President’s Message

A hallmark of veterinarians is the collegiality that they share with their colleagues. I had the privilege of attending the recent New England Veterinary Medical Association Leadership Conference where I saw this mutual respect and consideration on display.

Our own Dr. Rob Belden was this year’s meeting chair. He showed the skills honed as the CVMA President in running this meeting. We then had the opportunity to hear from Dr. Ted Cohn, AVMA President-Elect and Dr. John de Jong, AVMA Executive Board member, speak about the many things that AVMA is doing for veterinarians and their patients. Connecticut’s Past President Dr. Chris Gargamelli spoke about the COMPASS Mentoring Program in Connecticut which is a national model for other states.

It was a packed agenda as we heard about the activities of each state veterinary association. Dean Deb Kochevar from Tufts Cummings Veterinary School spoke about the impact of veterinary medicine in New England. This was followed by an AVMA governance update and a briefing from Karen Bradley, Vermont VMA, on the Women’s Veterinary Leadership Development Program.

The New England state veterinarians covered a diverse range of topics such as: state import regulations, veterinary licensure reciprocity during an emergency, real or perceived workforce shortages in New England and an update on the implementation of the USDA’s Animal Disease Traceability Rule.

There were robust discussions surrounding many of the issues. It was great to see the relationships that have developed over the years and to observe how the new state leadership was embraced and to observe the decorum in the room, as we drove towards solutions and ways to approach some of the difficult challenges that each of the states face.

From a personal standpoint I appreciated the great camaraderie that exists between leaders at the regional and the national level. I enjoyed my conversation with the president elect of AVMA, Dr. Ted Cohn. We talked about the collective assets and buying power of sixty five thousand members of the AVMA.

Mark Your Calendars!
CVMA’s 130th Annual Meeting & Convention
April 1-2, 2014
Connecticut Convention Center, Hartford, CT

The Connecticut Veterinary Medical Association (CVMA) Board of Directors is pleased to invite you to join us for CVMA’s Annual Meeting and Convention on Tuesday and Wednesday April 1st and 2nd, 2014. Each year the CVMA’s Annual Meeting and Convention, a premier educational event for Connecticut and New England veterinarians, is well attended. We expect another great meeting in 2014. We are continuing at the Hartford Convention Center, a wonderful venue for our educational seminars.

We have an impressive schedule of presentations which cover a wide range of important topics for veterinarians and the entire health care team.

We also have the support of the industry who will have the newest in veterinary services and products to showcase.

Please see the Speaker Program and the Registration forms contained in this newsletter for detailed information. It will be an event not to be missed!
Connecticut’s court case of Vendrella vs. Astriab has raised concern in everyone involved with Equus caballus, as well as Equus asinus, for that matter. A parent holds his 1 ½ year old child up to a horse and the child is subsequently bitten in the face. The court deems the equine species in the category of “vicious animals”. The ramifications of this judgment if it stands would strangle the equine industry as we know it. It is unfathomable that it has even come this far. This has caused much discussion and contemplation amongst those of us involved with horses.

I had always been under the impression that the few horses I had come across that were even remotely in the category of “vicious” were made so by mistreatment from Homo sapiens. Then there was a colt I took care of from birth who was nasty to anyone and everyone from 2 days of age. I had long since lost track of him but the source of his behavior puzzled me. A few years ago I was at a large national equestrian event and struck up a conversation with an Oklahoma cowboy farrier who was in the barn having been banged up by an overly exuberant young horse. Somehow we got on the subject of horses with the above described behavior, of which he had known a handful. His explanation: “They got crippled mamas.” All of a sudden it made perfect sense. With a mother unable to discipline them, if there was no other strict “Auntie” mare around to enforce the rules, these foals grew up insecure with no boundaries or direction. The animal kingdom is not immune to the problems of inadequate parenting. That said, I do believe that the vast majority of mares do an adequate job of raising their offspring, if we let them.

Regardless, the fate of Connecticut’s equine industry is now in the hands of the state Supreme Court. As we wait for them to make a decision as to whether our horses are inherently vicious animals, let’s hope the voice of reason prevails.
CVMA Board of Directors Highlights

The CVMA Board of Directors passed a budget for the upcoming year. CVMA will continue to invest in strong educational programing and a strong legislative presence at the state capitol.

- An audit was performed for the period ending October 31, 2012.
- The lobbying contract with Levin Powers and Brennan was renewed for a two year term and a $5,000 fee increase was awarded. The fee for each of the next two years will be $45,000 plus registration and taxes.
- The management contract with Flynn Management for providing the CVMA office and staff was renewed for a one year term for $128,000 until October 31, 2014.
- The newly endorsed Bank of America / Merrill Lynch program is being communicated to the membership through the regional veterinary meetings held at the county level.
- The CVMA bylaws are undergoing a major rewrite. Two of the significant issues being discussed are shrinking the size of the Board and eliminating regional considerations in Board member selections, while increasing the emphasis on practice types. The Bylaws Committee is interested in bringing a proposed change to the membership at the April 1-2, 2014 Annual meeting.
Idiopathic laryngeal paralysis is a common condition seen in large and giant breed dogs. Labrador retrievers, golden retrievers, and Irish setters are overrepresented. The median age of affected animals is approximately 9 years old, but the condition has been reported in dogs as young as two. The etiology of idiopathic laryngeal paralysis has been theorized to be caused by cervical trauma from collars, hypothyroidism, neuropathies, myopathies, or other immune-mediated diseases.

