing feedback, they should only write what they'd be willing to say directly to that person. The point isn't to tear someone down, but rather to provide him or her with constructive feedback that they can use to improve.

Conduct reviews on the anniversary of hire, and again six months after so that you aren't trying to compile reviews for everyone at the same time. Additionally, don't tie raises to reviews or they become expected. Give increases when they are earned. If you provide a cost-of-living raise annually, do so across the board at a designated time each year.

Katie Adams, CVPM, is director of curriculum development at veterinary education provider Ignite Veterinary Solutions based in Austin, Texas.

Got a question for Katie?
Email us at firstline@ubm.com.





Going Fear Free? Don't get derailed

Change is new and exciting. It can also be hard and terrifying. Here's how to get everyone on board when making the switch to Fear Free in your veterinary clinic.

By Mikkel Becker, CBCC-KA, CPDT-KA, KPA CTP, CDBC, CTC

The Fear Free train rolls into your clinic, wheels squeaking, and everyone's expected to pick up their luggage and climb aboard. Of course, there will be trepidation—you're about to leave something behind to embrace something completely new—and with doubt comes resistance. In many regards, instilling a Fear Free culture is a top-down initiative. Let's figure out how to make it stick from arrival to departure.

The conductor

One of the greatest concerns when it comes to changing protocol is lack of clear leadership.

"The boss, whether he or she wants to be or not, is the default leader of the team," says Michael Hargrove, DVM, owner of North Shore Veterinary Hospital, a Certified Fear Free Practice in Duluth, Minnesota. "If the boss isn't passionate about the need for a Fear Free approach, that's going to be clear to the rest of the team and it's going to be much more difficult to get buy-in."

In other words, to help others succeed, we must first help ourselves. This is a self-care tool called the Oxygen Mask Theory, and it applies to your professional life just as well as your personal life. Louise Dunn, owner and CEO of Snogoose Veterinary Management Consulting, describes it this way: "One must first be able to understand their own resistance and how to sustain their motivation before helping others on the team."

Dr. Hargrove agrees completely: "I see this over and over, when a staff member is passionate about change, but there's not the same passion from the leadership team ... in most cases, the staff member gets frustrated and burned out and often ends up leaving because of the lack of support."

The passengers

The resistant staff may be pushing back if the reasoning for the change didn't connect in a way that was personally meaningful and motivating.

"It's important for the staff to understand what success looks like," says Dr. Hargrove. "What's the end result of all of this training? What are the benefits to each of them personally? What's the benefit to the hospital?"

It's also important for the entire team to recognize how change can disrupt individuals' perceived sense of value and role on the team.

"That lead technician might have been the 'star' of the team previously," Dr. Hargrove says. "She had the experience and knowledge that gave her a great deal of comfort. As the team implemented Fear Free concepts, she was no longer the one with the answers. This is a major change to her comfort level and a threat to her position in the hospital, and she's rebelling because of it. It's a totally understandable reaction to the situation and one that frequently occurs when we change the way we do things."

When one team member feels off kilter, it can become an easy slide downhill for the whole team. Ongoing training is important for all team members to continue reinforcing the new training and increase confidence with the new methods for a more successful implementation.

"Staff meetings should be used for group discussions about Fear Free concepts and how they're implemented in the practice," Dr. Hargrove says. "You can't simply have everyone do computer-based learning and magically expect that the staff procedures and the staff culture will just naturally and seamlessly change."

Along with regular check-ins, one of the most important aspects for success is the continued positive reinforcement of what team members are doing right.



"The owner and management need to regularly present to the team stories about small wins and celebrate those wins," Dunn says. "Client feedback is also important to let the team know that the clients are watching the change."

Say, "All aboard!"—and mean it

Lastly, rather than ignoring ongoing issues with team members who remain resistant to change, these issues need to be directly addressed.

"Having the practice owner or manager sit down individually with the team members who are less motivated to let go of the old ways of doing things can be revealing," says Dunn. "It can also provide an important opportunity to address underlying myths and misconceptions that may be standing in the way of moving forward with Fear Free."

While change takes time and ongoing support will be needed during the transition towards a

different way of doing things, there are also hard lines that need to be drawn regarding outdated practices like forced lateral restraint of fearful dogs or scruffing of cats.

"This is where the owner needs to have back-bone," says Dunn.

Most importantly, you need to figure out whether specific team members are resisting change because they don't really believe that a Fear Free approach is the best standard of care.

