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The
Senior
Issue

Optimizing the Golden Years, **26**
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Vol. 40, No. 11, November 2024

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Trends magazine provides timely perspectives on the art and business of companion animal veterinary practice to all members of the practice team.

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From the Editor



THANKFUL

How is it November already? I feel like I have asked myself that almost every month of the year so far. But here we are! Since Thanksgiving is coming right up, I wanted to say how thankful I am for you, the members of AAHA, and the entire vet med community. We have three dogs, and our local AAHA practice takes such good care of them, especially our senior girl, a 15-year-old goldendoodle, Tashi.

Which leads me to the theme of this month, the Senior Issue! This issue is packed with great information on senior care: from how to help your clients enhance the lives of their seniors through enrichment activities, to complementary medicine for seniors, to a look at some of the amazing AAHA-accredited end-of-life-care practices.

In this issue we also have a great article by Ewan Wolff, PhD, DVM, DACVIM (SAIM), looking at why there is a lack of representation of the LGBTQ+ community in leadership positions. And finally, we look at the new RECOVER CPR guidelines for veterinary professionals, which were updated earlier this year.

Coming Soon! The Digital Transition

Trends will be going fully digital starting January 1, 2025. While you will no longer be receiving a print edition of *Trends magazine*, going digital means we can provide lots of enhanced, interactive content, with up-to-date news stories, as well as the in-depth feature articles you have come to expect from *Trends* over the past 40 years. So enjoy this penultimate print issue, and then next year, make sure you log on to aaha.org to keep getting the best content that vet med has to offer.

Nominate Your Employee of the Month

Don't forget to head over to aaha.org/EOTM to nominate one of your coworkers for the Employee of the Month contest, and you could win \$100 for yourself, and \$400 for your nominee. There is no catch—it's free to enter and you get free money!

Coming Next Month

December is the final print issue! It will focus on the future of vet med and also have a look back at some of the highlights of the last 40 years of *Trends* in print. We'll also have some specific info on how to log onto the new *Trends* and what to look for in the new year. (How is it the new year already?)

As always, let me know what you think at trends@aaha.org.


Ben Williams
Editor

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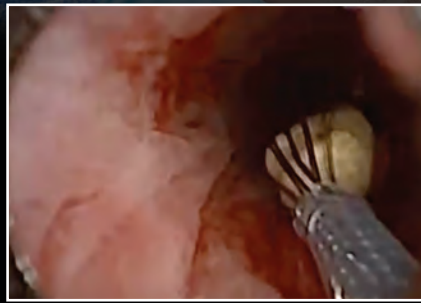
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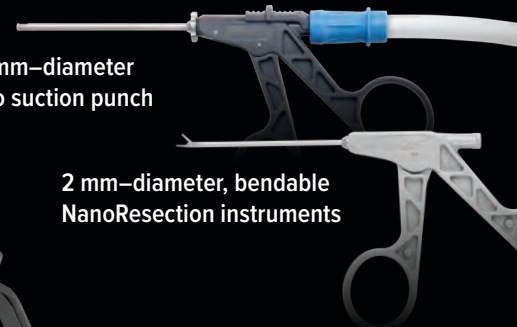
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Contributors



Mary Gardner

Mary Gardner, DVM, is a veterinarian, speaker, author, and cofounder of Lap of Love Veterinary Hospice, which offers end-of-life care for pets in their own home. She developed the proprietary software for Lap of Love and was VMX Small Animal Speaker of the Year in 2020.



Emily Yunker

Emily Yunker, DVM, CVMRT, CVH, graduated from Auburn University in 2013. She has certification in veterinary massage and rehabilitation (CVMRT) and is a certified veterinary herbalist (CVH). Yunker works in rehabilitation and integrative medicine in Cary, North Carolina.



Kelly Smith

Kelly Smith is an award-winning editor and writer who has enjoyed pet companions ranging from dogs and cats to birds, fish, frogs, pygmy goats, rabbits, guinea pigs, and more. She and her family live on a small acreage near Denver. Kelly is a regular contributor to *Trends magazine*.



Ewan Wolff

Ewan Wolff, PhD, DVM, DACVIM (SAIM), is a board-certified internal medicine specialist at BluePearl NE Portland. They are a PrideVMC Industry Liaison and currently serve on the scientific design review committee and institutional review board for BluePearl.



Scott Krick

Scott Krick, DVM, graduated from Cornell Veterinary School in 1987. He has trained veterinarians in laser surgery and was the primary investigator for 10 FDA clinical trials. Krick is currently the technical services veterinarian for companion animals at Norbrook, Inc.



Maureen Blaney Flietner

Maureen Blaney Flietner is an award-winning freelancer living in Wisconsin. She has won numerous awards for her writing in *Trends* over the years that she has contributed to the magazine.



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View from the Board

Be the voice for senior patients

One of the greatest rewards I have as a veterinarian is being the voice for my patients. This is never more important than when we are dealing with our senior patients. It is our duty not only to examine them for disease but also to educate the humans in the room about changes that occur as we age. As pets get older, their needs change. Diseases may manifest a little differently, and we must be careful not to explain away every change that happens with just getting older.

We must advocate for them and try to differentiate the normal age-related change from the abnormal change that needs to be addressed. This is where we come in, because we are the best trained and can see subtle changes that the family doesn't. This is in no way a doctor-only opportunity or mandate. It is important to get the whole care team involved in

recognizing the subtle signs to look for and how to explain them to the family.

Subtle changes such as mouth pain that may manifest as uneven tartar buildup, reduced range of motion in both hips with no limping because they both hurt equally, or changes in how they interact with the family are all very important and not always obvious. It is our job and our duty to look for these signs to allow our patients the best quality of life possible for as long as possible.

Conversely, I also find myself trying to explain benign changes that the family is fixated upon but the senior patient has no idea even exist. I try to communicate when dealing with senior pets that we should focus on the pet's goals and concerns first, then on ours. If that 15-year-old Maltese with severely arthritic knees and stage 3 renal disease is not concerned about a

little porphyrin eye staining that she's had her entire life, then it is not high on my list either.

We are in a unique position to be the voice of our patients. I still say we are part of the greatest profession, because we can be their advocate if we look and educate. There is no way to win the fight against aging, but we can focus on making the process as graceful and as comfortable as we can. They deserve nothing less.

Scott Driever, DVM, is president of the AAHA board. Driever is a Houston native who received his DVM degree from Texas A&M University in 2000. Upon graduation, he moved back to Houston and began his veterinary career at Animal Hospital Highway 6 in Sugar Land, Texas, where he became a partner in 2005. In 2015, he purchased the rest of the practice and became the sole owner. His wife, Susan, is the office manager at the practice.





The Scoop

Texas A&M researcher explores benefits of AI in vet med

Candice Chu, DVM, PhD, an assistant professor at the Texas A&M College of Veterinary Medicine & Biomedical Sciences (VMBS), has created a “virtual study partner” to help veterinary students prepare for exams. The tool is based on ChatGPT technology called VetClinPathGPT.

Students using the tool can “chat” with AI to ask questions about terms and concepts and

request study questions. Chu has also published a list of ways for AI to increase efficiency and expand the abilities of educators and clinicians.

Chu is also partnering with the VMBS’ Gastrointestinal Laboratory and the Texas A&M Institute of Data Science on a machine learning project to see whether AI can help diagnose acute pancreatitis in dogs.

FidoCure receives patent for AI-driven treatment for canine cancer

A patent for a novel targeted therapy and biomarker for canine cancer was recently announced by FidoCure. The patent covers an AI-driven novel treatment approach using evidence from veterinary clinical data and guided by mutation profiling for managing bladder cancer in canine patients.

FidoCure has created a huge canine cancer dataset, with more than 2 billion data points collected from patients treated in its network of 1,350 veterinary clinics.

Early data from FidoCure indicates that the newly patented therapy may be more efficacious than conventional treatments. The company will seek FDA approval.

AVMF grant supports veterinary relief in Ukraine

The American Veterinary Medical Association (AVMA) recently reported that the American Veterinary Medical Foundation (AVMF) has awarded a \$50,000 grant in continuing support of veterinary relief efforts in Ukraine since the Russian invasion in 2022. The grant to the Ukrainian Small Animal Veterinary Association (USAVA) and the Ukraine Veterinary Medical Foundation (UVMF) will be used to maintain a mobile veterinary clinic operating in the war-torn country and to purchase feed for several thousand animals.

The AVMF has raised more than \$667,000 in disaster relief for Ukraine since the start of the war in 2022, according to the executive director of the AVMF.

In addition to the mobile veterinary clinic, AVMF’s financial support helps provide Ukraine’s animals and pet owners with shelter,



Quote of the Month

Pets are humanizing. They remind us we have an obligation and responsibility to preserve and nurture and care for all life.

James Cromwell



Colorado ballot measure proposes veterinary professional associate position

This November, Colorado voters will vote on creating the role of veterinary professional associate (VPA) in their state. The position requires a master's degree and registration with the state board of veterinary medicine to practice under supervision of a licensed veterinarian. The ballot measure was spearheaded by the Vet Care Coalition, an alliance of animal welfare organizations and advocates, veterinarians, and pet owners. It is supported by The Animal Welfare Association of Colorado and the ASPCA.

Advocates compare VPAs to physician assistants in human medicine and cite the measure as necessary because of workforce shortages in underserved areas. Those opposed to creating the VPA position include the American Veterinary Medical Association and the American College of Veterinary Surgeons, along with other organizations. Concerns include adequacy of training for the VPA position, quality of patient care, and legal liability.

Bird flu found in domestic cats in Colorado

The Colorado State Veterinarian in the Department of Public Health recently released the following information and advice. So far in 2024, six feline cases of influenza A (HPAI H5N1), also known as bird flu, have been diagnosed in domestic cats in Colorado. One of these cases was directly associated with a known infected commercial dairy facility. Two of the six cases were indoor-only cats with no direct exposure to the virus.

Three of the six cases were known indoor/outdoor cats that

hunted mice and/or small birds as prey and also spent time indoors with their owners.

Five of the six cases have presented with similar clinical signs and disease progression: an initial complaint of lethargy and inappetence, followed by progressive respiratory signs in some and fairly consistent progressive neurologic signs in most.

HPAI H5N1 infection should be considered in domestic felines even if all of the risk factors or clinical signs are not present.



Community

Looking for animal handling tips and tricks

I am having difficulty with newer and some older vet assistants in regard to animal handling. My doctors have raised safety concerns, and we've noticed a recent uptick in bite incidents. Currently, all new hires receive safety training from our shelter manager, but I'd appreciate any additional resources or strategies we can implement to address this issue.

A: We regularly hold Animal Restraint 101 sessions, led by a tech who specializes in restraint techniques, using employee pets for hands-on practice to keep everyone, even veterans, up to date.

A: For new hires, we provide one-on-one training in animal restraint, with an experienced team member ready to step in and ensure the pet is safely restrained before any procedure begins.

AAHA members, add your tips to the conversation at community.aaaha.org. For help, email community@aaaha.org.

Project Street Vet Tour for pets of unhoused people

Earlier this fall, Project Street Vet, a national nonprofit led by 2023's CNN Hero of the Year Award recipient, Kwane Stewart, DVM, and sponsored by Fetch Pet Insurance, launched a multicity traveling tour, providing free services and supplies for pets of individuals experiencing homelessness. The services included veterinary care, vaccinations, medical and pet supplies, and food. The tour stops included Orlando, Los Angeles, Atlanta, San Diego, and Riverside, California. In each city,

Stewart was joined by a dedicated group of Project Street Vet local veterinarians.

Founded by Stewart in 2020, Project Street Vet empowers veterinarians to provide free veterinary care for pets of people experiencing or at risk of homelessness. Stewart and his team have treated more than 2,500 pets, recruited more than 100 volunteers, and partnered with nearly 120 community organizations, hospitals, and clinics to serve pets nationwide. Overall, Project Street Vet has raised more than \$2.6 million.