Presenting signs are due to laryngeal dysfunction and obstruction of laryngeal airflow. Most dogs will present with a history of voice change, exercise intolerance, coughing or stridor exacerbated by stress or exercise. In severe cases, dogs may present with dyspnea, hyperthermia, vomiting, collapse or death. The most notable physical exam finding is a stridorous, high-pitched inspiratory noise due to a narrowed rima glottis. Moist lung sounds may be ausculted if secondary aspiration pneumonia or postobstructive pulmonary edema has developed. Differential diagnoses should include any condition that obstructs laryngeal airflow. These include laryngeal collapse, neoplasia, foreign body, and pyogranulomatous laryngitis.

CBC/chemistry profiles are usually unremarkable unless aspiration pneumonia has developed, in which case an elevated WBC count may be seen.

Cervical and thoracic radiographs should be obtained to rule out other causes of respiratory dysfunction. Concurrent aspiration pneumonia or postobstructive pulmonary edema will be evident as an alveolar or interstitial pattern on thoracic radiographs.

The diagnosis is confirmed by visual inspection of laryngeal movement under a light plane of anesthesia. It is important to use drugs that have minimal interference with laryngeal function. Propofol, thiopental, and ketamine/diazepam are appropriate choices. On visual assessment, edema and erythema of the arytenoid cartilages are frequently seen, along with absent or minimal abduction of the arytenoid cartilages and vocal folds during inspiration. It is important to differentiate paradoxical movement of the arytenoid cartilages in which they will be adducted toward midline during inspiration due to increased respiratory effort, and relax to a paramedian position during exhalation. Any movement of the arytenoids should be synchronized with the phase of respiration. In questionable cases, doxapram can be given to stimulate laryngeal motion.

Patients presenting with respiratory distress should be treated as a medical emergency with oxygen, sedation, corticosteroids, and cooling as necessary. In rare cases, an emergency tracheostomy is warranted. Definitive treatment of moderate to severe laryngeal paralysis necessitates surgery. Although several procedures have been described, unilateral arytenoid lateralization is the most popular. To abduct the arytenoid cartilage, a lateral cervical approach is made and 1-2 sutures are placed between the muscular process of the arytenoid cartilage and either the cricoid or thyroid cartilage.

Fig 1. Postoperative view of the larynx showing abduction of the left arytenoid cartilage

Complications include recurrence of clinical signs due to suture avulsion, and aspiration pneumonia (incidence: 20%). Nevertheless, the long term prognosis is good with 90% of patients showing improvement in respiratory function.
As newly graduated veterinarians we are charged with some very daunting yet exciting tasks. From relocating and finding a job, to actually practicing medicine, being a veterinarian can be a scary and rewarding experience. We hear many words of wisdom from our lecturers, colleagues, and mentors in veterinary school, but the one observation that remains with me is that we are in the greatest profession in the world. I didn’t know how great it would be until I actually got to experience it.

My first year and a half of practice has been filled with many ups and downs. I seem to learn just as much from the difficult situations as I do from the easy wins. I’d like to share some of the thoughts, emotions, and experiences that I have had in the short amount of time that I’ve been in the profession.

I consider myself a pretty hardened man and therefore I didn’t think I would have anxiety with euthanasia. My experience in the Army has prepared me to be cool, calm, and collected in difficult situations. I can recall days where I would walk into room after room having to discuss and perform euthanasia on our client’s pets. I can specifically recall having to put down the sweetest Golden Retriever and having a very tough time keeping myself together in order to portray some sense of professionalism. Moments later I walked into the next appointment where an eight week old golden retriever puppy came running into my arms. The circle of life had never been more apparent to me. These are the moments that make being a veterinarian so rewarding.

One other piece of advice that I continue to hear is that you should always offer the best care and treatment plan to each pet. I had a middle aged spayed female DSH present for acute onset of anorexia and vomiting. On the physical examination the pet had a fever and cranial abdominal pain. Bloodwork revealed severely elevated liver enzymes. I discovered several mineralized choleliths. We started supportive care with IV fluids, antibiotics, liver protectants, etc, but the patient was not improving. It was time for an ultrasound and by now the bill was considerable. The owner’s kids were crying and I didn’t have a very good feeling about the outcome of the case. However, two months later, after surgery to stent the common bile duct, continuous care, medications and THOUSANDS of dollars spent, the cat has never been better. The owners ask me all the time if they should have spent this much money on their cat and every time, I point to the kids that are now smiling and laughing with their cat. These cases are what make this profession so rewarding.

