A Special Message from your KVMA President

This has been a crazy legislative session. Never, in my recollection, have there been such overt attacks on our profession. But rest assured, the KVMA is fighting for you.

The Kentucky Board of Veterinary Examiners, with input from the KVMA Legislative committee, wrote changes to our practice act that were much needed and introduced them as House Bill 269. Unfortunately, by opening the practice act for scrutiny, bills were introduced in the House (HB 619) and Senate (SB 242) that would change the definition of a veterinarian, eliminate the ability of the Kentucky Board of Veterinary Examiners to enforce the Veterinary Practice Act on retailers recommending over-the-counter products to consumers, and eliminate the ability of consumers to argue to the Board that a retailer is unlawfully practicing veterinary medicine. If these changes to the practice act pass, the only recourse for a consumer harmed by following the medical recommendations of a feed or pet store clerk will be to sue them.

One of the complaints by the Senators was that there is a shortage of food animal veterinarians in Kentucky, and so producers had to take animal health care matters into their own hands. Allowing store clerks to make recommendations for animal medical care, regardless of whether the products that they are recommending are over-the-counter or not, is not going to encourage veterinarians to enter food animal practice in Kentucky. I imagine most of you reading this have stories to tell about animal owners who have sought advice from a feed or pet store employee only to be sold treatments that were inappropriate, ineffective, or hazardous. I have had KVMA members tell me of many such cases such as adult horses being given tetanus antitoxin injections purchased at a farm supply store that caused fulminant liver disease 3 months later and cats dying of flea bite anemia because their owner kept going to the pet store for advice and were sold flea control products that were ineffective and, in some cases, toxic.

The good news is that we may have a compromise that will allow the Board of Veterinary Examiners to enforce the Veterinary Practice Act. At the time of printing, we do not know how House Bill 269 will fare but all involved are hopeful.

The proposed budget cuts, if enacted, will eliminate the state support for 16 newly accepted veterinary students to Auburn University’s College of Veterinary Medicine in 2016. As of publication, we have not heard from Tuskegee regarding their contract seats. We are fighting to make sure those seats are funded, but the bad news is that the students may have to declare a decision before the budget is

Continued on pg. 2
President’s message (cont.)

approved. The House version of the budget includes funding for the students. However, only time will tell if the funding survives the Senate and the Governor’s scrutiny.

House Bill 556 was introduced that would require veterinarians who do cat declaws to provide specific information to clients requesting a declaw before the procedure can be done. As a feline practitioner, I am very aware of the controversy regarding cat declawing. I am also aware that the American Association of Feline Practitioners and the American Veterinary Medical Association have position statements and guidelines for cat declawing that are more than sufficient for guiding veterinarians in the exam room dating as far back as 2003. While the KVMA does not have an official position on this bill, I have informed several of the legislators that this bill is not needed.

While these bills, on the surface, look like they are mainly affecting practicing veterinarians, all veterinarians are affected. Our priority is to protect the public and animal health and welfare. The KVMA is the voice for all veterinarians. We must stand united.

My thanks go out to every member who has contacted their Senator and Representative to encourage them to stop the war on veterinary medicine in Kentucky. We still have a lot of work to do. We need your help. Go to Kentucky.gov, click on Government, and enter the Bill Watch site. You can set up alerts when action occurs on the bills relating to veterinarians. When you contact your legislator, give them your name, tell them that you live in their district, and that you support or oppose the specific bill by number. You will find your legislators and their contact information through the Legislative Research Commission at www.lrc.ky.gov. Contact our executive director, Louise Cook, and tell her how you want to help. She will connect you with other KVMA members with similar interests.

Regardless of how this turns out, the KVMA will persevere because the threats will continue to come. This is an organization of volunteer veterinarians, of the members and by the members. I am proud of each and every one of you.

Alice W. Mills, DVM
President KVMA

Make sure to update your address books with the new KVMA e-mail address!

info@kvma.org
“In this world nothing can be said to be certain, except death and taxes.”

I will add another certainty to Benjamin Franklin’s observation, and that is change. Recently attending my 30-year veterinary school class reunion made that abundantly clear.

When I attended veterinary school, the board certified radiologists were learning how to use the newly acquired, latest imaging technology—the ultrasound machine. Pain management for horses primarily consisted of flunixin meglumine, phenylbutazone, and narcotics. The rapid, specific test called polymerase chain reaction was in no one’s vocabulary (yet).