Kwane Stewart, DVM, examines a patient as part of Project Street Vet. Photo credit: Ian Stewart/Project Street Vet.

FDA finds no public health concern associated with Nestlé Purina Pet Care pet food

After thoroughly analyzing over 1,000 adverse event reports, the US Food and Drug Administration (FDA) has determined that there is no public health concern associated with Purina Pet Care pet food.

The agency followed standard processes in evaluating the adverse event reports and identifying those most likely to yield additional information. It tested opened products from pet owners and sealed products from retail settings, and conducted a facility inspection, concluding that the existing evidence does not identify a public health concern that could explain the symptoms detailed in the adverse event reports about Purina pet foods.

The FDA continues to monitor and evaluate pet food adverse event reports to identify potential follow-up actions.



Let's Amplify your journey to AAHA Accreditation!

The AAHA Amplify Accreditation Program is an instructional platform allowing veterinary practices to pursue AAHA accreditation as a group, or cohort.

This course provides a safe learning environment that carefully explains the AAHA Standards of Accreditation to promote comprehension and implementation of the standards with the aim of achieving accreditation. Participants attend live, instructor-led virtual sessions every two weeks and complete 12 modules before their scheduled AAHA evaluation date.

The Amplify Team strives to provide constant communication to the program participants via different platforms to update them on upcoming instructional modules, assignments, AAHA

accreditation resources, and one-on-one consultations to help meet their goals.

Through the AAHA Amplify Accreditation Program, participants work collaboratively as a group to create protocols, exchange innovative ideas, and share resources to aid in their journey toward accreditation. Participants receive personalized feedback on all assignments and areas of concern to ensure their smooth progression through the accreditation process. Within our teaching cohorts, participants build relationships that will continue to grow outside of the program to help gain support through networking and growth as an AAHA-accredited member.

Our goal with the AAHA

Amplify Accreditation Program is to establish a collaborative relationship between the participants as they pursue accreditation. Amplify encourages practice cohorts to use best practices, involve the whole veterinary team, seek out new opportunities for excellence, and most of all, to see the value of being AAHA accredited. For more info, visit aaha.org/amplify.



A group accreditation program

Ophthalmologists treat white tiger with new laser technology

In a recent “Case of the Month,” published in UC Davis’ VetMed News, Rob Warren introduced Falcor, an 11-year-old, 412-pound white Bengal-hybrid tiger living at the Performing Animal Welfare Society (PAWS) sanctuary in San Andreas, California.

A dark melanotic mass on Falcor’s right eyelid concerned Jackie Gai, DVM, director of PAWS veterinary services, who consulted

the Ophthalmology Service at the UC Davis veterinary hospital. Thanks to a donor, the service had recently acquired new laser equipment. “We are one of only a few veterinary hospitals that have this equipment,” said Kathryn Good, DVM, DACVO, chief of the Ophthalmology Service.

In photodynamic therapy, the laser treatment used on Falcor, the eye tumor is first surgically removed,

and then a specific photo-sensitive dye is injected into the surgical site. The dye’s therapeutic properties are activated by the laser, which creates an immediate scab that protects the area from infection, attempts to target and kill remaining cancer cells, and “seals” the surgery site without sutures.

Falcor remained stable throughout the procedure and has recovered well.



Laser treatment being performed on Falcor's eyelid. Photo Credit: UC Davis

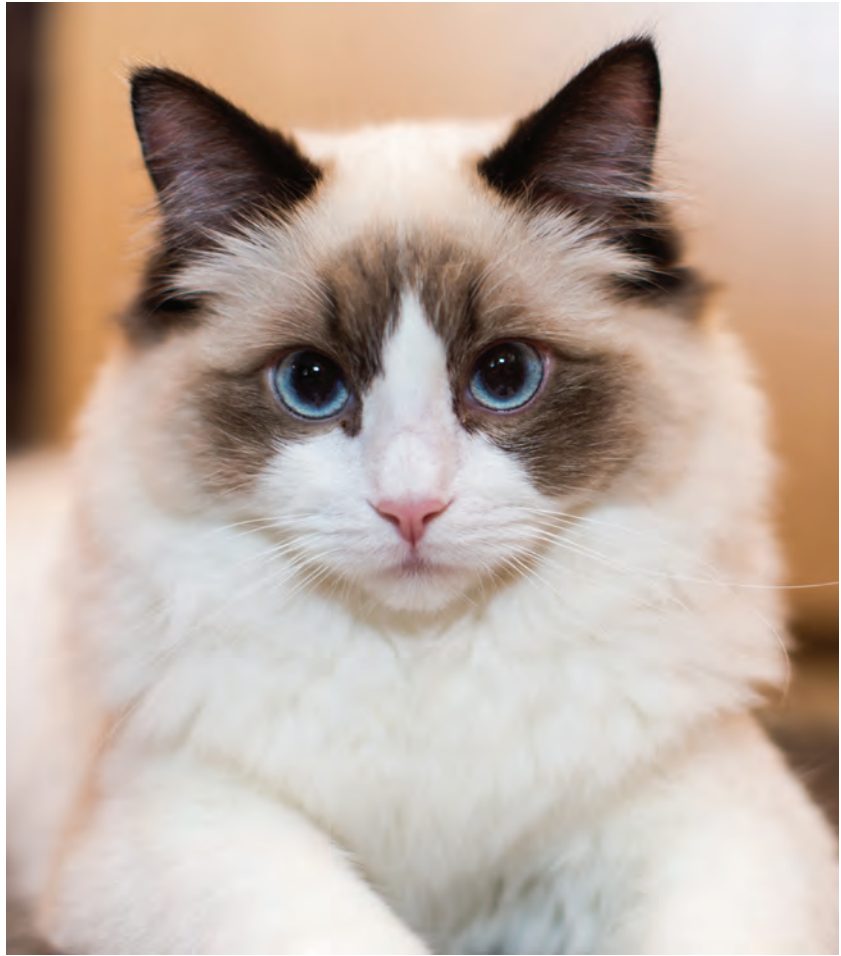
Partnership addresses challenges in independently owned practices

The Veterinary Cooperative (TVC), a group purchasing organization for independent veterinary practices, has announced a new partnership with Hound, a leader in technology focused on veterinary staffing, retention, and employee engagement.

Hound's technology-driven approach includes the following tools for staffing and team retention.

- Hound's Relief Rover platform provides flexible, on-demand access to relief professionals.
- Rally, an employee recognition and engagement app, fosters a positive workplace culture.
- Scout, Hound's platform for permanent hires, connects people and practices across the country.

"Our partnership with Hound couldn't come at a better time," said Kim London, director of strategic partnerships at TVC. "As independent veterinary practices struggle with burnout and high turnover rates, we're excited to bring Hound's critical resources to our members, helping them maintain thriving, well-supported teams."



Novel treatment successfully cures ragdoll cat with rare immune disease

Gaston, a six-month-old ragdoll cat suffering from recurrent ear infections, crusts, and lesions on his ears, was the subject of a recent "Clinical Case Challenge" published in Tufts University's Cummings School of Veterinary Medicine News. Gaston was treated by the dermatology team at Henry and Lois Foster Hospital for Small Animals at Cummings School of Veterinary Medicine. He was diagnosed with feline proliferative and necrotizing otitis externa (PNOE), a rare immune-mediated condition.

Despite a continuous course of tacrolimus, a topical

immunomodulatory ointment, Gaston's symptoms persisted in his left ear. Tests confirmed that his PNOE now involved his middle ear.

Cyclosporine proved ineffective and Gaston's heart condition ruled out steroids. Surgery was scheduled, but first the team tried using oclacitinib, an active ingredient in an allergy medication typically prescribed to dogs.

Gaston's positive response to oclacitinib resulted in cancellation of his surgery. He is now in complete remission after being the first cat with feline PNOE successfully treated with oclacitinib therapy.

MSU students participate in Rural Area Veterinary Services Program

In the summer of 2024, several Michigan State University (MSU) veterinary students volunteered for Rural Area Veterinary Services (RAVS). In a recent MSU Vetschool Tails article, Raquel Mueller reported on the experience of three DVM students entering their second year. Their RAVS group was able to help upward of 900 animals during two weeks in North Dakota.

RAVS is a program within the Humane Society of the United States that “works to expand access to veterinary care in underserved rural communities.” It provides volunteers an opportunity to observe and practice veterinary skills in a unique setting under the mentorship of veterinary professionals. Treating as many pets as possible in less-than-ideal conditions pushes creative solutions and gives students a better understanding of the ways lack of veterinary access can impact communities.



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Elanco Animal Health expands production capabilities

Elanco Animal Health Incorporated recently announced a 25,000-square-foot expansion of its biologics manufacturing facility in Elwood, Kansas. The \$130 million investment will, according to the company’s news release, facilitate growth of the company’s monoclonal antibody (mAb) platform.

Elanco’s Elwood facility manufactures and ships its canine parvovirus monoclonal antibody (CPMA), the first and only targeted treatment for canine parvovirus conditionally approved by the USDA. This is Elanco’s first mAb on the market. The Elwood facility will play an essential role in producing Elanco’s next monoclonal antibody, a potential canine dermatology product in 2025.

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* Both studies and anecdotal evidence from our customers have shown that the lactobacillus reuteri in CaniOtic supports a healthy immune system and significantly reduced the frequency and duration of diarrhea.

USDA takes action to address wildlife rabies outbreaks in multiple states

The US Department of Agriculture (USDA) recently approved the release of nearly \$19 million in emergency funding to address current wildlife rabies outbreaks in multiple states. This funding allows USDA's Animal and Plant Health Inspection Service (APHIS) to address emerging rabies cases in high-risk areas and to establish a sufficient stockpile of oral rabies vaccination (ORV) baits for future use.



High-risk areas include Watertown and Buffalo, New York; Youngstown, Ohio; Pittsburgh, Pennsylvania; Birmingham, Alabama; and rural regions of eastern Vermont and western New Hampshire. APHIS will implement supplemental ORV operations that may include increasing bait density, expanding the area currently under management, and conducting additional ORV baiting actions.

APHIS administrator Michael Watson said, "By reducing rabies in wildlife populations, we are safeguarding both human and animal health and decreasing the risk of disease spread, which would jeopardize the success APHIS has achieved since 1995 in managing rabies."

Cats Like to Play Fetch Too

Fetch: It's not just for dogs. That is the finding of a new study published in the journal *PLOS ONE*. In the study, researchers analyzed data from thousands of online surveys of cat owners, conducted between 2015 and 2023. Of the more than 8,000 cat owners surveyed, about 40% said their cat would return thrown objects to them.

"We hope that the study draws more attention to fetching behavior in cats, who are often portrayed as independent and aloof," said the lead author of the study, Mikel Delgado, PhD. "In fact, they can be very social and this is a nice example of one way they are interactive with humans."

5 Questions for a **Neurology** Specialist

Sheila Carrera-Justiz, DVM, DACVIM (Neurology)

Sheila Carrera-Justiz, DVM, DACVIM (Neurology), is clinical associate professor and neurology service chief at the University of Florida College of Veterinary Medicine.



1 What made you choose your specialty area?

I chose neurology because I love the way that you can use a physical examination to tell you where the problem is coming from. I also get to do surgery, diagnostic imaging, medicine, critical care, and oncology, so I'm never bored.

2 What is one thing you wish you could tell technicians regarding your specialty?

I want GPs to know three things. The first is that if you can do a basic neuro exam, you've got a ton of information to share. The

second is that you can always call your local, friendly neurologist or one at a university to talk about a case. And the last thing is to use technology to your advantage. Ask your clients for videos and send them to the neurologist for some input.

3 What is one thing that pet owners could do that would make your job more satisfying?

I feel pretty lucky in that the vast majority of my clients follow up with us when we ask. It's not only medically important, but also just amazing to know how well patients are doing after treatment.