As new graduates we experience remarkable highs and lows. These experiences humble us and make us want to get better each and every day. We never stop learning and growing. For all these reasons this is the BEST profession in the world and I am PROUD to finally be a part of it.

Advise to New Veterinary Graduates
by Ryan Koopmans, DVM
Iowa State University, Class of 2012

I discovered several mineralized choleliths. We started supportive care with IV fluids, antibiotics, liver protectants, etc, but the patient was not improving. It was time for an ultrasound and by now the bill was considerable. The owner’s kids were crying and I didn’t have a very good feeling about the outcome of the case. However, two months later, after surgery to stent the common bile duct, continuous care, medications and THOUSANDS of dollars spent, the cat has never been better. The owners ask me all the time if they should have spent this much money on their cat and every time, I point to the kids that are now smiling and laughing with their cat. These cases are what make this profession so rewarding.

As new graduates we experience remarkable highs and lows. These experiences humble us and make us want to get better each and every day. We never stop learning and growing. For all these reasons this is the BEST profession in the world and I am PROUD to finally be a part of it.
Best Practices for Fraud Prevention

Educating Users to Take Active Precautions

by David Moseleski, CFP® & CRPC®, Merrill Lynch Bank of America

Fraudsters are increasingly targeting companies that conduct online business, employing sophisticated tools designed to compromise your system and surrender control of your computer. Bank of America Merrill Lynch has a wide array of robust security features designed to help you reduce your exposure to certain types of fraud. To understand actions you can take to help your company reduce the risks associated with fraud, refer to the below online security tips and best practices to get started today. Best practices for fraud prevention:

Online Best Practices

- Be attentive during your online sessions. Know when and how the systems will prompt you to authenticate, whether at login or to approve a transaction. If you see prompts for entering your credentials that appear out of sequence or at points in a workflow that are not familiar, do not enter your data and contact your bank.

- Pay attention to the appearance of the application screens. If they are not consistent with what you are accustomed to or show unfamiliar data fields, this could mean your browser has been compromised. Stop your transaction and contact your bank.

- Use caution when visiting internet sites from the same computer, or mobile device, where you carry out online banking activities. Access only trusted websites for business purposes because malware can be downloaded without your knowledge from unsafe or compromised websites.

- Install a dedicated, actively managed firewall, especially if there is a broadband or dedicated connection to the internet, such as DSL or cable. A firewall limits the potential for unauthorized access to a network and computers.

Email Best Practices

- Do not use your online portal passwords for other non-related websites that you access.

- Never share usernames and password information for online services with third-party vendors.

- Restrict computers from accessing personal email accounts.

- For the highest level of security, conduct all online banking activities from a stand-alone, hardened and completely locked down computer system from which email and web browsing are not possible.

- Use notifications to alert you of transaction status changes including: pending payment and payment template approvals, positive pay exceptions, investment orders and account restrictions, as well as information reporting alerts for ACH outgoing payments.

- Leverage segregation of duties and dual approval for payments and entitlement changes.

- Do not open file attachments or click on web links in suspicious emails as that could expose your system to malicious code that could hijack your computer.

- Be on the lookout for grammatical errors, awkward writing and poor visual design. Typos and other errors are often the mark of fraudulent emails or websites.

- Be suspicious of emails that claim to be from a financial institution, government department or other agency requesting account information, account verification or banking access credentials such as usernames, passwords, PIN codes or similar information.

- Sometimes criminals send email that looks like it has come from Bank of America Merrill Lynch or another trusted source. Be on the lookout for these requests in fraudulent emails.

- Requests for personal information should raise a flag since trusted sources should never ask you to reply in an email with any personal information, such as your Social Security number, ATM or debit card PIN.

- Urgent appeals, such as claims that your account may be closed if you fail to confirm, verify or authenticate your personal information, are common schemes to entice users to yield sensitive information.

Continued on page 7
• Messages about system and security updates, and impending software upgrades, are also designed to trick users into providing sensitive company information.

• Offers that sound too good to be true are frequent tactics used by fraudsters. These ploys ask the user to fill out a short customer service survey in exchange for a credit to your account. Then they solicit account numbers for proper routing of the supposed credit.

• When you see a suspicious email, show it to your employees and instruct them on its questionable characteristics.

System Best Practices

• Review users’ needs for administrative rights. If possible, limit administrative rights on computers to help prevent the inadvertent downloading of malware or other viruses.

• Install commercial anti-virus, spyware detection programs and desktop firewall software on all computer systems, specifically seeking products that protect your internet browser. Free software may not provide protection against the latest threats compared with an industry standard product.

• Make certain virus and anti-virus protection, security software and computers are updated regularly — including security patches for operating systems and other applications.

• Verify that your browsers are connecting to all online banking sites via a secure session versus an encrypted session using HTTPS or Secure Sockets Layer (SSL) protocols, which encrypts information passed between the client (browser) and the server (website). Websites using this protocol will include “https://”.

• Avoid using automatic login features that save usernames and passwords when using online banking applications.

• Never leave a computer unattended while using any online banking or investing service.