People communicated via mail, telephone, or the radio in the veterinary practice vehicle. When having a meal with a friend or colleague, no one was interrupted by a text, cell phone call, or “bling” of an incoming email or social media post. Computers had disk operating systems (MS-DOS) and a basic personal computer cost $2,300 ($4,200 in today’s dollars).

Communication has always been important in the relationship between veterinarians, clients, and coworkers.

However, at the 2015 American Veterinary Medical Association Convention, it was sobering to see the numerous lectures on cyberbullying and workplace bullying. Bullying isn’t limited to playgrounds anymore; it is in the workplace and online and is a serious issue. People now have the ability to “comment” about anyone, on anything, at any time via social media and Internet sites. While this can be helpful when users rate a book, movie, new computer or phone app, baseless and vicious comments are rarely productive and could result in criminal or civil charges. Truthful complaints are best reserved for the local Better Business Bureau rather than anonymously online.

Yet some things have not changed and likely never will. Nothing will ever replace a thorough history and physical examination of an animal as the first steps in disease diagnosis. All the cutting-edge diagnostic testing, imaging and monitoring techniques must be interpreted in light of the behavior and clinical signs exhibited by the patient. As my anesthesiology professor pounded into us as veterinary students, “Look at your patient as well as the machines! The patient never lies!”

And while diagnosticians have an ever increasing arsenal of testing procedures for equine diseases, many challenges remain. Just because a horse has an antibody titer to a pathogen doesn’t necessarily mean it has the disease; it could simply mean the horse has been exposed to the pathogen and/or that it was vaccinated. How high is the titer, and what diagnostic method was used? What are the sensitivity and specificity of the test? All is dependent upon appropriate interpretation of the test result in conjunction with the patient history and physical examination.

Thirty years from now our current technology will be similarly outdated and likely be viewed as archaic by a new generation. Death, taxes, and change will always be with us. One other axiom by John Lubbock is also timeless: “There is nothing so good for the inside of a man as the outside of a horse.” ♦

Contact Roberta Dwyer, DVM, MS, Dipl. ACVPM, 859/257-4757, rmdwyer@uky.edu, University of Kentucky Maxwell H. Gluck Equine Research Center, Lexington, Kentucky

This is an excerpt from Equine Disease Quarterly, funded by Underwriters at Lloyd’s, London.
The gold standard official recommendations for rabies pre-exposure prophylaxis is issued from the Advisory Council on Immunization Practices (ACIP) which is published in CDC’s Morbidity and Mortality Weekly Report (MMWR) http://www.cdc.gov/mmwr/pdf/rr/rr5703.pdf as it is updated. The current ACIP Rabies pre-exposure prophylaxis- United States guidelines was published in 2008. Recommendations depend on your occupation and risk categories for real exposure to different rabies viruses. This area is called occupational medicine.

The rabies prevention system is designed with multiple redundant safety nets. First safety net: 1) All US veterinarians are vaccinated for rabies pre-exposure (3 immunizations over 21-28 days) which provides life time/long immunity. You are already immunized and protected in the event of an undocumented rabies exposure. Second safety net: 2) a) In the event of a documented exposure with a known rabid animal, previously rabies immunized persons, receive 2 booster doses 3 days apart b) non-immunized for rabies persons who have a documented exposure receive Human Rabies Immune Globulin (HRIG) on day 0 and 4 immunizations at days 0, 3, 7, 14. A fifth rabies booster is given to persons who have immune compromising medical conditions.

Rabies is uncommon to rare (and getting rarer) in Kentucky. KY 6 year average is 15 positive cases. The real risk to the human population is bat contact, as bats are the ancestral reservoir for all rabies viruses. In addition to this, Kentucky has skunk rabies in 10 counties which is the source of rabies for unimmunized for rabies dogs, very, very rarely cats, horses and cattle. If a practicing Kentucky veterinarian does not handle bats or skunks the ACIP guidelines recommend primary (pre-exposure) immunization and NO serologic testing or booster vaccination. In short, there is no need or indication to perform human rabies serology testing for average Kentucky practicing veterinarians.

If a practicing Kentucky veterinarian would handle bats and skunks their risk category would be higher and serologic testing would be recommended every 2 years and booster vaccination if antibody titer is below acceptable level. This is the same schedule as veterinary diagnosticians/pathologists and rabies laboratory diagnosticians. Occupations/professionals who handle bats need occupational (human) medicine oversight from their employer.