4 What is the most rewarding part of your job?

Neurosurgery for disc disease—we see these acutely paralyzed dogs, and we can often get these guys up and walking within a short time with surgery. It's an amazing feeling.

5 What advice would you give to someone considering your specialty?

Talk to a few neurologists about their journey and what they love. We all have a slightly different way of looking at our jobs, and we definitely want to bring more people into our specialty.



Community Care



Guidelines

The 2024 AAHA Community Care Guidelines for Small Animal Practice are generously supported by CareCredit, Hill's Pet Nutrition, Merck Animal Health, and Pawlicy Advisor.

Access to care starts with you!

The AAHA Community Care Guidelines are more than a set of recommendations—they are a call to action for veterinary teams to create a more inclusive healthcare system for pets and their people.

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Read the AAHA Community Care Guidelines for Small Animal Practice, available now at aaha.org/community-care.



AAHA MEMBER

Employee of the Month

Vicky Woods

Veterinary Assistant and Kennel Worker

Animal Medical Center, Eustis, Florida

Year started in vet medicine: 2021

Years with practice: 3 months

In their own words:



Why do you love your job:

I have a sense of purpose in caring for animals and love to advocate for animals and patients.



Pets at home:

Two cats, Luna and Stella, and a dog, Nova (German shepherd).



What brought you to the profession:

I grew up around animals and knew at a young age that veterinary medicine was my passion.



Hobbies outside of work:

Trail walking, fishing.



Favorite book/TV show:

Harry Potter series.

Nominated by
Rhonda Sayle

Why is Vicky so awesome?

Vicky has been with us a very short time but goes above and beyond expectations, always with a smile and her "can do" attitude. Her empathy, patience, and gentle nature go a long way with our patients and team! Vicky's work ethic is unquestionable, and she is always at work on time and eager to help.

How does she go above and beyond?

Vicky makes sure all the boarding pets and hospitalized pets are clean and comfortable. She will do anything asked of her with a smile. She is always prompt to work and is professional with our clients.

Each month in Trends, we will spotlight a team member from an accredited practice. Does your team boast an outstanding veterinarian, veterinary technician, veterinary assistant, customer service representative, or kennel worker? Nominate your employee at aaha.org/EOTM, and you and your employee can win \$500 in gift cards courtesy of CareCredit!



*The Employee of the Month contest is administered by AAHA.

Photo courtesy of Vicky Woods



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Case Report of the Month



A Fear of Slippery Floors

What do you do when a service dog is crippled by fear and can't do her job? That scenario played out in a recent case report in the *Journal of the American Animal Hospital Association (JAAHA)*.

The report describes a 3-year-old golden retriever, who was trained to help her handler, a 16-year-old girl, by interrupting the girl's panic attacks. The dog would do this by putting her paws up on the shoulders of the girl, or by leading her to a quiet spot and lying on top of her to calm her down.

However, at age 2 the dog began displaying fear when presented with tile floors or other shiny, slippery surfaces. Since the girl needed her dog in a school setting, which had many tile floors, this fear prevented her from performing her job.

JAAHA[®]
JOURNAL OF THE AMERICAN ANIMAL HOSPITAL ASSOCIATION

Did this canine hero have to retire, or was she able to overcome the slippery slope of her phobia?

To find out, read the full article **“Treatment of Nonsocial Environmental Fear in a Service Dog Using Fluoxetine and Behavior Modification,”** in the latest issue of *JAAHA*, available at jaaha.org.



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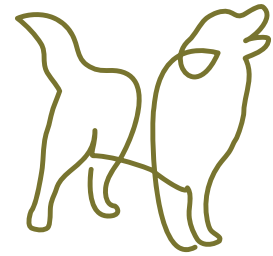




Optimizing the
*Golden
Years*



Capuskife + via Getty Images Plus



Help Senior Pets Live Their Best Lives

BY MARY GARDNER, DVM

There is literally nothing better to me than an old dog or cat. Sure, I get carried away when I see a puffball of a kitten or smell that amazing puppy breath. But I can set them down and walk away without a second thought.

But when I see a lumpy old dog with opaque eyes and a weak and wobbly gait, or a skinny old cat with half their whiskers and a creaky old meow, I'm gaga, head over heels, in love!

In my practice as a hospice veterinarian, I've seen my share of sugar faces and scrawny cats—I really do have the best patients and families. But what I struggle with is knowing that most dogs and cats are not seen by their veterinarian in the last year of their life.

A number of studies I conducted with VetSource show that about 48% of pets in the US have not been to their GP vet in the 12 months before they are euthanized. And I think that number is higher, as we were not able to account for pets euthanized at ERs or in-home or those who died naturally.

With that said, it has been my mission to help veterinary clinics attract these super seniors into their clinics and arm these clinics

with useful, practical tips to give owners—tips that will allow the seniors (and their caregivers) to have as easy a last chapter in life as possible.

I could talk endlessly about senior pets, but I'll focus on these three key aspects of senior care:

- Enrichment activities to keep aging animals mentally and physically sharp
- Maximizing the quality of life during a senior pet's golden years
- Guiding clients on embracing the unique joys and challenges of caring for senior pets

The Importance of Enrichment in Senior Pet Care

Cognitive Decline in Senior Dogs and Cats

As pets age, cognitive decline becomes a significant concern for both their physical and mental wellbeing. Cognitive dysfunction syndrome (CDS) in dogs and feline cognitive dysfunction (FCD) in cats are conditions akin to Alzheimer's disease in humans. These syndromes manifest as a gradual deterioration in cognitive abilities, affecting memory, learning, perception, and awareness.

Age of Onset and Prevalence

For dogs, signs of CDS often appear around the age of 8 to 10 years, though this can vary based on breed and individual health. Studies indicate that up to 28% of dogs aged 11 to 12 years and 68% of dogs aged 15 to 16 years exhibit at least one sign of cognitive dysfunction.

In cats, the onset of feline cognitive dysfunction (FCD) generally occurs around 10 to 11 years of age. Research shows that

approximately 28% of cats aged 11 to 14 years and up to 50% of cats aged 15 years or older demonstrate behaviors associated with cognitive decline.

Practical Tips for Home Care and Enrichment

Although cognitive decline cannot be completely halted, there are several strategies that can help slow its progression and improve the quality of life for both pets and their owners. Implementing a combination of cognitive, physical, and sensory enrichment activities can provide mental stimulation and maintain overall wellbeing.

Enrichment is a vital component of senior pet care. According to the *2023 AAHA Senior Care Guidelines*, maintaining both mental and physical stimulation in aging pets is crucial to preventing cognitive decline and supporting overall health. Enrichment activities help address common issues such as reduced mobility, anxiety, and boredom, all of which can impact a pet's wellbeing as they age.

Cognitive Enrichment:

Mental stimulation is key to keeping senior pets' minds sharp. These activities not only engage their brains but also help alleviate stress and anxiety, which can be common in older pets.

Interactive Toys and Puzzles:

Introduce toys that challenge pets to think and solve problems. For dogs, puzzle feeders can keep their minds engaged. For cats, toys such as the Catit Senses 2.0 Digger encourage problem-solving and mimic hunting behaviors.

Training Sessions: Regular, short training sessions can reinforce learned behaviors and introduce new ones, helping to keep the brain active. Use positive reinforcement techniques to make these sessions enjoyable for the pet.

Physical Enrichment

Physical activity should be adapted to suit the abilities of senior pets.

Gentle Exercise: Regular, low-impact exercise is crucial for maintaining physical health and reducing anxiety. For dogs, consider daily walks that allow them to explore their environment at their own pace. Swimming is another excellent low-impact option for dogs with joint issues.

Environmental Modifications:

For cats, ensure that they have easy access to elevated areas by providing ramps or steps. This allows them to continue engaging in natural behaviors like climbing and perching without straining themselves.

Senior pets often have a gentle, affectionate nature that reflects the strong bond they've developed with their owners over the years.



Sensory Enrichment:

Incorporating sensory enrichment into a senior pet’s routine can be particularly beneficial.

Sniff Walks and Snuffle Mats:

Scent-based enrichment is particularly effective for dogs as their sense of smell remains strong into old age, and sniff walks—where the focus is on exploring scents rather than covering distance—can be incredibly enriching. Scatter feeding, where treats are hidden around the house or yard, allows dogs to use their noses to search for food, engaging their natural instincts and providing mental stimulation. A snuffle mat can be used indoors to provide similar enrichment by hiding treats for them to find.

Sensory Gardens: Cats also enjoy a good sniff! Creating a small sensory garden with cat-safe plants

like catnip or silver vine can offer olfactory stimulation. Indoors, rotating different textured toys and blankets can help keep their environment engaging.

Emotional Enrichment:

This final type of enrichment should not be ignored. Dogs and cats have rich emotional lives that should be nurtured.

Routine and Predictability:

Maintaining a consistent routine helps reduce anxiety and confusion in pets with cognitive decline. Ensure that feeding times, walks, and play sessions occur at the same time each day.

Social Interaction: Regular interaction with familiar humans and pets helps maintain emotional health. Encourage gentle play or grooming sessions that provide comfort and reassurance.

Maximizing Quality of Life: Safety and Home Environment

As pets age, their physical and mental needs change, requiring adjustments in their daily activities and living environment to ensure they continue to enjoy a high quality of life. Families can play a crucial role in optimizing their senior pet’s golden years by incorporating enriching activities, as previously discussed, and creating a safe and comfortable home environment.

Creating a Safe Home Environment

As pets age, their mobility and sensory perception may decline, making it essential to adapt their living environment to ensure their safety and comfort.

Slip-Free Flooring

One of the most common issues for senior pets is slipping on hard floors, which can lead to falls and injuries. Using nonslip rugs and yoga mats can help provide the traction they need to move around safely. In areas where mats or rugs are not practical, I recommend products like Dr. Buzby’s ToeGrips.

Harnesses

By far, my favorite harness to recommend to parents for dogs of all sizes and mobility issues is the Help ‘Em Up Harness. This harness is designed with multiple points of contact that evenly distribute weight, providing balanced support for dogs with mobility issues. Its padded chest and hip straps ensure comfort while lifting, preventing pressure points and discomfort. The harness also features soft, cushioned handles, making it easy for owners to assist their dogs up stairs, into cars, or simply around the house.

Enrichment activities help address common issues such as reduced mobility, anxiety, and boredom, all of which can impact a pet's wellbeing as they age.

Accessible Furniture

Many senior pets have difficulty jumping onto furniture or climbing stairs. Installing ramps or pet stairs can help dogs and cats access their favorite resting spots without straining their joints. Ensuring that these ramps are stable and slip-resistant is crucial to preventing accidents.

Comfortable Sleeping Areas

Older pets often benefit from orthopedic beds that provide extra support for their joints. Heated beds can also be beneficial, especially for pets with arthritis, as they provide soothing warmth that can ease stiffness.

Safe Access to the Outdoors

For pets that enjoy spending time outside, ensuring their outdoor environment is safe is essential. This may involve securing fences, removing any obstacles that could cause tripping, and ensuring that the yard is free from hazards like toxic plants. For dogs that are no longer able to walk long distances, using a pet stroller and even a large garden cart for the bigger dogs allows them to enjoy the outdoors without overexerting themselves.

Easy Access to Food and Water

Senior pets may struggle to bend down to eat or drink, so elevating (and tilting) their food and water bowls can help reduce strain on their neck and back.

Embracing the Joys of Senior Pets: Guidance and Support for Pet Owners

Senior pets bring a unique and profound joy to their families. Their calm demeanor, their deep bonds, and the wisdom they've gained over the years make them cherished companions. However, caring for an aging pet comes with its own set of challenges. As veterinarians, it's important to guide pet owners in embracing these golden years while also being mindful of the potential

for caregiver burden. Here's how you can help clients navigate the joys and challenges of senior pet ownership.