"If they truly don't feel that the changes being made in the hospital are in the best interests of the patients and the practice and they're going to continue to do it the old way," says Dr. Hargrove, "then I would seriously consider letting them go."

Mikkel Becker is the lead animal trainer for Fear Free Pets. She is a certified behavior consultant and trainer who specializes in reward-based training that's partnered closely with the pet's veterinary team. Mikkel is the co-author of six books, including From Fearful to Fear Free, and was the featured trainer on Vetstreet.com.

See more of our coverage in our sister publications and online at dvm360.com/workingparent



What do working associate veterinarians wish their bosses understood about raising kids in the midst of a veterinary career? What do practice owners wish their associates with children understood about the realities of running a business? In dvm360 we explore these perspectives, and also look at crazy ways some veterinary practices are making it work for their everyone involved.

Vetted

Balancing your veterinary career and parenthood. If there were an easy answer, you would have figured it out already. In Vetted, you'll find advice from your colleagues who have come through the struggle a little wiser, honest thoughts shared as part of the Vet Confessionals project and one veterinarian's experience with a thing that many moms face, postpartum depression.



'Mommy needs to save lives.'

Missing family milestones because of work can be heartbreaking for kids and parents. How can veterinary professionals help their families understand their jobs?

By Erin Rand

"Controlled chaos." That's how Andy Rollo, DVM, describes his life balancing veterinary medicine with being a parent to young children.

Parents in all areas of veterinary practice can strain themselves with long hours of often incredibly stressful work, then return home and feel the pressure to be "on" as a mom or dad. We spoke to veterinary professionals with kids to find out how they maintain this delicate equilibrium of taking care of animals while also taking care of children.

Naomi Strollo, RVT, has worked as a vet tech for her daughter's entire life. When she asked her 16-year-old about what it was like growing up with a mom who had long work hours and a hectic schedule, she replied, "No child wants their parent to work all the time. I remember you picking me up from grandma and grandpa's house in the middle of the night and taking me home, then waking me up for school a few hours later." Still, despite this, she said, "I knew you were off saving someone's pet or doing surgery or something serious. It's not like you stayed at work any longer than you had to."

Helping your child understand exactly what you do can be key to maintaining harmony at home—this is the approach Katie Adams, CVPM, took when her job required her to work late nights and weekends. "We are an animal-loving family so it was easy for them to imagine one of our own animals who might not be well and who might require someone's mom or dad to take care of them," she says. "It wasn't always easy, especially when a weekend or special event like a birthday was interrupted by a ring of the cell phone or a scheduled kennel shift, but at least my kids knew I was leaving to take care of an animal that needed me."

As a single mother to 6-year-old twins, Kristen Cooley, BA, CVT, VTS (anesthesia), limits the number of

hours she works, but still ends up coming in on weekends and answering calls and texts from students who have patients in the hospital on her personal time. She also travels to teach and volunteer. Demonstrating

"Mommy's job in this world is to take care of you, and also to take care of animals."

her passion to her children is important, and she says, "They sometimes get angry when I leave to lecture or travel to Ecuador to volunteer, but I feel that it is important for them to see that I am a dedicated professional who is independent and driven by my passion to help others. I've already seen it rub off on them!"

Oriana D. Scislowicz, BS, LVT, aPHR, tries to limit interruptions when she's off work and spending time with her son, but sometimes emergencies happen. "I try to make sure I do not let any irritation show through to my son," she explains. "When I have been a bit flustered, I've just been honest with him. I explain, 'I'm dealing with this kinda messy situation at work—it's stressful, but we're going to have a fun day today!' That way he knows if I seem a little preoccupied for a moment, it's not him."

Many of the professionals we spoke with emphasized that being clear about what their job is helps their kids understand why they have to be away, but it can also stir up some tough emotions.

"We always say, 'Mommy is helping a dog or cat,' when it comes to a euthanasia," says Dani McVety, DVM. Another thing she tells her





kids to get them through tougher times is, "Mommy's job in this world is to take care of you, and also to take care of animals. Not everyone went to school to do this job, so it's important that I help make them feel better."

Strollo's advice to parents with younger children is to be frank about their work. "Tell them the happy stories and the heartbreaking stories. Be sure to include how you were there to make the pet better, or how you tried to."

Dr. McVety emphasizes that in-office time is important for children because it helps them understand the

world outside of home and school. "When they spend an hour at the office or the clinic after school, do their homework in the empty exam rooms and play around in the cages until mom or dad is ready to go home, it provides them with a model of hard work," she says.