Finally, human rabies serology is (human) medicine being practiced. There are many state and federal laws that govern these activities and record keeping. The Kentucky Dept. for Public does not engage in private medical practice but does assist with public health or population based medical recommendations that are designed to benefit everyone. For more information, please contact: John Poe, DVM, MPH, State Public Health Veterinarian, Kentucky Dept. for Public Health, 502-564-3418 ext 4313 or email at john.poe@ky.gov

Practice Owners: Explore Your Future Options

- Get Fair Market Value for your Practice
- Keep your Team Together
- Retain your Practice’s Name, Image and Medical Direction
- Enjoy Collaborating with other Practice Leaders
- Continue Practicing on a Schedule that works for you

As you think about future options for your practice, please consider VetCor.

Contact: Dan Gavis
P: 617.501.0044
E: dgavis@vetcor.com
VetCor.com/practiceowners
Partnering with Local Practice
<table>
<thead>
<tr>
<th>Risk category</th>
<th>Nature of risk</th>
<th>Typical populations</th>
<th>Pre-exposure recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuous</td>
<td>Virus present continuously, often in high concentrations. Specific exposures likely to go unrecognized. Bite, nonbite, or aerosol exposure.</td>
<td>Rabies research laboratory workers; rabies biologics production workers.</td>
<td>Primary course. Serologic testing every 6 months; booster vaccination if antibody titer is below acceptable level.*</td>
</tr>
<tr>
<td>Frequent</td>
<td>Exposure usually episodic with source recognized, but exposure also might be unrecognized. Bite, nonbite, or aerosol exposure.</td>
<td>Rabies diagnostic laboratory workers, cavers, veterinarians and staff, and animal-control and wildlife workers in areas where rabies is enzootic. All persons who frequently handle bats.</td>
<td>Primary course. Serologic testing every 2 years; booster vaccination if antibody titer is below acceptable level.*</td>
</tr>
<tr>
<td>Infrequent (greater than population at large)</td>
<td>Exposure nearly always episodic with source recognized. Bite or nonbite exposure.</td>
<td>Veterinarians and animal-control staff working with terrestrial animals in areas where rabies is uncommon to rare. Veterinary students. Travelers visiting areas where rabies is enzootic and immediate access to appropriate medical care including biologics is limited.</td>
<td>Primary course. No serologic testing or booster vaccination.</td>
</tr>
<tr>
<td>Rare (population at large)</td>
<td>Exposure always episodic with source recognized. Bite or nonbite exposure.</td>
<td>U.S. population at large, including persons in areas where rabies is epizootic.</td>
<td>No vaccination necessary.</td>
</tr>
</tbody>
</table>

*Minimum acceptable antibody level is complete virus neutralization at a 1:5 serum dilution by the Rapid Fluorescent Focus Inhibition Test. A booster dose should be administered if the titer falls below this level.
KVMA Executive Board Retreat  
November 20, 2015  
Lake Cumberland State Resort  


• Meeting was called to order at 12:35pm CST
• A motion was made to accept the minutes of the September 25, 2015 Executive Board meeting, seconded, motion passed.
• A motion was made to accept the financial report, seconded, motion passed.
• A motion was made to accept committee reports, seconded, motion passed.
• A motion was made to accept the Anti-Trust Statement into our SOP and noted in the minutes, seconded, motion passed.
• A motion was made to table the suggestion to have the VP attend White Coat and then attend Graduation when Past-President at Lincoln Memorial University College of Veterinary Medicine, until it can be created and then will be presented at next board meeting, seconded, motion passed.
• A motion was made to accept the agreement with Infintech, credit card processor preferred provider, seconded, motion passed.
• 2016 KVMA Mid-America Veterinary Conference report was presented
• Legislative Committee report was presented - Practice Act revisions were sent out prior to the meeting for the Board to read. A motion was made to accept one of the 3 concepts proposed to the Practice Act that will be provided to the Kentucky Board of Veterinary Examiners, seconded, motion passed.

• A motion was made to accept new member applications, seconded, motion passed.
• A motion was made to adjourn, seconded, motion passed.
• Meeting adjourned at 3:08 pm, CST.

Respectfully submitted,  
Heidi Hulon, DVM  
KVMA Secretary/Treasurer

Sell your practice  
and keep your name, your team, your culture and medical direction.  
We'll take care of the rest!