The Unique Joys of Senior Pets

Senior pets often have a gentle, affectionate nature that reflects the strong bond they've developed with their owners over the years. Their companionship is steady, and they often provide a sense of comfort and routine. Reminding clients of these special qualities can help them appreciate the time



they have with their aging pets. Encourage them to focus on the positive aspects, such as the pet's loyalty, their calm presence, and the shared history that deepens the bond between them.

General Advice for Senior Pet Owners

Routine Veterinary Care:

Emphasize the importance of regular veterinary visits to monitor the health of senior pets. Early detection of age-related issues can significantly improve their quality of life. Suggest biannual checkups and recommend preventive measures like dental care, arthritis management, and weight control. But be sure to always ask owners what symptoms they are struggling with most. Knowing that will go a long way toward helping them manage their aging pet and creating a good bond with your clients.

Cognitive and Physical Enrichment:

Advise clients to keep their senior pets mentally and physically active through enrichment activities tailored to their abilities, as discussed earlier.

Creating a Safe Home Environment:

Encourage owners to make small adjustments at home to accommodate their pet's changing needs. A safe and comfortable environment helps reduce stress and prevent accidents, contributing to a higher quality of life.

Addressing Caregiver Burden

Caring for a senior pet can be emotionally and physically demanding, leading to what is known as caregiver burden. Pet owners may feel overwhelmed

by the responsibilities, especially when managing chronic illnesses or cognitive decline.

Acknowledge the Challenges:

Encourage clients to be honest about the challenges they face. Recognizing the stress and fatigue associated with caregiving is the first step in managing it effectively. It's important for owners to understand that feeling overwhelmed is normal and that help is available.

Offer Support Resources:

Provide resources that can help alleviate caregiver burden. This could include recommending local pet sitters or respite care services that can give owners a break. Additionally, suggest online support groups or counseling services where they can share their experiences and receive emotional support. A great website with more tools is www.petcaregiverburden.com.

Encourage Self-Care:

Remind clients that taking care of themselves is crucial to providing the best care for their pets. Encourage them to set aside time for activities they enjoy and to seek help when needed. Simple actions like establishing a daily routine, setting realistic goals, and seeking assistance can make a significant difference in reducing caregiver stress.

Connecting Owners to Resources

Veterinarians can play a key role in connecting pet owners to valuable resources. Recommend books, websites, and tools that provide guidance on senior pet care. For example, my two books, *It's Never Long Enough* for dog owners and *Nine Lives are Not Enough* for

cat owners offer comprehensive advice on caring for senior pets, from practical tips on daily care to strategies for maintaining the human-animal bond during the senior years. Additionally, direct clients to credible online sources, such as educational websites or forums, where they can learn more about caring for senior pets and connect with other pet owners facing similar challenges.

Senior pets bring immeasurable joy to their families, but caring for them requires understanding, patience, and support. By providing practical advice, acknowledging the potential for caregiver burden, and connecting owners with resources, veterinarians can help ensure that these golden years are as fulfilling and happy as possible for both pets and their families. Encourage clients to cherish the time they have with their senior pets, focusing on the unique bond they share while also taking steps to manage the challenges that come with aging. ■

Further Reading

Gardner, M. (2023). *It's Never Long Enough: A Practical Guide for Caring for Your Geriatric Dog*. Rolled Toe Publishing.

Landsberg, G. M., Hunthausen, W., & Ackerman, L. (2012). *Canine and Feline Behavioral Medicine: A Guide for Practitioners (2nd ed.)*. Saunders Elsevier.

2023 AAHA Senior Care Guidelines, aaha.org/senior-care.





Better Health and Joyful Connections for Senior Pets

Including Complementary and Alternative Medicine

BY EMILY YUNKER, DVM, CVMRT, CVH

Here is a question for you: What exactly is complementary and alternative veterinary medicine (CAVM) and why should we be considering it?

Simply put, complementary and alternative treatments are any treatments that are not part of a standard medical treatment plan. This is admittedly a vague definition. There are entire professional colleges of boarded experts for nutrition and for sports medicine, yet these are not always parts of a “standard medical treatment plan.” Rather than trying to categorize various treatments and approaches as “CAVM” or “standard,” I prefer to take an “integrative” approach. Integrative medicine includes as many varied treatment options as are available and appropriate to the individual case, whether they are “standard” or not.

As animals age, they tend to accumulate more medical problems, many of which cannot be cured. Instead, they require long-term management. These accumulated conditions present challenges to treatment. For instance, animals with kidney disease, heart disease, and dental disease are enough to give most veterinarians anxiety. It would be nice to have more treatment options for dental disease or heart disease that do not place strain on the kidneys, for example. When we expand our treatment options and consider more integrative treatment plans, we can improve the overall wellbeing of animals, support the human-animal bond, reduce side effects, and improve the caregiver experience.

The most common challenges facing senior pets include reduced mobility, chronic pain, organ pathology (heart, liver, kidney),

cognitive decline, hearing and vision loss, dental disease, metabolic disease, reduced immunity, obesity, and cancer.

Alongside pharmaceuticals and standard medical procedures, we can include a whole variety of other therapies including diet, supplements, energy modalities, body work, and social-emotional support as part of our treatment plans.

When it comes to senior pets, an integrative approach that includes some complementary therapies just makes sense.

What Complementary and Alternative Modalities Should We Consider?

Diet Therapy

Senior pets may or may not require a prescription diet. If there is a diagnosis such as kidney disease or atopic dermatitis, then the need to modify diet is clear. However, even apparently healthy aging animals may benefit from diet changes. As bodies age, protein needs increase to maintain muscle mass. Digestion is often less robust, making nutrient bioavailability, digestibility, and modified fiber content more important. Metabolism may change, necessitating a change in total calorie intake. Metabolism and disease processes can also affect appetite, resulting in a need for improved palatability.

Complementary and alternative diet options often include fresh whole food ingredients, either as a portion or as the whole diet. Recipes may be based on traditional Chinese medicine theory, Ayurvedic principles, or other feeding models such as “biologically appropriate.” No matter the underlying theory,



↑ A patient receives acupuncture for treatment of masticatory myositis

diets should always be “complete and balanced” and free of food-borne pathogens.

Commercial options are more available now than ever before, making fresh-food diets more accessible to consumers. Clients may also be interested in preparing a homemade diet. It is important for these clients to work with a veterinary nutritionist, use a premade recipe from a veterinary nutritionist, or use a software program such as BalanceIt or Animal Diet Formulator to ensure nutrient deficits are avoided.

Supplements

There seems to be a new supplement on the market for pets every week. However, all supplements are not created equal. Consumer advocacy groups have repeatedly tested popular

Supplements have varying levels of research behind them, ranging from virtually nothing beyond anecdotal theory to peer-reviewed meta-analysis equal to pharmaceuticals.

supplements, only to reveal they do not contain what they claim and may even contain hazardous substances such as heavy metals, pharmaceuticals, or allergens.

Supplements have varying levels of research behind them, ranging from virtually nothing beyond anecdotal theory to peer-reviewed meta-analysis equal

to pharmaceuticals. Sometimes there is research on an ingredient, but not the specific product being sold. Manufacturing, shipping, sourcing, and dosing can all vary and impact efficacy and safety, even when ingredients appear to be the same.

That said, supplements are being used in senior pets,



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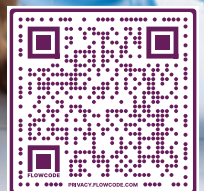
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↑ A senior patient receives acupuncture for treatment of IVDD.

mostly without input from their veterinarians. They are widely available and well marketed. It is unclear what percentage of senior pets use supplements at some time, but it is likely a majority.

Supplements such as antioxidants, omega-3 EFA, probiotics, fiber, and curcumin have robust clinical research to support their use in improving both wellbeing and longevity. They can reduce the need for pharmaceutical medications, with lower incidence and severity of side effects.

Prioritize companies that have tested their own specific products for both safety and efficacy. It is rare to find independently funded research on specific products, but if you find it, that is the gold standard. Otherwise, go with companies that have internal quality control standards such as batch testing for contaminants and careful sourcing of ingredients.

Energy Modalities

Energy modalities utilize energy forms such as light, sound, and electromagnetic waves to create a biological effect on tissues. These therapies have measurable results that can be recreated in clinical and laboratory settings. This category does not include things like reiki, prayer, crystals, etc.

Photobiomodulation (PBM, laser) is probably the most popular energy modality in veterinary medicine right now. PBM uses focused light waves to penetrate cells, causing an energy transfer, ultimately improving cell function, reducing inflammation, and improving healing. There are some low-level direct-to-consumer products that offer some therapeutic benefit. However, the most significant benefits demonstrated in peer-reviewed

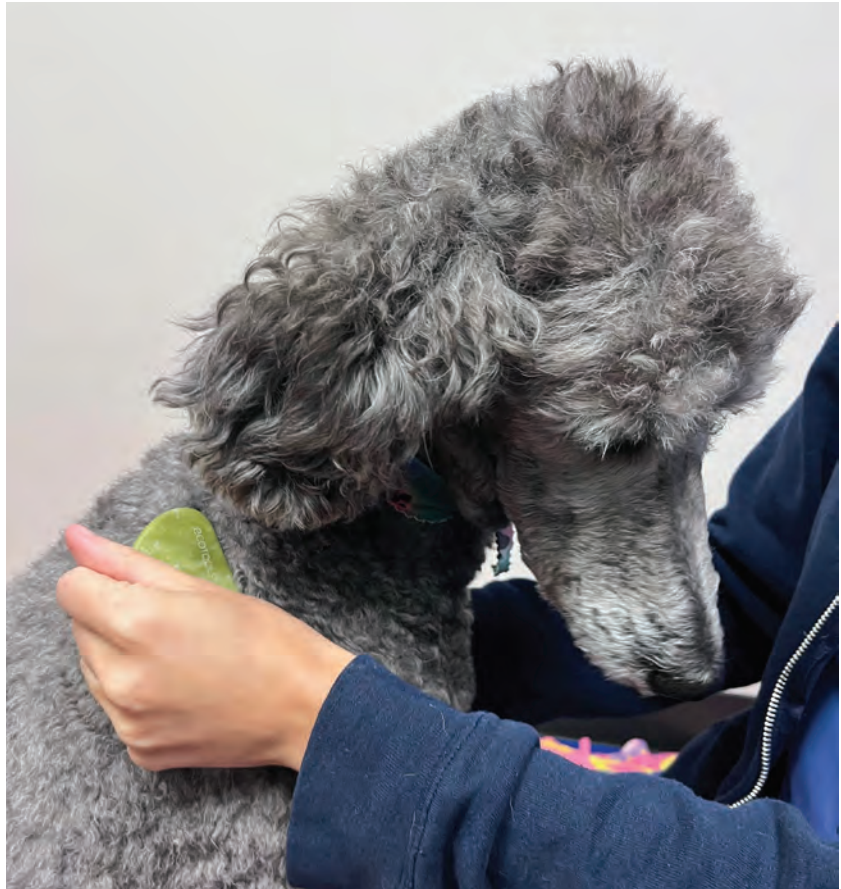
research come from medical-grade units for use by professionals.

A newer therapeutic option in veterinary medicine is therapeutic pulsed electromagnetic field therapy (tPEMF). These are wavelengths of electromagnetic fields different from those generally emitted by our phones and personal electronic devices. They have been studied for therapeutic effects including reduced inflammation, improved tissue healing, improved cell function, calming effects, and more. There are several companies currently selling devices designed for ease of use in a home setting. Some of these wavelengths have been researched and approved by the FDA for humans, whereas others have internal company clinical trials demonstrating safety and efficacy.

Transcutaneous electrical nerve stimulation (TENS) is another modality that uses electrical currents to influence muscle and nerve function. It can interrupt pain signals at some settings and cause muscle contraction at higher levels. This is used exclusively by therapists in a clinical setting.