• Never access bank, brokerage or other financial services information using public or shared computers at internet cafes, public libraries or other unsecure locations. Unauthorized software may have been installed to capture account number and sign-on information, leaving the customer vulnerable to possible fraud. Additionally, avoid using public WiFi networks when accessing online financial services. Fraudsters often target users of these networks.

• Understand your responsibilities for using all protection tools and the importance of layering security tools.

• Immediately inform your financial institution of all suspicious transactions. Every minute counts to reverse and recapture lost funds.

• Establish procedures to identify and isolate computers from the network that become infected with malware. Make certain infected computers are fully remediated prior to reintroducing them for use to conduct online transactions.

Electronic Payment Best Practices

• Set individual user limits appropriate for the payment and the user.

• Use maximum dollar amount per transaction for initiating and approving wires/ACH.

• Set maximum daily cumulative dollar amount for all wires initiated and/or approved.

• Review ACH and wire-transfer procedures on a regular basis and make sure that user credentials are updated and maintained to represent appropriate needs.

• Use repetitive wire templates to eliminate manual intervention and manipulation.

• Implement ACH Blocks to block incoming ACH transactions from posting to your accounts.

• Use ACH Positive Pay to monitor and control ACH transactions before they post to the bank account and allow transaction acceptance or rejection in real time.

Check Payment Best Practices

• Reconcile accounts on a daily basis.

• Segregate internal duties for financial activities (audit/control).

• Consider migration from check payments to electronic payment products.

• Become fraud focused on inquiries from other banks or institutions regarding legitimacy of checks.

• Safeguard check stock and use check stock security features.

• Consider outsourcing check processing to secured vendor.

• Use Positive Pay to prevent check fraud.
Dr. Laurie McCauley is a 1992 graduate of Colorado State University School of Veterinary Medicine. After 6 years in general practice she became a pioneer in the field of veterinary rehabilitation. She created the first canine underwater treadmill and started the first rehabilitation clinic. Since opening in 1998, her rehabilitation clinic has become one of the world's most advanced and respected rehabilitation clinics. She is certified in Acupuncture and Chiropractic Medicine and has been teaching Rehabilitation since 2004 for the Canine Rehabilitation Institute's certification course. Dr. McCauley has contributed to textbooks, educational DVDs, veterinary journals and lectures, both nationally and internationally. She has been awarded the IAMS Eukanuba Award of Excellence in the field of Veterinary Rehabilitation and is on the Board of Directors for the American Holistic Veterinary Medical Association.

- Exercises for the puppy, adult, athlete, and geriatric patients
- Post surgical, neurological, and athletic passive range of motion (PROM)
- Rehabilitation of the neurological patient
- Massage for the patient

Continued on page 9
David has been in the financial services industry since 1989. He holds the CFP® & CRPC® designations (Certified Financial Planner and Chartered Retirement Planning Counselor).

David will discuss how to start your financial plan and how to turn your negatives into positives.

John Wlodarek

John began his finance career with Bank of America Practice Solutions in 2009. In January 2010, he joined the Veterinary division, specifically focusing on serving the needs of veterinarians.

He will discuss steps you should be taking to prepare for practice ownership. He will also address what lenders look for in a borrower, business plans, and analyzing your credit score.

Mark McGaunn

Mark McGaunn, CPA/PFS CFP® is the Managing Member of McGaunn & Schwadron, CPAs, LLC, a Needham, MA CPA and wealth management firm that provides strategic tax and business planning, personal financial planning, asset protection, and investment advisory services for veterinary and dental practice owners. Mark is a Certified Public Accountant (CPA), an AICPA Personal Financial Specialist (PFS), a CERTIFIED FINANCIAL PLANNER™, and a cum laude graduate of the University of Massachusetts, Amherst.

Mark will educate prospective veterinary practice owners on the potential rewards and risks associated with ownership. Future practice owners will reach the highest levels of success when they educate themselves on how to implement and integrate expected systems to achieve sustained growth. This comprehensive view of veterinary practice ownership includes the top strategies needed to drive production and understand profitability to attain early financial independence.

David Pugh, DVM, MS, Dipl ACT, ACVIM, AGVM

Dr. David Gartrell Pugh earned both DVM and MS (Nutritional Physiology) degrees from the University of Georgia in 1981. He received post-DVM training at Virginia Tech (Clinical Nutrition) and Texas A & M University (Theriogenology). He is a Diplomate of the American College of Theriogenology (1986), the American College of Veterinary Nutrition (1992), and the American College of Veterinary Microbiology (Parasitology-Charter 2011).

Dr. Pugh has held faculty positions at the University of Georgia and Auburn University, owned a large animal practice in Georgia and has been a consulting veterinarian for Fort Dodge Animal Health and Pfizer Animal Health. He is the project veterinarian for the AU Equine Source Plasma Project.

During his academic career he taught veterinary nutrition for horses, cows, and small ruminants, and was a clinician in ambulatory medicine and theriogenology. He is the author of more than 500 publications, more than 100 book chapters, and 3 textbooks.