VetCor  
Helping practices thrive

call or email Dan Gavis to learn more  
617.901.0044 / dgavis@vetcor.com  
www.vetcor.com
PRESS RELEASE

FOR IMMEDIATE RELEASE
January 14, 2016

CONTACT: Dr. Heather Case
Executive Director, NBVME
mail@nbvme.org

NBVME Practice Analysis Survey

The Collaboration for Veterinary Assessments consisting of the National Board of Veterinary Medical Examiners (NBVME) periodically surveys practitioners to ensure that the North American Veterinary Licensing Examination (NAVLE®) reflects the knowledge, skills, and competencies needed by entry-level veterinarians. The NAVLE® is a key requirement for licensure in the United States and Canada and the exam content represents practice across the spectrum of veterinary medicine. The last practice analysis was completed in 2009.

The practice analysis survey will be sent to a carefully selected sample of veterinarians throughout the US and Canada, and it is critical that everyone included in this sample respond. This survey provides veterinarians in practice with the opportunity to help build the foundation for the NAVLE to ensure that it accurately assesses entry-level competencies. The NBVME is working closely with both the American and Canadian Veterinary Medical Associations to administer the Practice Analysis survey.

The NBVME needs your help as this is a critical juncture for veterinary assessments. We greatly appreciate the time, effort, and expertise of everyone in the select group of veterinarians who receive and complete the survey. It is approximately 15-20 minutes in length and will ask veterinarians about their specific area of expertise. It will be launched in early March 2016 and the results will be shared as soon as they are available.
Dr. Ron DeHaven’s passion for veterinary medicine is what brought him to the American Veterinary Medical Association on Aug. 9, 2007. That passion is what will guide him through the remaining months of his tenure, as he will retire this summer.

While a specific retirement date has not been set, DeHaven will most likely remain at the AVMA’s helm until shortly after the association’s annual convention, which this year is being held August 5-9 in San Antonio, Texas. His departure date may be adjusted if a new chief executive is identified and begins employment sooner.

“When I came to the AVMA, I joined what is an amazing staff guided by committed, talented volunteer leadership that gives their all to our members, our association and our profession,” DeHaven said. “There is much left to do, and I will be fully committed in my role at the AVMA over the next several months. The profession, our staff and the members I serve deserve nothing less.”

DeHaven came to the AVMA after more than two decades of service with the U.S. Department of Agriculture’s Animal and Plant Health Inspection Service. He has guided the AVMA through periods of growth in both membership and influence. The association now has more than 88,000 members, and its advocacy efforts on behalf of the profession continue to help elevate veterinarians and their interests to a new level of national and international prominence.

“I wanted to make a difference for the profession, because I’m passionate about veterinary medicine,” he said. “In my previous career, I felt I was able to make a difference in American agriculture, and this was an opportunity to make a difference in the veterinary profession. Together, we have faced a lot of challenges during what appears to be an ongoing period of transformational change for the profession. The need for a strong, national, umbrella organization is more important than ever, and I believe I will be leaving the AVMA well-positioned to serve in that role as the leading advocate for veterinary medicine.”

Under the guidance of its Board of Directors, the AVMA is implementing a new strategic operating plan that is the result of an unprecedented level of input from its members that helped the association focus its efforts on what matters most to veterinarians across every professional discipline.

“We have identified what is most important to our members and what the AVMA can and must do to meet their needs and expectations,” DeHaven said. “They have told us that advocacy, valuable products and services, high standards of veterinary medical education and developing leaders are critically important to them and what they expect from their association. I believe we are well-positioned to deliver going forward.”

Said Dr. Joe Kinnarney, AVMA President, “On behalf of the entire membership, I would like to thank Dr. DeHaven for his dedication to the AVMA and bringing us to the next level. The result of his leadership for the past eight years has been a stronger, more member-focused AVMA.”

DeHaven said the future of the AVMA and the veterinary profession is firmly grounded through those that share a passion for the work they do.

“I’ve had the opportunity to interact with a dedicated cadre of volunteer leaders and staff, and I am inspired by many of our students and recent graduates. I am very encouraged about the future of our profession,” he said. “I am extremely confident that we have put in place an infrastructure that will serve AVMA and the profession very well, and will help provide our members what they need and expect from us.”

DeHaven and his wife, Nancy, have two children and four grandchildren. They plan on spending as much time as possible visiting and enjoying time with family.