Therapeutic ultrasound uses sound waves at ultrasonic frequencies different from those used in diagnostic ultrasound. These sound waves transfer energy to tissues through vibration, resulting in tissue heating, softening, and alteration of pain signaling. This modality is also used exclusively in a clinical setting.

Shockwave, also known as extracorporeal shockwave therapy (ESWT), utilizes percussive sound waves to deliver energy to tissues to trigger a biochemical response from cells, reducing pain and stimulating a healing response.



↑ A senior patient receives massage therapy for pain management of cervical IVDD, back pain, and hip osteoarthritis.

It is commonly used over joints and bones for osteoarthritis and postoperative surgical healing. Again, this is used exclusively in clinical settings by professionals.

Body Work

Movement is a bedrock of health. All animals need to move frequently and in a variety of ways. Therapeutic movement can improve independent mobility, reduce pain, support cognition, support nerve signaling, reduce stress, and even improve behavior. There is also robust literature supporting the use of therapeutic exercise in dogs. Therapeutic exercise programs need to be created by veterinary professionals for individual patients. Once they are created and taught, they can often be done by caregivers in the home setting.

Massage is simple and effective. It can be performed by clients on their own pets at home with minimal training. It is most known for reducing muscle tension to relieve pain, but massage can also support sensory and motor nerve signaling. There is high-level meta-analysis supporting the safety and efficacy of massage. Some professionals are trained in models emphasizing specific anatomy-based soft-tissue manipulation techniques, whereas others are trained in the traditional Chinese medicine style of massage, or Ayurvedic (Traditional Medicine of the Indian subcontinent) massage techniques.

Acupuncture may be the most recognized complementary modality in veterinary medicine. Animal acupuncture has been a mainstay of the CAVM approach for decades, with several well-respected training programs and thousands of practitioners.

There is research supporting its use for back pain and IVDD, hind end weakness, and joint pain. Additionally, it has wider ranging effects on metabolism, internal organ function, and overall vitality through its effects on the neuroendocrine systems of the body. There are veterinarians trained in more western scientific forms of acupuncture as well as those trained in the traditional Chinese medicine approach to whole animal health.

Veterinary spinal manipulation therapy (VSMT) is also referred to as animal/veterinary chiropractic, depending on local practice and licensing acts. This modality involves focused manipulation of joints, usually along the spine,

but can include any joint in the body. The effect is reduced muscle tension, allowing return to full range of motion through the joint. This results in improved comfort and mobility, as well as improved nerve communication and circulation through the area. VSMT should only be performed by professionals who have undergone veterinary education as well as spinal manipulation education.

Social-Emotional Support

There is one final area of integrative medicine that is under-represented in veterinary medical literature: mental health. As our pets age, they become less capable of participating in many activities that once provided



↑ A senior patient receives laser therapy for pain management of IVDD and osteoarthritis.

Therapeutic movement can improve independent mobility, reduce pain, support cognition, support nerve signaling, reduce stress, and even improve behavior.

joy and purpose. By creating opportunities for enrichment and connection, we can quickly and dramatically improve wellbeing. Puzzle toys and feeders, scent work and seeking, going new places, learning new skills, and more keep life interesting and keep the mind engaged. Trainers can help clients learn to communicate with their companions, so the human-animal bond remains strong.

Animals can develop cognitive decline or vision and hearing loss and may need environmental and emotional support to reduce anxiety and depression associated with this experience. Veterinary behaviorists can be especially helpful in developing plans to support these pets.

Professionals such as veterinary social workers or pet grief counselors support human caretakers as they navigate end-of-life medical decision-making and adjust to life with an aging pet. There is some research demonstrating that this kind of support can improve quality of life for animals, caregivers, and veterinary staff.

Any method that supports the human-animal bond supports animal wellbeing, even if it is not a scientifically validated medical therapy. Energy work falls into this area. Energy workers and animal communicators can provide unique services for clients seeking a more spiritual/energetic connection with their senior pets. This type of energy work is different from the

scientific forms listed above. In this sense, energy work includes reiki, prayers, gems and crystals, and more. If it feels uncomfortable to bring up these modalities in a clinical setting, veterinary team members can refer to veterinary social workers, grief counselors, or pet health coaches. Consider creating a list of local professionals who support the human-animal bond and provide this resource to clients facing complex or end-of-life decisions.

Integrative Medicine Is Something We Can All Do

Integrative treatment plans improve outcomes, reduce side effects, offer more options for managing chronic conditions, improve quality of life for animals and humans, and support the human-animal bond.

Some things can easily be

incorporated in a general practice setting with all senior pets, such as discussion around invisible signs of pain in dogs, mobility support, environmental enrichment, therapeutic commercial diets, supplements like omega 3s and antioxidants, and anxiety or cognition screening and treatment.

Other modalities can be referred to veterinarians with additional training such as rehabilitation, acupuncture, spinal manipulation, massage, herbal medicine, diet therapy, and animal behavior. We can also include animal professionals outside of the medical space for truly holistic social-emotional support plans, including counselors, coaches, trainers, and energy workers.

Our senior pets can live comfortable, joyful lives when supported by an integrative approach to health. ■

Online Resources

cancer.gov/about-cancer/treatment/cam

ncbi.nlm.nih.gov/pmc/articles/PMC7074215

canadianveterinarians.net/policy-and-outreach/position-statements/statements/complementary-and-alternative-veterinary-medicine/

ahvma.org/what-is-holistic-veterinary-medicine/

cliniciansbrief.com/article/top-5-points-incorporating-complementary-integrative-medicine-practice

HOME TEAM / **HOSPICE CARE**

Care Through the End

Palliative and Hospice Care Can Bring Comfort to All

BY KELLY SMITH

Of the many roles that a veterinarian plays, the tasks centered around end-of-life care can undoubtedly be the most difficult. Managing that difficulty is why some veterinary practices are taking part in further training in providing end-of-life care. Pursuing the activities and education necessary to receive AAHA End-of-Life-Care (EOLC) accreditation can equip practice team members to not only provide medical expertise but also offer an important layer of emotional support that can help a pet owner navigate this uncertain terrain.

By the Numbers

Industry statistics add to the companion animal end-of-life care landscape. A survey from the American Pet Products Association reports that 66% of US households (86.9 million homes) own a pet. Market research firm IBIS World reports that, as of 2024, there were 2,531 veterinary practices in the US offering animal hospice care services. They state that the market size is \$317 million, with a forecast for growth in the future. They found that while demand for pet hospice services is typically tied to disposable income levels, people's

love for their pets makes them feel like hospice services are a nondiscretionary expense, creating a greater need for the industry's services.

End-of-Life Care Accreditation

Since 2020, AAHA has offered an accreditation program for veterinary practices that specialize in EOLC. The EOLC Accreditation program is open to AAHA-accredited mobile or brick-and-mortar practices with a dedicated department committed



to providing EOLC services, or a practice solely dedicated to providing EOLC services. (Visit aaha.org/eolc to learn more about the program.)

To date, seven practices have received AAHA's EOLC accreditation, including both mobile and brick-and-mortar practices in the US and Canada. Some of these practice owners and staff shared their approach to end-of life pet care, how offering palliative and hospice services changed their practice, why they pursued the AAHA ELOC accreditation, and more.

Love & Dignity In-Home Veterinary Hospice and End-of-Life Care

Heba Kashkosh DVM, CHPV, is owner of Love & Dignity, an in-home veterinary hospice and EOLC practice. Her mobile practice offers euthanasia and pet hospice consultation services in Montgomery County, Bucks County, and surrounding areas in Pennsylvania.

“Bidding farewell to a cherished companion is one of the most profoundly challenging experiences a pet owner can face. We recognize the depth

of this emotional turmoil and the immense pain it can bring,” Kashkosh says. Her team strives to create a peaceful and comforting environment that provides pets with a gentle and dignified passing in the comfort of their own homes, and, she says, with “respect for families wishes, beliefs and vision for their pet’s end-of-life journey.”

Kashkosh says that providing hospice and palliative care has caused a profound and meaningful shift in the practice.

“Rather than solely focusing on the end moment, this approach allows us to extend our care to

pets in their final days or weeks, prioritizing their comfort and quality of life,” she said.

She said that offering these services means that her practice has the privilege of building longer, more meaningful relationships—not just with the pets, but with their owners as well. The team provides referrals to grief counselors as part of their support after a pet’s passing.

Kashkosh says pursuing AAHA EOLC accreditation was a natural step for her practice; it allowed them to refine their protocols and demonstrate a commitment to excellence. “For pet owners, this means they’re not alone in making these difficult decisions,” she said.

“We offer them not just medical expertise but also emotional support.”

She described a circumstance when the extended training provided meaningful impact for a pet owner.

“I found the AAHA requirement to carry an oxygen source to be incredibly beneficial. Before accreditation, as a mobile practice, we didn’t carry portable oxygen. While assisting a pet at home in respiratory distress, the owner was relieved to know that I had portable oxygen on hand,” she relates. “As we began the process and provided the pet with supplemental oxygen, the pet seemed to breathe a little

easier. The owner was grateful to see her beloved companion find some comfort at home before peacefully passing.”

Caring Pathways

Tyler Carmack, DMV, CVA, CVFT, CHPV, CTPEP, CPEV, is director of hospice and palliative care for Caring Pathways. She leads a team of hospice and palliative care doctors and licensed technicians for three markets; Charlotte, North Carolina; Denver, Colorado; and Virginia Beach, Virginia.

Caring Pathways is a hospice and palliative care and in-home euthanasia practice. Their approach, Carmack says, is to



continue the care they have received throughout their pets' lives from their family veterinarian.

"We want to continue providing that highest level of care, even when the goal of treatment has shifted from preventive and curative medicine to pain management, palliative care for symptoms, and maximizing quality of life for both the patient and their family," she said. We want to provide support to the family and empower them to care for their pet in the best way possible until, and even after, they have to say goodbye."

In terms of how this care has changed the practice and how they approach pet owners, Carmack

says: "Since we are an exclusively end-of-life care practice, we have the ability to join families at many different points along their pets' end-of-life journey. When we enter hospice and palliative care, the risk-benefit analysis has changed for many of our medical interventions and so we must learn about our clients and patients to help them create a personalized care plan that will work for the family and their pet."

Carmack says that Caring Pathways pursued AAHA EOLC accreditation because her team knows they provide the very best quality end-of-life care and wanted a way to express that, not only to clients but also to colleagues. "Hospice and palliative care is a newer facet of veterinary medicine and many of our colleagues assume that all we do is in-home euthanasia," she says.

Carmack believes that since they obtained AAHA accreditation, their referring general and specialty practices are more aware of the level of care they provide to

families. "This results in earlier referral," she says, "which allows the family to focus on comfort care throughout treatment and smooths the transition when more aggressive interventions either stop working or the patient can no longer tolerate them."

Midtown Mobile Veterinary Hospice Services and Faithful Pet Memorial

Faith Banks, DVM, CHPV, is owner and founder of Toronto, Canada's Midtown Mobile Veterinary Hospice Services and Faithful Pet Memorial.

Banks says that, using in-depth hospice consultations done via telemedicine, their veterinarians create personalized care plans to help pet parents care for their ill and/or aging pets.

"Environmental modifications and pain management are the cornerstones of this type of service," she says. "We also offer nonmedical quality-of-life assessments via telemedicine to



"We want to continue providing that highest level of care, even when the goal of treatment has shifted from preventive and curative medicine to pain management, palliative care for symptoms, and maximizing quality of life for both the patient and their family."

Tyler Carmack, DMV, CVA, CVFT, CHPV, CTPEP, CPEV, Caring Pathways.



assist families with end-of-life decisionmaking.”

When the time comes, her practice offers in-home euthanasia services.

“We strive to make this final moment as peaceful and stress-free as possible, honoring the pet’s dignity and the family’s wishes,” Banks said. “We can also offer guidance on aftercare options such as aquamation, cremation, and burial, as well as ideas for memorializing pets in unique and special ways.”