- Deworming, feeding, herbal treatments and pasture management for parasite control in sheep, goats, llamas, alpacas and horses
- Vaccine, feeding and care of draft horses, donkeys, and mules
- Teaching and research for the private practitioner

Susan Bryant, CVT, VTS (Anesthesia)

Susan Bryant graduated from Columbus Technical Institute (now called Columbus State) in 1986 with a degree in Veterinary Technology. She became employed in the Anesthesia Section at Tufts Cummings School of Veterinary Medicine in 1998 and became the supervisor of the section in 2000. At Tufts, she is responsible for anesthetizing a variety of species (small and large animal) for various procedures and teaching fourth year veterinary students how to safely anesthetize animal patients. She earned the title of Veterinary Technician Specialist (Anesthesia) in 2002. Ms. Bryant then became the Veterinary Technician Manager at Tufts. She has lectured at national and local conferences including WVC, AVMA, NAVC, the CVCs, Vermont Vet Tech Association, MVMA, The Rhode Island Veterinary Association and several Tufts sponsored conferences on anesthesia and pain management topics.

- Airway Management and Considerations
- Monitoring The ECG and Cardiac Function Under Anesthesia
- Facts and Fiction about Pulse Oximetry
- Monitoring and Troubleshooting Blood Pressure on Anesthetized Patients
- Are you Fluent in Capnography?
- Anesthesia for the Dystocia Patient

Mark E. Peterson, DVM, Dipl ACVIM

Dr. Mark Peterson graduated from the University of Minnesota in 1976, moved to NYC to do an internship and medical residency at the Animal Medical Center, and then completed a post-doctoral fellowship in endocrinology and nuclear medicine at The New York Hospital-Cornell Medical Center and the AMC.

Following his training, Dr. Peterson stayed on as head endocrinologist at the AMC for over 30 years. In 2009, he opened the Animal Endocrine Clinic in New York City, a specialty referral hospital devoted exclusively to the diagnosis and treatment of dogs and cats with endocrine disease, where he now cares for his endocrine patients.

Over the last 35 years most of Dr. Peterson’s clinical and research efforts have been directed toward advancing our understanding of endocrine disorders of the dog and cat, especially diabetes mellitus, thyroid and adrenal diseases. He has published more than 500 journal articles, book chapters, and research abstracts. With more than 450 lecture presentations to his credit, Dr. Peterson is a frequent speaker at veterinary colleges and scientific seminars both in the United States and around the world.

- Diagnosis and treatment of canine and feline hypothyroidism
- Feline hyperthyroid update
- Update in diagnosis and treatment of Cushing’s disease in dogs
- Insulin and diet choices for the diabetic: What protocols work best?
CVMA is looking for your input on our service awards. Nominations will be accepted from CVMA members, and then will be reviewed by the CVMA Public Relations Committee, which will make the final decision. The Committee reserves the right not to select a recipient, if, in its judgment, the nominee does not meet the criteria for the award. Awards will be presented at the CVMA Annual Meeting on April 1st, 2014 at the CT Science Center.

Name of Nominee: _________________________________________________________

City: _____________________________________________________________________

Nominated for:  □ Veterinarian of the Year  □ Distinguished Service Award  □ Pet of the Year  
(check one)

Name of Nominator: ________________________________________________________

Address: __________________________________________________________________

City: ____________________________State: __________ Zip Code: _________________

Phone: ________________________________Fax: ________________________________

Email: ____________________________________________________________________

This completed nomination form must be submitted with a cover letter of not more than 1 page describing the reasons the nominee should be considered for the award.

Please submit the completed nomination form to:
CVMA, PO Box 1058, Glastonbury, CT 06033, or fax to 860-659-8772.
Deadline: February 15th, 2014

LAST YEAR’S AWARD WINNERS

2013 • Eva Ceranowicz, DVM. This award recognizes a distinguished CVMA member who has contributed to the advancement of veterinary medicine in Connecticut in one or more of the following areas of organized medicine, education, research, practice or regulatory service.

Veterinarian of the Year

2012  Peter Conserva, VMD
2011  Donna A. Cobelli, DVM
2010  Kirklyn Kerr, DVM, MS, PhD, DACVP
2009  Richard Lau, DVM
2008  Arnold L. Goldman, DVM, MS
2007  Larry Pennington, DVM
2006  Sheldon Z. Yessenow, DVM, and Laura Newsom Rand, DVM
2005  Willard Daniels, DVM, and Steven Levy, DVM
2004  William A. Haines, DVM

2013 • Senator Richard Blumenthal for Animal Advocacy
2013 • Firefighter Clifford Monges for dedication above and beyond the call of duty in preserving animal life. This award recognizes a non-veterinarian who has significantly impacted the well being of animals and/or the veterinary profession.