“The Board of Directors respectfully acknowledges Dr. DeHaven’s announcement of retirement and is grateful for the many years of dedicated service that he has brought to the AVMA,” said AVMA Board Chair Dr. John de Jong. “Ron’s retirement creates an opportunity for the Board to select a new CEO to continue the excellent work that he has started. We wish Ron and Nancy many years of health and happiness in the years ahead.” ♦
If you're like other members who've contacted us in the last 24 hours, you're concerned that veterinarians’ home addresses are being shared on a veterinary search and review site. Publishing this information could put veterinarians at risk, and understandably feels like a violation of privacy. First and foremost, we assure our members that this information was not obtained from AVMA or the AVMA insurance trusts. We've been in contact with the American Association of Veterinary State Boards (AAVSB) as well as the site that has posted veterinarians’ information, and the information below is based on these conversations.

The veterinary state boards are subject to the Freedom of Information Act and other federal or state “sunshine” laws as applicable, which determine what information must be available to the public. We're told that some state boards allow licensed veterinarians to check a box denoting the address is a home address which will not be publicly shared, but this is not uniform. The AAVSB has expressed that they understand the concerns, and they will continue to facilitate discussion among the state boards to communicate how their information is shared; address how they can best protect private information without violating federal or state laws; and effectively communicate what veterinarians can do to best protect their private information. Please note, however, that the public information available from your state board is not the only source of information about you.

We were contacted by the founders of the PetMedicus site, and they informed us that they utilize state and other publicly available data to drive the location search function for their site. They also stated that they had no intention of posting home addresses, and they were not aware that the address lists they obtained might include home addresses. In response to concerns expressed by veterinarians, they informed us that as of today they have removed the street address from all veterinary profiles until home addresses can be distinguished from business addresses. We’ll follow up with them as needed.

Advice to veterinarians at this time:

• Read the privacy policy of any website to which you are providing personal/private information. A link to the policy is often provided in the footer of the website. If you have questions about the policy, contact the site. If you don’t feel your information will be secure, consider avoiding use of the site.

• If your veterinary board’s form allows you to denote which address is a home or business address, verify that you have accurately marked the information.

• When possible, use your business address for your professional license registration.

• If you do not have a business address to use for your professional license registration, consider using a Post Office box if permitted by the state veterinary board.

• If you have questions about the information that your state board is required by law to share, please email them directly and allow them time to respond.

• The Federal Trade Commission offers valuable resources on protecting your online information. We also have resources on protecting your online reputation available to AVMA members.

---

Check Your Contact Info!

The KVMA communicates electronically with its membership. It’s faster, cheaper, and more efficient to do it this way, not to mention far more versatile. Please, even if you are absolutely sure that the KVMA has your proper email address, take a moment to double check by logging in to www.KVMA.org and checking your Member Profile in the Member Portal. You can make any necessary changes, to email or any other pertinent information, right on the spot and be connected with your colleagues once again.

“Don’t Miss Out!”
FDA Responds to Industry Questions on Guidance #213, Revised VFD Rule

Farm Foundation, NFP hosted 12 workshops across the nation last fall on the new policies and requirements of the U.S. Food and Drug Administration concerning the use of medically-important antimicrobial drugs in food animals.

The workshops provided more than 500 livestock producers, veterinarians and feed suppliers the opportunity to learn about the new policies directly from senior officials of FDA and USDA's Animal and Plant Health Inspection Service (APHIS). Participants also were able to voice their opinions and ask questions about the management challenges of implementation.

During the workshops, FDA officials were not able to respond to all the implementation questions. FDA has now responded to all those questions. Review the responses on the Farm Foundation website. (www.farmfoundation.org/webcontent/Stewardship-of-medically-important-antimicrobial-drug-use-in-food-animals-1901.aspx)

“The conversations at the workshops provided the FDA staff with detailed insights into industry questions on how to implement the VFD final rule,” said William T. Flynn, deputy director for science policy at FDA’s Center for Veterinary Medicine. “We can create regulations, but the on-the-ground insights we heard in the workshops provided us with a terrific opportunity to help producers, distributors and others get the information they need to comply with this important regulation. This helps us shape policies to achieve the most successful outcomes.”

“This direct interaction of stakeholders with FDA and APHIS was one of the most valued elements of the workshops,” says Farm Foundation Trustee Joe Swedberg, who chairs the Foundation’s Antimicrobial Education Project Advisory Committee. The volume and diversity of the questions “highlights the complexity and diversity of the nation’s livestock industry, and the importance of a continuing dialogue between industry and state and federal regulators,” Swedberg adds.