Since in a child's imagination, being a veterinarian might seem like fun and games, Strollo says, "My daughter came to my job many times to see that we didn't just play with puppies and kittens all day. She knew Mommy needs to save lives."

Though spending time in the office together can help foster a bond between parent and child, time spent together outside of the office is even more precious. "If I'm not working, I think they get that any free time I have, I try to spend with them," Dr. Rollo says of his kids. He and his wife divide parenting duties so that she deals with school and he handles sports. To have more control over the scheduling, he is involved in boards and coaching, so

he is able to plan months in advance. He explains, "When they don't have a game, I can work late; when they do, I schedule myself off earlier. The catch-22 is coaching and volunteering takes more time as well."

Even though she has no children of her own, Danielle Russ, BS, BA, AS, LVT, says, "As a hospital manager, I respect and am keenly aware of the delicate balance that many working parents seek to meet on a daily basis."

Russ would like to see veterinary professionals come together to reduce the expectation of long, inflexible hours so that parents don't have to explain their absence from their children's lives.

When the cell phone interrupts a school play or soccer game, there may be tears, but with careful planning, support from managers and the veterinary team, and clear communication, veterinary professionals can build strong bonds with their kids at home while they take care of creatures at work.

DO PARENTS RULE YOUR PRACTICE?

Not everyone working in a veterinary hospital has kids (or wants them). How can you, as a practice manager, fairly accommodate everybody's work schedule?

Find out at dvm360.com/scheduledebate



Surviving work and parenthood in veterinary medicine

Sure, there are tough days to balance family and my career, but here's how I make it work—and tips for you.

By Oriana D. Scislowicz, BS, LVT, aPHR

Balancing a career and kids is always going to be a challenge, but in veterinary medicine, with unpredictable hours, client demands and patient emergencies, it's 10 times as hard. When I was a technician on the floor, it helped me to find the positives in my unique schedule of working on weekends and having longer shifts. While there were days that were tough and I barely saw my son in the morning and he was already asleep by the time I got home, I had extra mommy-son time during the week because I had a couple days off during the week. He also was in daycare less and with his family

more with this schedule, so I saw that as another plus. A lot of the ability to stay positive and push through any "mommy guilt" is to adjust your perspective and find gratitude in your situation.

82%

of veterinary professionals surveyed*

said their duties as a veterinary professional have interfered with their duties as a parent.

Today, my life is undoubtedly easier being in a management role, as I am not designated to a specific shift and I can attend school

functions during the day and make up my work in the evenings or early mornings. However, no matter what your work hours, when you work 40 hours a week there are sacrifices that have to be made. I've had to explain to my son—at a table seated with all his school friends—why I had to go back to work when all of their moms were picking them up at the bus stop. I then had to peel him off of me, while he was in tears, to go back to work. I try to keep in mind in these moments that I am setting a positive example for my son. While being able to stay home and spend every extra moment with your child

*SOURCE: DVM360 LEADERSHIP CHALLENGE: THE WORKING PARENT SURVEY

is fabulous, having your child see their mom work hard in the workplace to earn for their family and accomplish career goals is really important too. Also, the independence my son is able to achieve by going back to his friends and finishing his school day is equally important to him and his growth.

A big part of balancing work and parenthood is living in the moment. I found that I had less guilt and more appreciation for my time with my son (versus lamenting the time I was away from him) when I was able to switch roles back and forth and not have blurred lines between the two. When I am with my son, save an absolute emergency, I am dedicated to spending that time with him—not thinking about what I have to do tomorrow or stressing about what happened earlier at

When I am with my son, save an absolute emergency, I am dedicated to spending that time with him—not thinking about what I have to do tomorrow or stressing about what happened earlier at work that day.

work that day. Alternatively, when I am at work, I bust through and am completely absorbed in my tasks there. That way, I'm highly efficient and don't feel like I need to make that time up in the evenings after a full work day, aside from when I cut away for a school activity (and that ends up just being a swap of family time during the day versus evening).

It has also been a huge help having a partner who wants, and is able to, take turns attending school functions. My work often involves travel, so sometimes by the time I

hear of a field trip, I have a scheduled visit to one of our hospitals out of town. My husband will pick up the ones where I am out of town, and I fill in when I am able to aside from that. This way my son gets equal time with both of us, and I don't have to feel bad that I can't come to some of the field trips, lunches and performances. Additionally, when I travel for conferences, my son gets super excited to have "boy's time" with my husband. So while I may get homesick, I remind myself that my son has probably already forgotten I'm gone! I always take lots of fun

photos, video chat each day and bring back something special when I go out of town for a conference, which also makes the whole experience less painful for all of us.