Offering hospice and palliative care has changed her practice in a couple of different ways, Banks says. Those include “the way that we educate pet parents on the many factors to consider when assessing quality of life,

such as how to recognize signs of chronic pain, and how the team helps them shift their focus from curing to caring, when a cure is not possible.” In addition, the team openly discusses end-of-life decisions and aims to take the fear and guilt out of decisionmaking. “While these are often very difficult and emotionally charged discussions, we believe pet parents often cope better with the loss of their pet if they have prepared for it through these conversations and had an opportunity to discuss their concerns, fears and goals.”

Banks says that her practice is proud to be the first AAHA-accredited mobile end-of-life practice in Canada.

“We believe having the AAHA accreditation fosters trust and

confidence in our services, both for referring clinics as well as pet parents, and helps us to attract top talent who have chosen to dedicate their careers to end-of-life pet care,” Banks said. She says that it also allows her team to stay up to date with the latest advancements in hospice and palliative care. Banks shares her veterinary knowledge and discusses end-of-life issues with pet owners on TikTok; find her at @dr.faithbanks.

Coulter Veterinary Hospice Services—Heart with Wings

At Coulter Veterinary Hospice Services—Heart with Wings, founder Laura Coulter, HBSc, DVM, CHPV, prioritizes maintaining the bond

“Environmental modifications and pain management are the cornerstones of this type of service.”

Faith Banks, DVM, CHPV, Midtown Mobile Veterinary Hospice Services

between the family and the pet.

“We are approaching end-of-life care with a sense of bond-focused purpose and are striving to make those final moments as peaceful and stress-free as possible,” Coulter says. One of the ways she believes they can achieve this is by providing in-home end-of-life care.

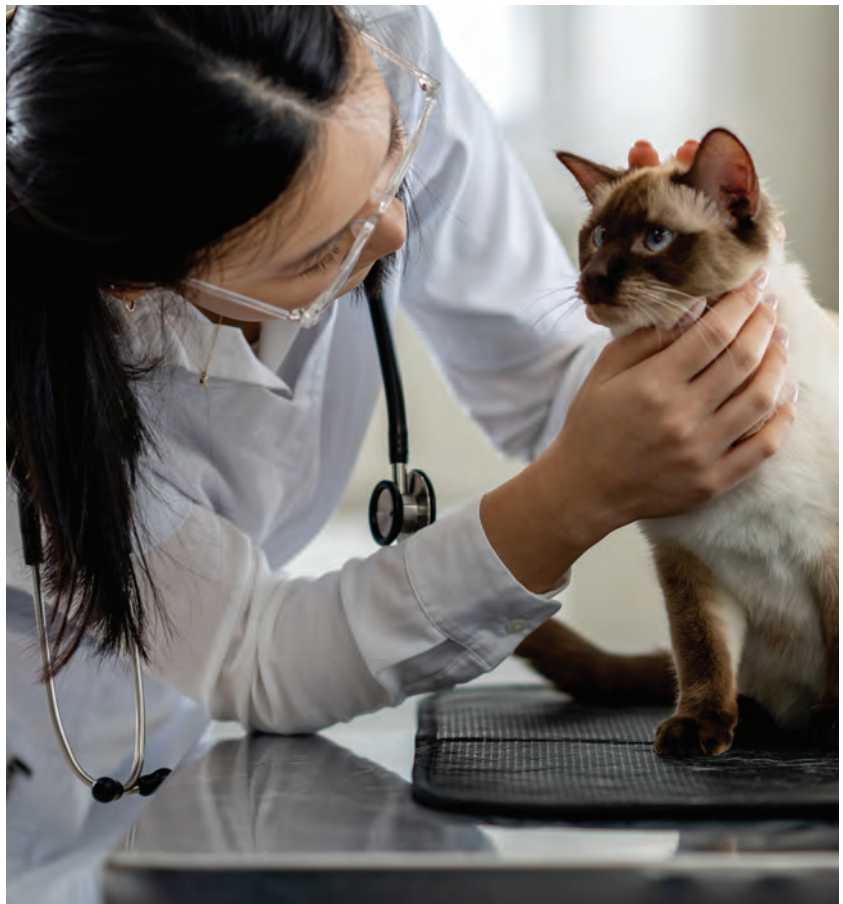
“When a pet makes their transition into their senior years, their body starts to change rapidly. These pets need a much higher level of care and maintenance,” Coulter says. “We provide resources and knowledge that help families better prepare for what is to come. When their pet’s body changes, we adjust with them. To provide hospice and palliative care is to provide a level of care that connects us with the families on a deeper level.

“We want our families to know that our recommendations are coming from a place of honesty. Getting our AHAA EOLC accreditation was a step we felt was necessary to show how dedicated we are, how we will always maintain gold-standard care, and that families can trust us with their beloved pets.” Coulter says that becoming accredited through AHAA helped their practice become more organized and efficient. “We were able to put into place protocols for just about any situation.”

She acknowledges the difficulty inherent in these activities. “When you put all your energy and

focus into palliative, hospice and end-of-life care, there is a toll,” Coulter said. “To be emotionally available and vulnerable for each and every family, you take something from yourself that takes time to recoup.” Beyond that, she says, “Going home at the end of the day knowing you helped a family avoid the trauma that can go hand-in-hand with a goodbye means everything to us.”

The time leading up to the end of a beloved animal’s life can be an emotional rollercoaster for pet owners. Veterinarians can play a crucial role in these final stages, providing care that is as important as any other time in an animal’s lifespan. EOLC accreditation provides a roadmap that equips the veterinary team to offer medical expertise along with prioritizing emotional wellbeing. ■





CULTURE IN PRACTICE / **QUEER LEADERSHIP**

Queer Leadership in Vet Med

Why Are There Not More LGBTQ+ Leaders?

BY EWAN WOLFF, PHD, DVM, DACVIM (SAIM)



Veterinary medicine stands at a point of substantial transition almost 25 years into the new century. The post-COVID period has been characterized by a drop in pandemic-level demand for services, a shift in the narrative of spectrum and outcome of care, heightened client expectations, an educator and specialist shortage, new didactic models, and the artificial intelligence revolution.

Any one of these new challenges requires intelligent, empathetic, culturally humble, and adaptive individuals to confront them. Our profession needs leaders informed by different viewpoints

who are capable of nurturing innovation, disrupting the status quo, and building consensus.

With a history of recognition of LGBTQ+ veterinarians in veterinary medicine since the early 1970s, why are there so few queer leaders now? Marketers caught on to the need for queer representation in veterinary branding and advertising years ago because of the large proportion of pet owners in the queer community.

Many companies have Pride resource groups that are necessary to support large numbers of LGBTQ+ employees. Industry partnerships with affinity organizations provide advocacy,

support, educational talks, and networking events to work toward inclusion and belonging in our profession. Actual inclusivity, however, requires entrusting individuals with positions that have direct involvement in policy and decisionmaking. This fact is not lost on any historically marginalized group.

Yet today there are only singular examples of queer clinicians, technicians, and faculty in leadership positions.

“Our clientele is diverse and our profession reflects this diversity,” says Jörg Steiner, Dr.med.vet, PhD, DACVIM, DECVIM-CA, AGAF, professor at Texas A&M and past

president of the American College of Veterinary Internal Medicine. “Queer leadership plays an integral role in this representation.”

If this underrepresentation continues, the profession will not easily retain trainees, jobseekers, clients, and stakeholders for the long term.

“The most successful hiring managers ensure teams are diverse and that historically excluded communities—including LGBTQ+ and BIPOC veterinary professionals—are in leadership roles with a voice in all critical decisions,” said Mia Cary, DVM,

CEO of PrideVMC, an organization devoted to advocating for the LGBTQ+ veterinary community.

In recent US polling, 30–40% of Gen Z individuals (ages 14–26) self-identify as LGBTQ+, including 25% who identify as nonbinary. General US population estimates say that 7.6% of US adults are LGBTQ+, with an estimated 26 million total queer folk in the US population. Based on this, the numbers of queer people in the veterinary profession will increase substantially in the next 5 to 10 years. This begs the question, should there be more directed

mentorship and support than in the last 50 years for queer ascent in the profession?

Leadership Qualities Born from Adversity

Resilience is touted as an essential component in leadership. The queer community is celebrated in annual Pride gatherings commemorating the Stonewall riots of 1969. This moment belonged to an older generation and was a prelude to substantial struggle. Baby boomers and Gen Xers lived with the horror and keen loss of the HIV/AIDS epidemic, and early millennials grew up watching the community come together in activism.

LGBTQ+ people in their mid-30s to late 40s developed as adults in a landscape where intimacy could still be prosecuted, benefits were not certain, and gay marriage was illegal. Within the LGBTQ+ community, awareness and understanding of gender-diverse people—even in the early 2010s—seems like the Stone Age in comparison to where the narrative is today.

At the same time, within the workplaces of the United States, United Kingdom, and multiple other countries, the 2020s have brought a coordinated legislative attack against all LGBTQ+ people and in particular gender-diverse people. This, combined with decreased access to reproductive healthcare, places a large portion of queer people in jeopardy.

As of mid-2023, 130,000–260,000 gender-diverse people were estimated to have been displaced within the United States, and the Human Rights Campaign had declared a national LGBTQ+ crisis. The past three years



have threatened to bring back mainstream discrimination and reverse much of the gains of the prior half-century.

Although some are disproportionately affected by this new era, none of us remain unaffected by our past or present. This is compounded for those with intersectional identities. When queer leaders are chosen, identity is often woven from a fabric of adversity and survival, with many still contending with challenges both within and outside family.

“As our communities evolve and become more diverse, so must our leaders,” said Dane Whitaker, DVM, former president and current board member of PrideVMC. “Having queer veterinarians in places of leadership within the profession helps to reflect those communities and can push back against the hate and fear that is so pervasive in our society now.”

If organizations are seeking someone who can achieve long-term goals while dealing with abrupt and unexpected consequences, then they would be wise to consider the struggles and perseverance of queer individuals as a strength.

Coalition-building, negotiation, and compromise are essential for addressing long-term strategic goals. Unique to queer identity is the process of coming out that can be both extremely empowering and harmful. Many queer people lose friends, family, and spouses against our will in order to live safely and authentically. Many of us are outed at least in part because we cannot be anything other than ourselves.

To be queer is often to spend half your life hidden and the other half rebuilding community. Thankfully, for a time, this became

easier for younger generations, but the current anti-LGBTQ+ legislation means that we have found ourselves often in a worse place than we could have imagined five years ago. Surviving takes a variety of skills. Building chosen family is a cornerstone of queer life, as is finding safe spaces. The world outside is full of outwardly antagonistic folk and well-meaning microaggressors.

The litany of "gay agenda," "lifestyle choices," "keep it in private," "don't rub it in people's faces," and pointed or unintended slurs is still very much present. Yet queer professionals aren't doomed—we just come up through the workplace with substantial understanding of conflicting frames of reference, situational awareness, persuasive reasoning, and advocacy.

“We don't do it deliberately, but just by being in the room, a trans person challenges . . . the way society is built. We instinctively know not only how to survive but to thrive when everything seems to be changing,” said Kate Toyer, BVSc, MANZCVS (Surgery), president of Australian Rainbow Vets and a small animal surgeon, on a AAHA's *Central Line* podcast.

Melody Martinez, CVT, president of the Multicultural Veterinary Medical Association and CEO of Acorde Consulting adds, “It's critical that those who consider themselves allies earn the title by first recognizing that what harms one, harms us all—even if our gender or racial identities are different. Trans misogyny, for example, hurts cisgender women, and nowhere has that been more clear than in the discourse surrounding Imane Khelif [gold medalist in women's boxing] at the Paris Olympics.”

Though not purpose-built for leadership, it is hard to go through life successfully as a queer person and not have the building blocks that are needed to rally consensus and the fortitude to persevere in a team.

