Thursday, June 15, 2017
6:00—8:30 pm

Registration Sign in/Dinner
6:00-:6:30 pm

Lecture
6:30-8:30 pm

AZ Central Credit Union
2020 N Central Ave
Ste. L150 (plaza)
Phoenix, AZ 85004

- **Approach to the dyspneic Patient**
- **Upper airway obstruction diseases, diagnosis & treatment**
- **Lower airway diseases, diagnosis & treatment**
- **Primary pulmonary diseases, diagnosis & Treatment**
- **Cardiac causes, diagnosis & Treatment**

Veterinary Health Care Team of Arizona
Presents

Respiratory Distress in Dogs & Cats

Approved for 2 CE hours by the Arizona Academy of Veterinary Practice

PRESENTER
Katherine Smith, DVM, DACVECC

Dr. Katherine Smith grew up in Boise, Idaho. After finishing her residency, she moved to Nashville where she was the sole criticalist for BluePearl in Tennessee and the director of their internship program. She joined BluePearl of Arizona in May of 2015 as the third criticalist in a department that is highly regarded within the veterinary, and emergency and critical care community. Dr. Smith has a wide variety of clinical interests which include feline critical care, the use of biomarkers for diagnostic and prognostic information, SIRS and sepsis, mechanical ventilation, cardiac and respiratory emergencies, pain management, endocrine emergencies, pediatrics and post-surgical critical care. Receiving her Bachelor of Science from Tulane University and then her Doctor of Veterinary Medicine from Louisiana State University, Dr. Smith completed her internship with Small Animal Medicine and Surgery through the University of Georgia. She then completed her residency in Emergency and Critical Care at Cape Cod Veterinary Specialists in Buzzards Bay, Massachusetts. Dr. Smith is a Diplomate of the American College of Veterinary Emergency & Critical Care.

Respiratory Distress in Dogs & Cats
JUNE 15, 2017

☐ VHCTAz/AzVMA Member: $40.00 ☐ Non-VHCTAz/AzVMA Member: $76.00 (includes 1 year membership for Health Care Staff)
__ I would like to waive the 1 year membership and pay the non-member fee.

Name: _____ Hospital: _____

Phone: _____ Position: _____

Credit Card #: _____ Exp. Date: _____ V-code: _____

Amount: $_____ Name on credit card: _____

Signature: _____ E-Mail Address: _____

Dietary Restriction: ☐ Gluten Free ☐ Dairy Free ☐ Vegetarian ☐ Other _____

Fax registration with Visa, Discover, AMEX or MasterCard information to AzVMA, 602.249.3828
or mail with check to: AzVMA, 100 W. Coolidge St., Phoenix, AZ 85013, Phone 602.242.7936.

Cancellations before 6-1-17 will receive refunds in full. No-shows or cancellations received after 6-1-17 will be charged the full amount.