Distinguished Service Awards

2012  Brian Hurfburt
2011  Nancy Klaflky
2010  Maureen Sullivan Dinnan, JD, HAVEN
2009  Rachel Rubin, JD, Rep. Roberta Willis
2007  The Hartford Hospital Pet Therapy Program
2006  Retired Pfizer Animal Health Senior Territory Manager Samuel McGee, and West Hartford Fire Chief William Austin
2005  Rep. Denise W. Merrill
2004  Rep. Peggy Sayers

2013 - To Recognize the Special Animal Contributions made at Sandy Hook. The Golden Retrievers of Lutheran Church Charities. The Kittens of Kitten Associates, Inc. Michael Cragin and Truman. This award recognizes a domestic animal who, through unselfish and extraordinary behavior, exemplifies the affection, loyalty, security and value of the human animal bond.

Pet of the Year

2012  Sooner Courneen & Tiger Amoro
2011  “Bentley” Stein
2010  “Red,” Branford Police Dog
2009  “Emma” Shaffer; “Lincoln Scot” Patterson

2008  “Doug,” Georgetown Veterinary Hospital
2007  “Celeste” Boothby, “Quinton” Magnuson, “Baylee” Munsell, and “Toby” Stone (all dogs from the Hartford Hospital Pet Therapy Program)
2005  “Jake” Ludwikow
The Connecticut Veterinary Medical Association endorsed Bank of America Merrill Lynch on August 14th, as a provider of services to member practices.

The CVMA Executive Committee carefully made this decision by comparing products, services, and rates for several competitive banks. The Committee determined that Bank of America Merrill Lynch provided superior opportunities that we believe can best benefit member practices, and the CVMA.

The Bank of America partnership advisory approach is unique in the industry. While our size and level of expertise are impressive, you will find that our approach is personal and hands on. Bank of America Merchant Banking, Practice Solutions, and Small Business Banking - coupled with Merrill Lynch Wealth Management - are working together to ensure the growth and success of the CVMA and Member practices.

Merchant Banking Solutions provides an immediate and readily identifiable change in your merchant services rate. Bank of America is providing a rate of 9bps for all member practices. As we cement our relationships with the CVMA, we are sculpting the model of what we at Bank of America Merrill Lynch and Merchant Solutions are striving towards in terms of our mission and accomplishments with our veterinarians. We recently worked with a local practice owner who was interested in merchant card services. Not only are we saving her $1500 annually on her merchant services rate, but the veterinarian is also investing with our Wealth Management team and reviewing options for a loan with Practice Solutions.

Veterinary Practice Solutions has the expertise to accommodate new practice start-ups, practice sales and purchases, business debt consolidation, equipment financing, commercial real estate, as well as providing educational seminars about topics ranging from first-time hospital owners to succession planning. Veterinary Practice Solutions recently worked with a local veterinarian to restructure their debt; by consolidating the seller note used to purchase his practice, and several equipment loans, we are lowering his payment by $1200 a month, and $14,000 annually.

Bank of America loaned over $100,000,000 to doctors in 2012. For the CVMA, hospital financing requests will receive 50% off any administration fee. The current interest rate environment is still ideal for low rate refinancing of existing debt structures and ideal from a long-term amortization perspective. We recently worked with a local practice owner to refinance their building, saving them 1% on their existing loan. Practice Solutions is committed to helping established owners, as well as working with new veterinarians in Connecticut who are looking to start, or purchase their first practice.

Small Business Banking Solutions offers personal service for all members at every level of banking, including a personal liaison for every aspect of member needs. We also offer Business Advantage Checking with zero monthly maintenance for hospital owners. We will coordinate with our local branch locations to make sure your banking experience is a success.

Merrill Lynch Wealth Management Services offers access to a broad array of competitive financial solutions, designed to help you address your unique financial needs. Merrill Lynch offers a complimentary Complete Business Review Analysis as it relates to retirement plan services, such as 401ks, profit-sharing plans, cash balance plans, etc. We recently provided a complimentary review of a 401k and the result was a savings in administrative costs and a better line-up of fund choices.

Your life and your life’s work are inextricably linked. We will take the time to gain an in-depth understanding of your goals and your business in order to propose strategies that address your needs both at your practice, and at home. All members will receive 50% off of solution fee-based programs with Merrill Lynch.

We look forward to working with you, and encourage you to take advantage of what Bank of America Merrill Lynch can do for your practice, and you.

Please reach out to David Moseleski at 860-728-3567 or david.moseleski@ml.com.
The loss of the AVMA Group Health Insurance delivered the sobering reality that we need to be ready for the changes occurring in our health insurance system. Veterinarians will be facing these changes from the standpoint of our own individual insurance, and as business owners. Leaving the politics of this aside, learning what we can about the new requirements and the options available is essential for future management of our health insurance. Additional administrative burdens for employers will be lessened if practice owners know what is coming at them.