Unstoppable Pride

Despite all of this adversity, queer society radiates joy, often brightest where there is the least acceptance. As we saw almost a hundred years ago when the pendulum swung toward overt prejudice and restriction, drag queens, singers, and writers serve as a beacon of hope. Time and again the voice

It's critical that those who consider themselves allies earn the title by first recognizing that what harms one, harms us all—even if our gender or racial identities are different.

Melody Martinez, CVT

representing young professionals is queer, whether it comes from performers like Megan Thee Stallion, Chappell Roan, and La Cruz; the comedy of Bob the Drag Queen, Hannah Gadsby, and Suzy Izzard; or the prose of Lamya H, Maia Kobabe, or Tarell Alvin McCraney.

For all the emphasis on difference and otherness in the harsh rhetoric of statehouses, courts, congressional chambers, and parliament, the biggest threat of queerness is its unrestrained humanity. A mythology of fear surrounds the boring truth that we are all just people. We are fortunate

that there are allies who recognize this and help to shoulder us up. There is a paradox that those who detract from the value of queer leadership see this identity as a concern, an inconvenience, or irrelevant.

“We should strive to build a profession where everyone can be free to be themselves so long as that freedom doesn’t impinge on the right to exist free of discrimination and harm,” Martinez said. “Our humanity and freedom are bound up together. To ensure that we have a truly inclusive profession, those of us

who experience privilege—we all do in some way—should remember that our own safety and joy is tied to that of others.”

The reality is that the broad reach of the community is a uniting force. Pride is an object lesson in this commonality of existence, with marches and parades in small cities lasting hours and rainbow colors stretched far into the distance by allies and queer people alike. Even in this time of bans, fines, and felonies, that energy is unstoppable.

Leaders of Tomorrow

Where can we find tomorrow’s leaders for veterinary medicine? This is a very popular question right now in national conferences, board meetings, and workshops. Education and advocacy leaders alike agreed on the importance of having queer leaders in place as we head into the future.

Rustin M. Moore, DVM, PhD, DACVS, dean of The Ohio State University College of Veterinary Medicine, said his school is committed to supporting all students of all backgrounds and identities.

“We are committed to fostering a supportive atmosphere where everyone feels they belong and can thrive, including the LGBTQ+ and other diverse communities—regardless of their background, experiences, and other attributes—ensuring that everyone has exceptional experiences in our college leading to a satisfying, successful, and sustainable education and career,” Moore said.

Coretta Patterson, DVM, DACVIM, small animal internist and founding dean of Midwestern University College of Veterinary Medicine-Illinois, Downer’s Grove,



also showed her support for the future of LGBTQ+ leaders.

“My hope is that we start out by creating a space where queer folk are leaders and that we become enlightened as a profession where great leaders—queer or straight, nonbinary, transgender, or cisgender—feel emboldened to take up leadership and are included, valued, and allowed to lead in a profession that we all want to help make better,” Patterson said.

Omar Fariás, VMD, president of PrideVMC and director of scientific and academic affairs at Hill’s Pet Nutrition, pointed out that having queer leaders will benefit the profession as a whole.

“By promoting queer leadership in veterinary medicine, the profession will benefit from becoming more inclusive, diverse, and equitable, ultimately enhancing care for all individuals, regardless of gender identity or sexual orientation,” he said.

Every day, LGBTQ+ people join the profession, save lives, get horses sound again, comfort clients, teach the next generation, run successful laboratories and clinics, manage large organizations, serve in uniform, stop disease in its tracks, and inspire others to do the same.

Out or not out, we are relied upon at all hours of the day, in all time zones, countries, on the open ocean, and even in space. As the number of queer veterinary professionals grows ever higher, the profession needs decisionmaking informed by our lived experience. When we recruit queer leaders, we empower the future of the profession.

Note: The author acknowledges and thanks Kate Toyer, BVSc, Mia Cary, DVM, and Finley Wolff for review of this manuscript. ■



The most successful hiring managers ensure teams are diverse and that historically excluded communities—including LGBTQ+ and BIPOC veterinary professionals—are in leadership roles with a voice in all critical decisions.

Mia Cary, DVM, CEO of PrideVMC

GET SMART / **NEW CPR GUIDELINES**

How to Save a Life

Updated RECOVER CPR Guidelines Help
You React with Confidence

BY MAUREEN BLANEY FLIETNER

A dental procedure under general anesthesia is under way. The feline patient's electrocardiogram suddenly goes from normal sinus rhythm to asystole with no electrical activity on the monitor. What do you do?

For Erin Glover, PhD, CVT, of Portland, Oregon, it was automatic.

She listened for heart sounds and palpated for a pulse, both absent, and alerted the doctor—all in about 10 seconds—initiating the cardiopulmonary resuscitation (CPR) protocol.

To someone outside of veterinary medicine, it may be

difficult to understand what the big deal is. Surely there is a recognized veterinary CPR standard and mandatory certification, right?

Surprisingly, no.

And that can factor into whether a pet survives cardiopulmonary arrest.

Trying to help fill that gap has been the work of the Reassessment Campaign on Veterinary Resuscitation (RECOVER) Initiative. Its first guidelines, published in 2012, gave veterinary professionals information for five domains (basic life support, advanced life support, monitoring, preparedness

and prevention, and post-cardiac arrest) to help an animal survive an emergency situation as well as the training and certification to put it into practice.

On June 26, RECOVER released its first major revisions to the CPR guidelines for basic life support, advanced life support, and monitoring. RECOVER is also the first veterinary organization to use an even more rigorous method known as GRADE. The Grading of Recommendations, Assessment, Development, and Evaluation system is the same one used by many human healthcare



organizations around the world to provide a standardized approach for grading the quality of evidence and strength of recommendations.

New Information Means Changes

Why the update?

“Science changes. New information becomes available,” explained Daniel Fletcher, PhD, DVM, DACVECC, cochair of the RECOVER executive committee.

“Our goal in 2012 was to update the guidelines every five years. We went a little longer than that. We

also wanted to use the more robust GRADE process rather than just tweak the work done before. We thought it would make a lot more sense to redo everything using this new process and then, moving forward, do smaller updates using that same process.”

Asked for a few of the changes and the reasons behind them, Fletcher offered these:

A better approach to chest compression in cats and small dogs under 15 pounds.

“We used to recommend chest compression the same as used on

larger dogs but that could cause injuries and risk overcompression,” Fletcher said. “There are now three new recommendations for working on such patients.”

Added emphasis on early ventilation.

Fletcher pointed out that dogs and cats have more respiratory arrests than humans.

Removing high-dose epinephrine from the guidelines.

“In the old guidelines, if animals had CPR that lasted for more than

10 minutes, we suggested that they could try high-dose epinephrine,” Fletcher said. “Evidence shows that you may get a pulse back in that patient but the patient is less likely to survive to discharge. Low-dose epinephrine is still recommended for patients with nonshockable arrest rhythms.”

Updated dosing of electrical defibrillators.

“We now recommend shocking them once,” Fletcher explained. “If that doesn’t work, double the dose for the second shock and any subsequent doses. There is no more adjusting with every shock.”

Still to come are three new areas of guidelines:

- **Newborns:** Guidelines for newborn resuscitation of kittens and puppies born by cesarean section or through difficult labor will be published this fall. Fletcher explained that it’s “very different to resuscitate a newborn. The mortality rate is quite high. Everyone has their approach but no one has really had a robust look at what is out there in the literature and developed best practices.”
- **First aid:** He noted that there are a lot of first aid courses “but no one has

actually gone back to the primary literature to come up with guidelines based on evidence available instead of individual experience. There is no definitive source out there for the best first aid for a dog with an arterial bleed in the leg or who has heat stroke and needs to be stabilized, for examples.”

- **Large animal:** New recommendations for large animals such as horses, sheep, and cattle. The latter two recommendations will be published within a year.

Positive Response Continues

The interest in standardized guidelines and training has grown tremendously since veterinary critical care specialists came together in 2010 to discuss the need for evidence-based guidelines for veterinary CPR care.

According to Bobbi Conner, DVM, DACVECC, president of the American College of Veterinary Emergency Critical Care (ACVECC), that interest then spurred the development of the RECOVER collaboration, a nonprofit program within ACVECC and Veterinary Emergency & Critical Care Society (VECCS) to provide the guidelines.

The certification training for

RECOVER instructors became a joint effort between ACVECC and Cornell University College of Veterinary Medicine.

Online and in-person training helped to offload the burden from local practices, explained Conner.

“Not all primary care facilities perform CPR on a regular basis, which makes training difficult to keep up with,” said Conner. “Practices, however, can support their employees by having them complete the RECOVER certification training and maintenance of certification. In that way, in those rare instances where a life-threatening complication occurs, the team can be ready to act and know that they are providing the most up-to-date care possible.”

RECOVER offers the online courses of CPR for Veterinary Professionals (six hours); CPR for Pet Owners (one hour); Post-cardiac Arrest Care for Veterinary Professionals (90 minutes); and CPR for First Responders (90 minutes), which will be launched this fall; and in-person training with CPR Rescuer Certification for Veterinary Professionals (six hours) with the online course as a prerequisite; and CPR for Pet Owners (two hours). Certification is valid for two years.

The response continues to be

Not all primary care facilities perform CPR on a regular basis, which makes training difficult to keep up with. Practices, however, can support their employees by having them complete the RECOVER certification training and maintenance of certification.



positive. According to Fletcher, with the 2012 guidelines, 90,000 took the online course, 20,000 attended in-person rescue labs, and there were 70,000 downloads of the guidelines. With the recent release of the 2024 guidelines, there were already nearly 40,000 downloads a month after publication.

“We’re now updating our online course materials, Rescuer certification workshop, and Instructor certification process with the new information for the rest of the year,” said Kenichiro Yagi, MS, RVT, VTS (ECC) (SAIM), who serves as program director for the RECOVER CPR Initiative.

“We also plan to translate the guidelines and course materials into several major languages to better support our global community of veterinary professionals. I am looking forward to the day RECOVER CPR certification is considered a must-have for every

corner of veterinary medicine around the world.”

There’s Always a Risk for Arrest

As a former registered nurse, Chantal Faraudo, CVT, CVPP, of Beaverton, Oregon, knows that anyone working in human healthcare is expected to have had CPR training.

Unfortunately, she noted, completing RECOVER CPR training is not yet a requirement of the American Veterinary Medical Association. To counter that, Faraudo provides pro bono RECOVER CPR training for Portland Community College veterinary technician classes so all students can be certified before they graduate.

“I’m just one person teaching students and veterinary professionals and staff. And when

students return and tell me, for example, that they had two codes during their shift and both survived because of their training, that really does make a difference,” said Faraudo, a RECOVER-certified instructor since 2019.

In her previous work in general practice and emergency and critical care, Faraudo said she saw all sorts of cardiopulmonary arrest, from trauma, anaphylaxis, and severe infections to heatstroke, heart disease, and anesthesia complications. That’s why it is imperative, she said, that every person working in veterinary medicine be trained.

Empowerment, Rise in Confidence Seen

Besides the obvious benefit to patients, the training offers other advantages.

In her RECOVER CPR classes,



Faraudo said, the playing field is leveled. Everyone—those new to veterinary medicine as well as board-certified specialists—equally has a say in what they see and say and can question anything, knowing that it is okay and expected, so everyone on the team has each other's back.

“We often have 10 people in a class who don't know each other's name or personalities, don't know who's who or what's what,” Faraudo said. “After six or seven hours of running through various scenarios, reading EKGs, using the defibrillator, and knowing how to slide into a role that needs to be covered, they are high-fiving each other and giving each other feedback. It empowers them to respond and react, to use the knowledge they have. They are all on the same page using RECOVER's evidence-based models and a standardized algorithm.”

Glover, who enters Oregon State University's Class of 2028 DVM program this fall, took her CPR certification and recertification classes from Faraudo. She had only praise for Faraudo's teaching methods and use of high-tech animal models—“the real deal minus the real-life pressure.”