Finally, I think having fun family routines, no matter how crazy your schedule is, can be very important. We have Sunday afternoon movie dates every weekend as a family and go to the art museum together after work and school every Friday. This gives you and your family something exciting to look forward to and a chance to bond, even on the craziest, longest of work weeks.

Oriana Scislwicz, BS, LVT, aPHR, is a Firstline Editorial Advisory Board member and practice manager at CVCA Cardiac Care for Pets in Richmond, Virginia.



What have apps done for you lately?

So much to do, so little time. Here are my favorite apps for getting it all done.

Torry Chamberlayne, RVT



OK, let's get serious. Full-time parent. Full-time career. So much to do, so little time. Sound familiar?

I hear you, friends. Whether you have one child or multiple—regardless of age, because let's be real, parenting never ends—there aren't enough hours in the day. I love learning new life hacks from other moms (and dads) to help with time management, health and wellbeing. Especially in the veterinary field, our days can be very unpredictable.

So, here are three apps I use to help me as a busy full-time working mom navigating this amazing and emotionally charged field.

Insight Timer

This app offers guided meditations. Starting the day off with meditation (a life hack in and of itself) helps me work with strengthened purpose, and I end up feeling like I'm able to accomplish more throughout the day. I liken it to spring cleaning, but for your mind. This app reminds me to meditate every day and keeps track of my favorite meditation settings.

Hello Fresh

This is more of a service than an app; however, I use the Hello Fresh app to modify and update my selections. Do you know how to immediately stress out a working parent? Ask the question, "What's for dinner?" Hello Fresh is a pre-packaged dinner service that's delivered to your doorstep. What I love is that you get to customize what you want, set up a specific delivery time, skip meals if you happen to be out of town and specify your dietary needs. I cannot tell you how freeing it is to not have to plan every single dinner. Game changer!

InstaCart

Grocery shopping. I don't know about you, but this can be a huge time suck for me. For the most part, I still do in-person grocery shopping, but when I forget items or need a few more things for the week, this saves me so much time. I love to pop on the app, order what I need from my local grocery store and get it delivered at the date and time I need it. I recently had a baby, and the fact that I don't have to pack up and take my newborn to the store is a huge relief!

Working parent bonus tip: The last thing I will leave you with is snacks ... healthy snacks. I get "hangry," so I make it a point to always have a snack stash: one in my purse, one in my car and one in my locker at work. That way I'm not tempted to run to the nearest coffee shop or drive-thru. While coffee shop pastries and fast food might serve as a quick fix, the energy never lasts for me and it weighs on your pocket book. If I were to give you a sneak peek into my snack stash, you'd find trail mix, popcorn singles, individual peanut butter packets and a variety of granola bars (preferably ones that won't melt). And more times than not, I grab an apple on my way out the door. Why? 1) Natural sugar boost, 2) they actually help clean your teeth and freshen your breath and 3) easy to eat and discard.

And for those of you asking, when it comes to apples, I'm a honeycrisp girl.

Torry Chamberlayne, RVT, is a San Diego, California, Field Director for Banfield Pet Hospital. She's been a technician for over 20 years, all while being a busy mom of six kiddos, two doggos and one guinea pig (guinea piggo).



Nutrient strategies for managing those (FIC)kle FLUTD cases

Most feline lower urinary tract disease is idiopathic, and while there may not be a cure, there are plenty of nutritional tweaks we can make to help manage the condition. *By Kara M. Burns, MS, MEd, LVT, VTS (nutrition)*

Feline lower urinary tract disease (FLUTD) describes any condition affecting the urinary bladder or urethra of cats. It is a common reason for hospital visits. As knowledge about the specific causes of FLUTD has grown over the past decade, diagnostic and therapeutic efforts are now able to be directed toward identifying and eliminating particular underlying disorders.

The most common cause of FLUTD in cats less than 10 years of age is feline idiopathic cystitis (FIC), followed by uroliths and then urethral plugs. A diagnosis of FIC is made by excluding all other causes of FLUTD. In cats older than 10, the most common causes of FLUTD are urinary tract infections and uroliths.^{1,2}

Diagnostics

Diagnostic evaluation of cats with recurrent or persistent lower urinary tract signs should include a urinary-



sis and diagnostic imaging. If the patient has a history of urinary tract manipulation (e.g. urethral catheterization), evidence of a urinary tract infection (e.g. pyuria, bacteriuria, malodorous urine), or the cat is older (usually > 10 years), a urine culture is also recommended.³

Survey radiographs help in identifying radiopaque uroliths and crystalline-matrix urethral plugs. Be sure to position the patient to include the caudal abdomen (urethra) in the radiograph. If not, you risk missing potentially important information. Even if the radiographs appear normal, FIC, radiolucent uroliths (urate/purine), small uroliths (< 2 mm), neoplasia, blood clots or anatomic defects may still be present. Abdominal ultrasonography and contrast urethrocytography are helpful in these cases. If no cause is identified after thorough diagnostic evaluation, a diagnosis of FIC is very likely.