The changes are a little easier to assimilate if they are broken down into categories that are most relevant. Looking at those guidelines and regulations that apply to small businesses with less than 25 employees is most fitting for the majority of veterinary practices. The 2011 AVMA Report on Veterinary Practice Business Measures indicates there is an average of 10 employees for companion animal exclusive practices. All other practice types average less than this amount. The Small Business Administration (SBA) offers guidance for the self-employed, and businesses of less than 25 employees. 1

Self-Employed

Implementation of the Patient Protection and Affordable Care Act (PPACA) occurs in stages, with many of the reforms and requirements taking effect in 2013 and 2014. Some of the key provisions that may impact self-employed individuals include the following:

Individual Shared Responsibility Provisions

Starting in 2014, the Individual Shared Responsibility provisions of the Affordable Care Act call for each individual to have minimum essential health insurance coverage unless qualifying for an exemption, such as hardship or religion, or if the only coverage they qualify for is unaffordable. Qualifying plans include those from the individual marketplace, employer based insurance plans as well as government subsidized plans such as Medicare, Medicaid, and TriCare (military).

Individual Insurance Marketplaces

Coverage through new competitive health insurance marketplaces for individuals and small businesses will be in place January 1, 2014 with open enrollment beginning October 1, 2013. The individual health insurance marketplaces will offer a choice of four levels of benefit packages that differ by the percentage of costs the health plan covers. Individuals and the self-employed may qualify for individual tax credits and subsidies on a sliding scale, based on income. The marketplace and additional pertinent information regarding individual coverage can be accessed at <http://finder.healthcare.gov/>.

New Medicare Assessment on Net Investment Income

Beginning January 1, 2014, a 3.8% tax will be assessed on net investment income such as taxable capital gains, dividends, rents, royalties, and interest for taxpayers with Modified Adjusted Gross Income (MAGI) over $200,000 for single filers and $250,000 for married joint filers.

Employers with Fewer Than 25 Employees

Small Business Health Care Tax Credits

The small business Health Care Tax Credit is specifically targeted for small employers with low- and moderate-income workers. The credit is designed to encourage small employers to offer health insurance coverage for the first time or maintain coverage they already have. The criteria for qualifying for this credit is the same since first instituted in 2010:

- **Have fewer than 25 full-time equivalent employees (FTEs)**
- **Pay average annual wages below $50,000**
- **Contribute 50% or more toward employees’ self-only health insurance premiums**

In 2014, this tax credit goes up to 50% and is available to qualified small employers that participate in the Small Business Health Options Program (SHOP). Eligible small employers can claim the current credit through 2013, and the enhanced credit can be claimed for any two consecutive taxable years beginning in 2014 through the SHOP.

Workplace Wellness Programs

20 to 50 percent of the cost of health care coverage may be available to employers that implement health-contingent wellness programs. Examples are programs that provide a reward to employees who don’t use, or decrease their use of, tobacco, and programs that reward employees who achieve a specified level or lower cholesterol.

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1 - <http://www.sba.gov/healthcare>
Welcome New Members

Dana Klaiber, DVM  
The Ohio State University ’04  
Southwick Animal Hospital  
498 College Highway  
Southwick, MA 01077

Parameshwara Kurapati, DVM  
Sri Venkateswara Veterinary University, ’08  
Healthy Pet Vet Plus  
2480 Albany Avenue  
West Hartford, CT 06117

Shelley Smith, DVM, DACVECC  
Tufts ’07  
VCA Veterinary Referral and Emergency Center  
895 Bridgeport Ave  
Shelton, CT 06484

Alice Benedict, DVM  
Tufts ’04  
VCA Veterinary Referral and Emergency Center  
895 Bridgeport Ave  
Shelton, CT 06484

Frank Kostolitz, DVM  
University of Parma, School of Veterinary Medicine ’84  
Yalesville Veterinary Hospital  
322 Church St.  
Yalesville, CT 06492

Julia Rando, DVM  
Tufts Cummings SVM ’12  
North Veterinary Clinic  
118 Ashford Center Rd  
Ashford, CT 06278

Shari Greenberg, DVM  
Tufts ’09  
New England Veterinary Center and Cancer Care  
955 Kennedy Road  
Windsor, CT 06095

John Robb, DVM  
University of California at Davis ’85  
Protect the Pets LLC  
36 State Route 37  
New Fairfield, CT 06812

Gregory Krane, DVM  
Tufts ’09  
Plainfield Veterinary Hospital  
1100 Norwicht Rd  
Plainfield, CT 06374

Dawn Nolte, DVM  
Cornell University ’98  
VCA Shoreline Veterinary Referral and Emergency Service  
895 Bridgeport Ave  
Shelton, CT 06484

Katryna Fleer, DVM  
University of California at Davis ’08  
VIP PetCare  
5813 Skylane Boulevard  
Windsor, CA 95492-6836

“Like” Us on Facebook  
Visit CVMA at Facebook.com/ctvma for updates about your organization, veterinarians in Connecticut and other topics.
The Connecticut Veterinary Medical Diagnostic Laboratory (CVMDL) at UCONN is known for veterinary diagnostics of domestic and wild animal species. We offer necropsy, histopathology, serology, virology, molecular diagnostics, microbiology and mastitis testing, with a focus on disease issues important to our region. However, the CVMDL is more than a "black box" where specimens are sent. You may not realize that CVMDL plays a role in all 3 parts of UCONN's Land Grant Mission: Teaching and Research, as well as Service.