She also convinced four of her colleagues at Fern Hill Veterinary Care, Happy Valley, Oregon, to obtain RECOVER certification. While general practice work does not regularly see patients needing CPR, Glover explained, “we do perform many anesthetic procedures, which are never risk-free.”

She said the training has meant added confidence that she can be a leader in a high-stress situation. Informing nervous pet parents that she is RECOVER certified also helps owners feel more at ease

dropping their loved ones off for anesthetic procedures.

Steve Kochis, DVM, Chief Medical Officer, said the Oregon Humane Society (OHS) requires all of its DVMs, CVTs, and clinical leadership to be RECOVER certified.

“In addition to preparation for CPR, it creates opportunities for team building, better communication, and overall improved patient care across the organization. The plan is to eventually have everyone go through the program, including the three levels of veterinary assistants.

“OHS covers all costs for certification as we feel it is important for the standard of care we practice across both our public-facing hospital and our shelter hospital. It has absolutely made a difference. While we thankfully don’t have many patients that need CPR,

the medicine and the skills have been extremely helpful for all types of emergent situations, especially when patients are under anesthesia or sedation. The training also helped us up our game with organizing our crash cart and having more checklists and preprinted forms for every situation.”

A Responsibility to Continue Improving

The push to have everyone on the same page is important, explained Yagi.

“Cardiopulmonary arrest doesn’t discriminate. The RECOVER Guidelines and CPR algorithm give everyone the ability to approach CPR systematically to give the patient the best chance to survive. Knowing the current evidence-based practices in CPR

gives people the confidence to act and be an active contributor to the patient’s fate. It’s a huge responsibility, and that’s why there are certification requirements in the human medical field.

“Updating the guidelines represents the ever-changing nature of what’s best for our patients,” said Yagi. “It is every veterinary professional’s responsibility to keep up with today’s standards and continue improving ourselves to help patients.”

And that cat undergoing the dental?

“Much to my relief, we achieved return of spontaneous circulation shortly after initiating lifesaving measures,” Glover said. “I was so glad that the RECOVER training I received contributed to my feline patient going home with her people that day.”

Data needed to increase knowledge

Much of the epidemiological CPR data in dogs and cats has been based on observational studies in worst-case scenarios from a few academic teaching hospitals, according to Daniel Fletcher, PhD, DVM, DACVECC, cochair of the RECOVER Executive Committee. In addition, the 2012 RECOVER evidence evaluation process discovered many knowledge gaps regarding veterinary CPR.

Improving veterinary CPR care will require information—and lots of it—about the

diverse veterinary population that has experienced cardiopulmonary arrest.

To that end, the RECOVER Registry Committee developed and maintains an online RECOVERY CPR registry. It contains more than 1,000 cases of cardiopulmonary arrest in dogs and cats and is growing. Hospitals interested in contributing should contact the committee.

To keep participation thorough yet relatively pain-free, a case

report form was developed with an emphasis on ease of use and simplicity. The two-page downloadable form has one section that must be filled out in real time as CPR efforts are being undertaken, while the other section’s information can be recorded later.

Information about the registry, guidelines, algorithms, and charts is available at the RECOVER Initiative website, recoverinitiative.org.

Markup Math

Don't Let Sales and Specials Cost Your Clinic Profit

BY SCOTT A. KRICK, DVM

If your practice is like most, you have a dedicated staff member who handles all the ordering for your clinic. They are likely pretty savvy at identifying and exploiting opportunities to save your practice money. In this competitive environment, there are usually manufacturer-subsidized Buy One Get One (BOGO) offers, seasonal “specials,” and other volume purchase discounts available to your practice. If you, like most practices, belong to one or more

group purchasing organizations (GPOs), you have access to even more savings opportunities.

If you play your cards right, you can help clients while increasing your profits. But, if not properly taken advantage of, these savings may actually be reducing your practice's profit.

Let's look at a quick illustration to explain the point. If you buy product “A” for \$1 and apply the “standard” markup of 100% (2 times cost) to set the price to the

client, the client will pay \$2 and the profit to the practice will be \$1. Your distributor rep makes you aware of a BOGO or special pricing of product “A,” which lowers your cost to \$0.50.

By applying the same markup (2 times cost), you will now charge the client \$1 and the clinic will make \$0.50 profit. Of course, the client will be thrilled to save 50%, but while you've effectively saved money on the purchase, you lost profit on the sale. You've given all the savings

to the client. Of course, this only applies to items that you retail, and not for consumable goods that aren't separately billed to the client.

There are two simple ways to avoid this problem. One is to keep the client price for the product the same even when you get a discount off of the usual purchase price. In this case, all of the savings to the clinic becomes increased profit. Unfortunately, none of the savings are shared with the client. Using the same cost illustration as above, the client still pays \$2 and the clinic now makes \$1.50 profit.

Most companion animal practitioners, it seems, are motivated to save their clients money (sometimes even at their own expense). But what if there's a way to accomplish both savings

for the client and increased profit to the clinic? With this in mind, an alternative approach is to increase the markup on discounted product "A" above your "standard" two times markup. If, for example, we increase the markup for this item to 3.5 times cost (a 250% markup), the new client cost is \$1.75 (\$0.25 less than before), and the clinic makes \$1.25 profit (\$0.25 more than previously). This creates a win-win. Both the client and the clinic benefit.

Although this may seem like a trivial exercise to some, and too much effort to others, it's a mistake that many practices make. Let's look at the annualized potential for profit loss or gain.

Assuming that you have a typical three-FTE DVM practice that sees seven arthritic dogs per DVM

per week (most veterinarians agree that it's far more than this), that's 21 dogs per clinic per week (1,092 dogs per year) that might benefit from nonsteroidal anti-inflammatory drugs (NSAIDs). Because carprofen is the most widely prescribed NSAID in dogs, we'll use it to illustrate the point, and we'll assume that the clinic purchases the largest-size bottle available (180 count) of the pioneer carprofen chewable tablet (\$266.20) or a bioequivalent (generic) competitor (\$100.04). We also assume that the average dog weighs 50 pounds, receiving 100 mg of carprofen per day. (Prices here are based on 2024 Vet Price List.)

You can see in Table 1 that even though you saved \$166 per bottle by buying the bioequivalent product, you made less profit per

Table 1	Pioneer	Bioequivalent Competitor
Tab Cost (100 mg tab / dog / day) = bottle cost / 180	\$1.48	\$0.56
DVM Cost (per dog per year) = tab cost x 365	\$539.79	\$202.86
Client Cost (per dog per year) = DVM Cost x 2 (markup)	\$1,079.58	\$405.72
Profit to Clinic (per dog per year) = Client Cost minus Vet Cost	\$539.79	\$202.86

Table 2	Pioneer	Bioequivalent Competitor
Tab Cost (100 mg tab / dog / day) = bottle cost / 180	\$1.48	\$0.56
DVM Cost (per dog per year) = tab cost x 365	\$539.79	\$202.86
Client Cost (per dog per year) = DVM Cost x 2 (markup) for pioneer, and DVM Cost x 4.6 (markup) for bioequivalent product	\$1,079.58	\$933.16
Profit to Clinic (per dog per year) = Client Cost minus Vet Cost	\$539.79	\$730.30

Most companion animal practitioners, it seems, are motivated to save their clients money (sometimes even at their own expense). But what if there's a way to accomplish both savings for the client and increased profit to the clinic?

bottle (because you did not adjust your markup for the discounted product). But your client did save \$673.86 per dog per year. Client wins, clinic loses.

Table 2 uses the same initial costs to show what happens when you increase the markup for the discounted product. Increasing the markup on the discounted product results in the client saving more than \$146 per dog per year, while the clinic makes \$190.51 more profit per dog per year than with the pioneer. Client wins, clinic wins!

Factoring in all the potential cases determined above (1,092 dogs), by switching to a generic product and increasing the markup for that discounted product, there is an additional increased potential annualized profit of \$208,036. This approach provides additional profit with no cost to the clinic and has the added benefit of providing savings to your clients.

Most practice management software allows for setting the markup (or margin) based on cost of goods. You can adjust the markup/margin for any inventory item. By paying attention to the value that generics bring to your clinic and increasing markup for discounted items, you will do a huge favor to both your clients and your clinic's profit margin. Don't let your purchasing savings lead to reduced net income. ■

29.28	+2.98	+4.68%	502,638	22,769	24.26	103,734	103,243	103,243	31.78
6.91	-3.01	+3.89%	401,482	3,882	4.02	94,912	94,824	94,824	5.71
2.93	+3.41	+2.79%	489,341	126.82	132.07	89,160	87,765	87,765	4.03
114.78	+2.01	+3.21%	329,876	119.52	117.53	396,982	327,202	326,729	103
132.29	-3.78	-2.51%	239,582	93.63	83.81	134,165	134,585	133,916	103
169.88	+4.09	+2.78%	378,091	98.69	93.51	129,837	129,317	128,697	103
62.53	+3.76	+3.27%	428,816	146.00	131.87	174,421	180,021	179,324	103
56.71	+4.91	+4.08%	721,781	93.81	83.68	112,854	112,377	112,377	103
146.87	+5.37	+4.83%	726,034	33.86	36.02	147,785	147,561	147,561	103
26.49	+3.72	+2.26%	245,496	65.60	65.23	492,349	492,194	492,194	103
105.82	-4.42	-5.93%	212,213	132.84	173.34	67,890	67,990	67,609	103
110.07	+12.00	+5.15%	605,230	66,889	66,889	207,497	152,668	152,668	103
158.07	+4.07	+5.00%	260,801	166,944	144,908	979,907	888,877	879,588	103
219.71	+8.31	+5.14%	197,623	182.34	133.59	87,419	87,623	87,251	103
2,934.63	+4.63%	-5.02%	638,341	2,218,662	132,266	87,956	103,734	103,734	103
157.04									

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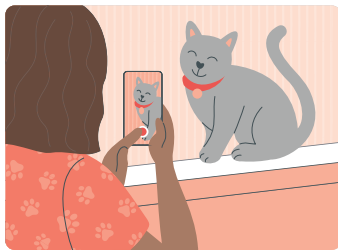
Making Seniors Feel at Home

In this service-oriented business climate, clients want to feel like you know them and care about them and their pet—which you do! These tips from the 2023 AAHA Senior Care Guidelines can help show that love for your clients and their senior pets. Download the full toolkit for even more tips.

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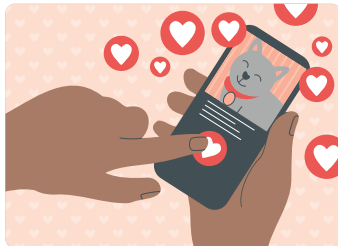
Roll Out the Red Carpet *for your practice's senior patients!*

As the "front of the house," you can make senior pets and their families feel instantly at home—and show them they matter just as much as puppies and kittens. Try these tips for a senior-friendly experience:



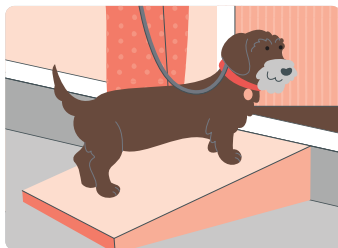
Make sure to update photos in their patient profiles.

Aging is a privilege – let your patients show off by offering to snap a pic in the waiting room or exam room while they wait to check out.



Repurpose those photos for social media.

Sweet senior pet photos are pretty hard to scroll past. Plus, by highlighting seniors on your social, other families with seniors will know you're a safe bet (and maybe remember it's time to make an appointment).



Chivalry isn't dead.

When you know a geriatric pet is on the schedule, get props ready. Smaller gestures can make an enormous difference in an older pet's visit, like inexpensive yoga mats in the waiting room, orthopedic beds in the exam room, ramps for getting over curbs and in and out of cars, and, for the most limited mobility patients, rooms closest to the door to avoid having to walk too far.



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