Nutritional management

The two goals of managing cats with FIC are to decrease the severity of clinical signs and increase the interval between episodes of lower urinary tract disease. The following nutritional strategies can help.

Moisture. Feeding moist food (> 60% moisture) has been associated with a decreased recurrence of clinical signs in cats with FIC.⁴ During a one-year study, clinical signs recurred less often in FIC cats fed a moist food compared with cats fed the dry formulation of the same food.⁴ Relatedly, beneficial effects have also been observed in cats with FIC when urine specific gravity values decrease from 1.050 to values between 1.032 and 1.041,⁴

so you should discuss methods for increasing water intake (e.g. adding broth to foods, placing ice cubes in the cat's water, providing water fountains) with your clients.

Therapeutic diets. More recently, a 2013 study found that consistently feeding a therapeutic food for urinary conditions is associated with a reduction in recurrent episodes of FIC signs.⁵ This research was the first to definitively show that foods with different nutritional profiles impact the expression of acute episodes of FIC signs in cats.

Amino acids. L-tryptophan, a precursor of serotonin that inhibits neurotransmitters in the brain to balance mood, and hydrolyzed casein, a bioactive peptide that helps relieve anxiety in cats, have been identified as nutrients that can aid in managing the stress component of FIC.^{6,7}

Fatty acids. Inflammation plays a role in many causes of FLUTD, especially FIC and urolithiasis, which is why omega-3 fatty acids (and their anti-inflammatory effects) are key in managing cats with FLUTD. In addition, vitamin E and beta-carotene are helpful for counteracting oxidative stress and reducing free radical damage—conditions that often accompany inflammation.

Pour forth knowledge

One of the most impactful ways you can use this nutrition information to help your patients is to pass it along to your clients. If you're able to help them understand how nutrients play a role in managing FLUTD caused by FIC, they're much more likely to be compliant with the veterinarian's recommendations, and that's good for everyone involved—especially the patient.

Kara Burns is a licensed veterinary technician with masters' degrees in physiology and counseling psychology and is a VTS in nutrition. She is the founder and president of the Academy of Veterinary Nutrition Technicians and is the current president of NAVTA.

References

1. Burns KM. FLUTD – Using nutrition to go with the flow. *NAVTA Journal*, Convention Edition 2014;7-12.
2. Grauer G. Current thoughts on pathophysiology & treatment of feline idiopathic cystitis. *Today's Vet Pract* 2013;Nov/Dec:38-41.
3. Lulich JP. FLUTD: Are you missing the correct diagnosis?, in *Proceedings*. Hill's FLUTD Symposium 2007;12-19.
4. Markwell PJ, Buffington CA, Chew DJ, et al. Clinical evaluation of commercially available urinary acidification diets in the management of idiopathic cystitis in cats. *J Am Vet Med Assoc* 1999;214(3):361-365.
5. Kruger JM, Lulich JP, Merrills J, et al. A year-long prospective, randomized, double-masked study of nutrition on feline idiopathic Cystitis, in *Proceedings*. American College of Veterinary Internal Medicine Forum 2013; 504.
6. Pereira GG, Fragoso S, Pires E. Effect of dietary intake of L-tryptophan supplementation on multi-housed cats presenting stress related behaviors, in *Proceedings*. British Small Animal Veterinary Society 2010.
7. Beata C, Beaumont-Graff E, Coll V, et al. Effect of alpha-casozepine (Zylkene) on anxiety in cats. *J Vet Behav* 2007;2(2):40-46.

Technicians and telehealth: Where we are now, and where we could go

How are veterinary technicians' skills being leveraged alongside technological advancements now, and how can practices take telehealth a step further to reach more patients in the future?

By Kenichiro Yagi, BS, RVT, VTS (ECC, SAIM)

In a world where convenience is king, it comes as no surprise that the veterinary field is under pressure to change and adapt. Pet owners use the convenience criterion when deciding where to obtain veterinary advice and care, and between Dr. Google and social media, they have several instantly gratifying paths leading them to both reputable and not-so-reputable information.