Many faculty members in UCONN’s Department of Pathobiology & Veterinary Science also play key roles in the CVMDL. Interesting submissions to CVMDL have sparked research investigations beneficial to veterinarians or our agency clients, and the public. “Classic” examples include our investigation of crows “falling from the sky” which was one of the initial indications of emerging West Nile virus in our region, and the investigation of the lobster die-off in Long Island Sound, both of which occurred in the early 2000's. An interesting feline case in 2008 resulted in discovery of Streptococcus canis as a cause of necrotizing fasciitis and necrotizing myositis in cats. Collaborative investigations of marine mammal infectious diseases are ongoing; in 2011 avian influenza and mycoplasma co-infection were determined to impact the health of seals along the Northeast coast.

An ongoing retrospective study of infectious agents detected in ticks submitted to CVMDL over the past 10 years will reveal trends in the burden of infectious agents carried by our local tick populations; new tests to detect additional emerging tick borne pathogens will provide even more information.

Disease surveillance work performed at CVMDL, in conjunction with State and Federal agencies, produces data that is used for enhancement of national and regional disease control programs. Recent examples include avian influenza testing and surveillance, participation in transmissible spongiform encephalopathy (e.g. Mad Cow disease, scrapie) testing programs, and rabies testing.

One of the best things about being a veterinary diagnostic laboratory within a university is the close interaction we have with students, both graduate and undergraduate. CVMDL offers unparalleled experiential learning in veterinary diagnostics to our students. Graduate veterinarians can apply for our MS/ Veterinary Anatomical Pathology Residency program, an intense 3-year program preparing them for board certification in Veterinary Anatomical Pathology. Undergraduate students at UCONN can work or conduct independent study coursework in the laboratory sections or in the necropsy areas of CVMDL. This preparation is excellent for students with veterinary or human medical career goals, as well as for students with aspirations of entering fields in medical technology or public health. CVMDL faculty and staff mentor the next generation of veterinary and human medical professionals, and the next generation of UCONN diagnosticians. Our lab is more than a “black box”; it is an active place of teaching, research and service.

Executive Director’s Message

by Simon Flynn

I have always enjoyed the holidays. I was fortunate enough to grow up in a stable loving environment and blessed to have peacefulness in my experience as a father and grandfather. Perhaps it is because of my ability to live in the moment of a celebration without concern about the past or worry about the future that I am able to deal with adversity in much the same way.

However, the reality is that many people experience holidays differently, so it can be a trying time for them. If you add into the mix of dizzying holiday demands a crisis with a family pet, things can become difficult. In my opinion, just like with family physicians, veterinarians can find themselves being a part of this personal dynamic with clients, and with staff.

The professionals at the Mayo clinic have given us some tips, summarized below, which may help us deal with some of the common stressors of the holiday season.

Acknowledging your feelings. If you are dealing with the grief of a sickness or loss, you can’t force yourself to be happy, just because it’s the holidays. It’s ok to take time out and express your feelings.

Reach out. If you feel isolated seek out ways to connect to your community or, perhaps through social events and volunteering.

Be realistic. Things are never perfect and things change as your family changes. Find different ways to celebrate.

Set aside differences. Accept people as they are. There will be a more appropriate time to discuss established grievances. Set aside a budget and stick to it. Consider alternatives to giving gifts you can’t afford, such as having a gift exchange or giving to charity in someone’s name.

Learn to say “no”. Saying “yes” when you shouldn’t can leave you feeling resentful and overwhelmed.

Don’t abandon healthy habits. Don’t overdo the food and drink, and keep active.

Take a breather and make some time for yourself to do something that you find relaxing, such as taking a walk.

I hope you had a rewarding experience this holiday season.
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FURNITURE
We have two filing cabinets. One is three drawers, the other is five. They can stack together which is how we currently have them. They are drawer cabinets for 9”x6” hanging files and are in an Oak Finish. If you have any questions, please feel free to ask. Fifty dollars or best offer. Kristen Park • Kparkesvet@gmail.com • East Side Veterinary Clinic • 785 Paddock Ave. Meriden, CT

PRACTICES FOR SALE
Practice for sale. Opportunity to own a well-established small animal practice housed in a spacious, purpose-built facility in southwestern CT. The practice is well-equipped. Above the facility there is a home-size apartment. Revenues are in the 650K range with plenty of room for growth. Please contact Jim Stephenson at northeast@simmonsinc.com or call 800-474-4775. (CT125-0501)

Practice for sale in central CT. Housed in a freestanding, attractive facility on a well-traveled route in a residential section just outside of the city. The revenues are approximately $500K. Practice and real estate priced to sell at $495K. Please contact Jim Stephenson at northeast@simmonsinc.com or call 800-474-4775. (CT124-0501)

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Mark Your Calendars!
CVMA’s 130th Annual Meeting & Convention

April 1-2, 2014
Connecticut Convention Center, Hartford, CT

For more info. or to register go to: www.ctvet.org