Telehealth offers a way for veterinary practices to compete with the convenience of Dr. Google, and veterinary technicians and nurses are particularly positioned to help expand its use in the field.

WE SEE CE IN YOUR FUTURE.

Whether it's taking care of a patient or taking care of yourself, we've got everything you need at Fetch dvm360 conference. Learn more at fetchdvm360.com/baltimore.

Expanding existing roles with new tools

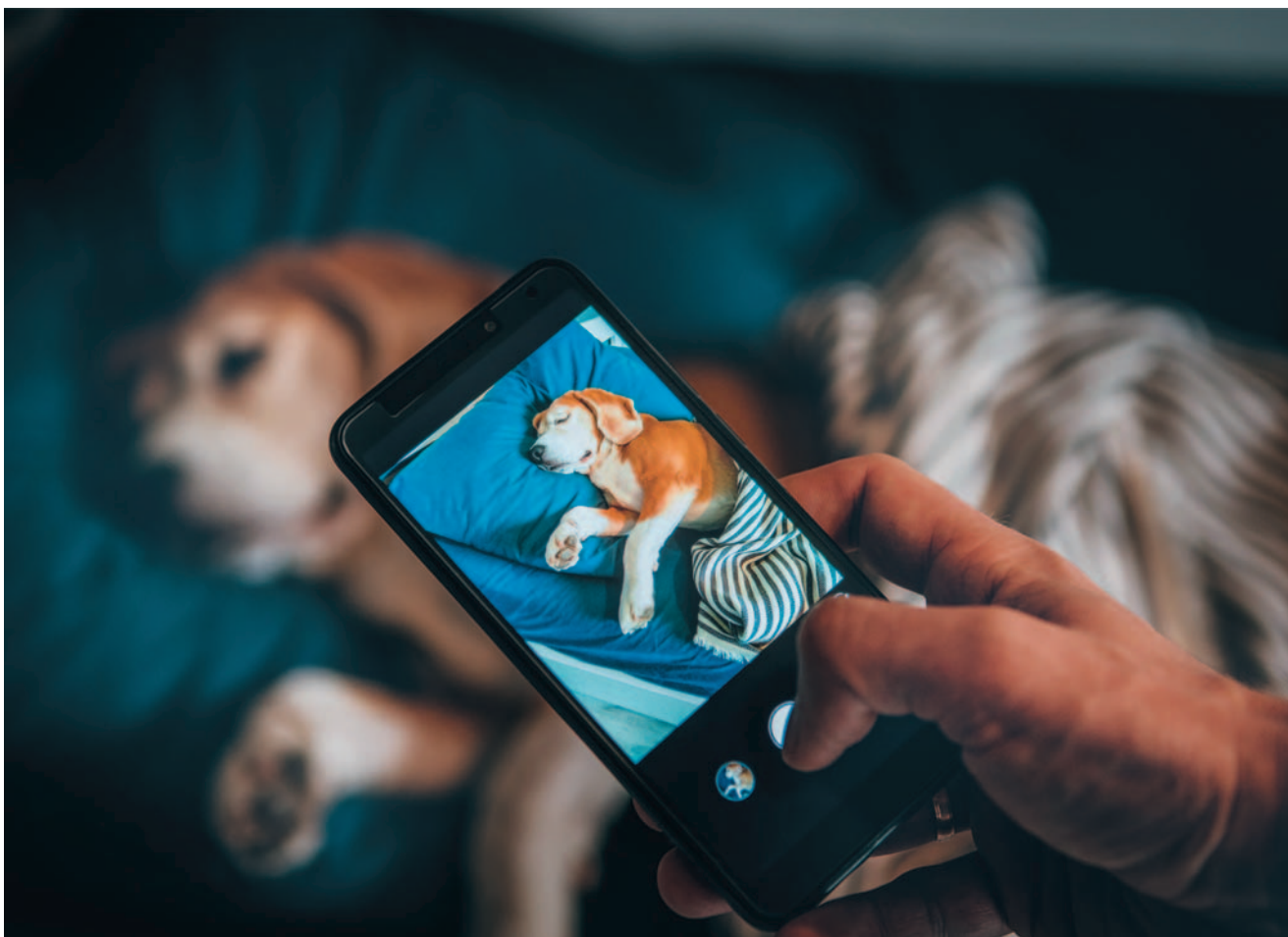
Telehealth isn't new by any means. Teleadvice, or general advice regarding the patient's health delivered via remote means, and teletriage, assessing how urgently a patient needs care based on information obtained remotely, has been provided by veterinary technicians and nurses by phone and email for decades. However, new digital communication technologies, such as the ability to send photos, video chat and conduct real-time chats through text or instant messaging, has expanded how and what information can be shared.

The role of technicians in telehealth especially shines when it comes to patients with an established veterinarian-client-patient relationship (VCPR). For example, a technician or nurse can have a discussion with a pet owner regarding postoperative wound healing and adequacy of pain control that includes photos and videos instead of having to rely on the owner's descriptions.

To provide another example, Bridge Veterinary Services, which is operated by Dr. Shea Cox in Berkeley, California, currently utilizes veterinary nurses in hospice care. Once the VCPR is established through a joint appointment with both the doctor and the technician, the technician can independently and remotely perform quality-of-life consultation appointments. Using photos and videos, technicians are able to see the patient's comfort level in the home environment and give advice while avoiding a potentially stressful visit clinic visit for the patient—a service that is invaluable to many pet owners.

The future of technicians and telehealth

The method in which the VCPR can be established is a common point of debate when discussing telehealth. Despite ever-advancing technologies, there simply isn't anything (at least yet) that can replace putting your own hands on an animal for a thorough physical exam.



Whichever side of the fence you may be on regarding this debate, let's ponder this thought: What if technicians and nurses could replace the veterinarian in providing the physical exam, report their findings and then have the doctor interpret them?

Consider this possible scenario: A veterinary technician is sourced from an app service that connects technicians with veterinary practices to reach clients requesting a house call. The technician visits the home of a miniature poodle with a history of congestive heart disease and

conducts a physical exam. She reports her findings of bilateral crackles upon auscultation, visible distension of the jugular veins and a systolic blood pressure of 180 mmHg to the veterinarian from the practice using the app service.

The veterinarian then uses this and other information obtained from the technician to deduce that the patient has likely developed pulmonary edema secondary to congestive heart disease.

The above scenario is just one example. There are many ways in

which we can responsibly leverage new technologies alongside the skills and expertise of veterinary technicians to reach more patients more effectively and, of course, more conveniently.

Kenichiro Yagi practices at Adobe Animal Hospital in California as an ICU and Blood Bank Manager. He is co-chair of the Veterinary Nurse Initiative and serves as a board member of the Veterinary Emergency and Critical Care Society, the Academy of Veterinary Emergency and Critical Care Technicians and the Veterinary Innovation Council.



Telemedicine: Join, or die?

Millennials have grown up with technology and the conveniences it affords, and if veterinary practices don't adapt to their expectations, they risk being replaced. *By Katie Adams, CVPM*

Telemedicine is a big buzzword in our industry right now, and with good reason. It seems that we are on the cusp of another shift in the way our clients want veterinary medicine delivered.

Banfield was ahead of its time when it rolled out wellness plans to clients in 1988, and it's taken the rest of the industry about 30 years to get on board. My hope is that we don't wait that long to embrace telemedicine, because being on the leading edge means we have the opportunity to shape what it will look like for our industry as opposed to falling into a mold created by someone else. Millennials are expected to overtake Baby Boomers in 2019 as the largest living adult generation. This generation has grown up with technology and all of the conveniences it affords. If we don't adapt, we'll be replaced.

So, what could telemedicine look like in your veterinary practice? If it were me, I would determine a specific set of ailments that, based on the particular patient's history, I would be comfortable diagnosing over the phone. For example, let's say Fido's history showed a bad case of otitis during the summer for the past two summers. If the owner called me in June saying Fido had the classic symptoms, I would feel comfortable scripting out my usual regimen (with the understanding that I would need to see the pet if it didn't clear as expected).

Ideally, I'd be able to see my client via FaceTime, Skype or something similar. I would charge a fee for the call similar to the current exam fee, and I would have the necessary medications filled in my pharmacy and overnighted (for

a fee) if more convenient for the client. There are more details to work out, of course, but that'd be the gist of it.

On average, clients wait 17 minutes to see the vet. They then spend 20 to 30 minutes in the exam room for the exam and diagnostics. If you add in the drive time to and from the office (let's say it's 20 minutes on average each way), that comes to 87 minutes total. Now, compare that with a 15-minute phone call (which, by the way, the pet owner can accomplish while doing other things like household chores and traveling), and you can see why this service supplies such a huge benefit to clients.

Katie Adams, CVPM, is director of Curriculum Development at IGNITE Veterinary Solutions. Got a question for Katie? Email us at firstline@ubm.com.



**Get more
product information
online**

Researching a purchase?
dvm360.com
offers hundreds more
product listings.

Just visit
dvm360.com/products

DENTAL



We make dentals easier.

Heal Extraction Sites 30-50% Faster • Help Prevent Oronasal Fistulas

Do you want to:

- fill the void
- encourage rapid healing
- promote healthy bone growth
- provide antimicrobial benefits
- prevent fistulas from forming

Request your FREE sample today!

Call 888.289.1890 or

Visit www.avalonmed.com



Avalon Medical
Innovative Veterinary Surgical Products

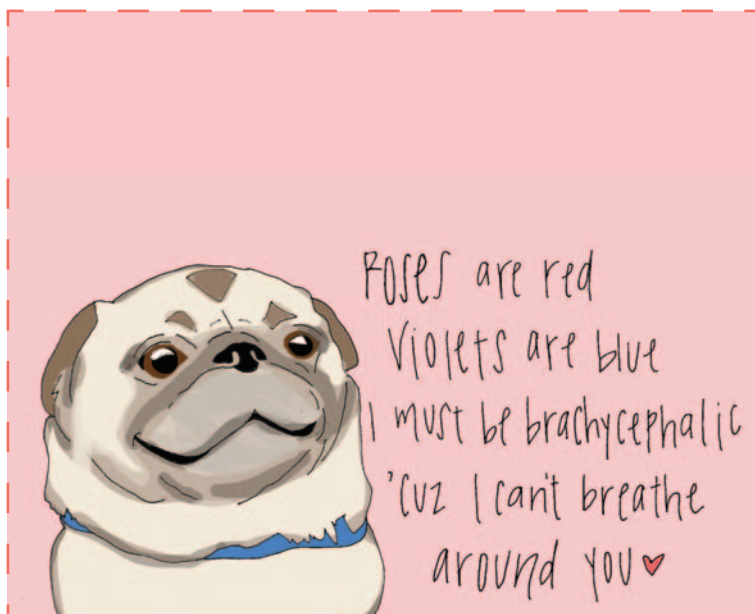


**PLACE YOUR
AD HERE**

Get your message to veterinarians
and team members **TODAY.**

Call Angie Homann at
(913) 871 3807, ext. 2629

angie.homann@ubm.com



Share the love with your punny vet tech valentine

Roses are red, violets are blue, here are some valentines written especially for you.

We love you, and we love what you do, so we wrote you a batch of funny and furry valentines! Sure, your friends outside the veterinary field might not appreciate the subtle charm of a shih tzu with ocular proptosis, but you're sure to get a chuckle from your best vet med friends. So, print this out, spread the love and never forget that you are a-mange-ing! Download and print yours at dvm360.com/MangeSqueeze.



Don't hole up and suffer alone.



You're **brilliant** and **capable** and practice the best medicine you can ... but you can't do it all by yourself. Our industry-leading educational event connects you with other lifelong learners ready to help you navigate your career in veterinary medicine.

Together, we can do *more.*

We have three dates and locations each year.

Go to fetchdvm360.com to learn more.

Register today.





PROVEN REDUCTION
IN KEY ORAL HEALTH INDICATORS^{1*}

HALITOSIS

53%

PLAQUE

42%

CALCULUS

54%

Defend against plaque, calculus, and halitosis



Fight the source of oral health problems
with the science of delmopinol.



The only chews with the power of delmopinol, **ORAVET®** Dental Hygiene Chews create a barrier against bacterial attachment—and when bacteria can't attach, they can't produce plaque biofilms or the volatile sulfur compounds of halitosis. **ORAVET** Dental Hygiene Chews have been proven effective in multiple canine trials, including "clean mouth" and "dirty mouth" studies.^{1,2} They are also highly palatable,¹ and the scrubbing action of the chew works in parallel with delmopinol to remove existing plaque and calculus. For full study results, contact your sales representative or visit oravet.com.

*Compared with dogs receiving dry diet alone

References: 1. Data on file. 2. Data on file.

ORAVET Dental Hygiene Chews are a Merial product.



Merial is now part of Boehringer Ingelheim.
ORAVET® and SERIOUS ORAL CARE MADE SIMPLE® are registered trademarks
of Merial. All other trademarks are the property of their respective owners.
©2018 Merial, Inc. Duluth, GA. All rights reserved. OVC17TRADEAD (02/18).

ORAVET®
DENTAL HYGIENE CHEWS
Serious Oral Care Made Simple®