The questions and the workshop findings also highlight the need for additional educational work to reach all the critical industry segments, Swedberg said.

Farm Foundation’s report of the workshops, Stewardship of Antimicrobial Drug Use in Food-Producing Animals, cites a lack of knowledge about the new policies and requirements, as well as concerns about the availability of veterinary services, as critical barriers to the successful implementation of changes resulting from FDA’s Guidance for Industry #213, which are expected to take full effect Jan. 1, 2017.

“Much work has been done by industry organizations, agencies and media outlets, but many stakeholders lack a full understanding of the policies. We need to continue the education push,” Swedberg emphasized. Farm Foundation is working to track educational work in progress and identify gaps where additional attention may be needed.

FDA has issued Guidance for Industry (GFIs) #209 and #213 regarding the use of medically-important antimicrobial drugs in food-producing animals, as well as a revised Veterinary Feed Directive (VFD) rule. Once fully implemented, these guidance documents will result in medically-important antimicrobial drugs seeing label changes allowing only therapeutic uses (prevention, control or treatment of disease), and use of the drugs in feed or water will require a veterinarian’s order.

Farm Foundation initiated this project in its role as an objective convener, explains Swedberg, a retired executive of Hormel Foods. “Farm Foundation is uniquely positioned to provide leadership in this type of project. We bring diverse stakeholders to the table to address issues shaping the future—in this case farmers and ranchers, veterinarians, feed suppliers and federal and state regulators,” he adds.

A 501(c)3 nonprofit, Farm Foundation works as a catalyst for sound public policy by providing objective information to foster a deeper understanding of issues shaping the future for agriculture, food systems and rural communities. Since its founding in 1933, Farm Foundation has been a non-advocacy organization. The Foundation does not lobby or advocate positions. The Foundation’s action comes in bringing industry leaders together to examine evolving issues that will shape the future of the industry. Antimicrobial drug use in food-producing animals is just such an issue. ♦

Sheldon Jones, Vice President Projects, Farm Foundation, NFP
sheldon@farmfoundation.org, 630-601-4151
Mary Thompson, Vice President Communications, Farm Foundation, NFP
mary@farmfoundation.org, 630-601-4152
California Mandates an Increase in the Minimum Wage. How might that affect YOUR practice?

by J.A. Keith, DVM, MBA, MEcon

Always on the cutting edge of progressive action, the California governor has taken the step to mandate an increase in the minimum wage (www.dir.ca.gov, 2016). With a Democrat-controlled legislative branch, it is all but certain to become law. Politicians and labor bosses are no doubt patting themselves on the back and gloating in their compassion. Is that good or bad for veterinary practices? Well, it depends on perspective. Personally, I do not want a minimum wage worker in my practice. We work hard, and I expect more than a $7.25/hour of production from an employee. Additionally, if you recruit team members at that wage, you will get the applicants that will work for that amount. They will not be the ones you necessarily want providing care.

The effect will not, on its own, immediately change income in practices. Then again, it might. If we look at the experiment Seattle incorporated last year (2015 mandated wage increase), they saw the loss of 11,000 jobs in the city-proper and the suburban area surrounding Seattle had a dramatic increase in new jobs (BLS, 2015) inside one year. While this is just one city, it is a microcosm of what may occur state-wide in California and other states that follow. As wages increase, the cost to provide service and sales must, by definition, also increase, or there must be reduction in costs. For those veterinary practitioners in more rural areas, they can expect to be hit the hardest, in my estimation. Agriculture jobs will move across state lines and a more accelerated shift to mechanization will occur. Service industries (i.e. food, retail) will also experience automation and in many cases close up shop. California already has the highest unemployment in the country at 23.5% (BLS, 2016). It will appear that they will continue to hold this lofty designation in the years to come.

So, what does all of that mean? Not much to those in other states – unless they follow California and increase a required minimum wage. If you are watching your hospital data closely, and you should be, you can prepare for the change before it arrives at your door. When states elect more taxation or economic mandates in any form, we are all affected. The effect will not be on your employees, but rather the client base. That is where the real problems will occur. Service industries will increase their prices/fees to offset the rising labor costs. Most will need to lay off employees. Seattle food service employees already are reporting a significant drop in tips as one would expect (Perry, 2015). Do you really think executives and management will take a pay cut to augment the rising labor structure? Additionally, look for major company headquarters to relocate to states that have a more favorable climate for profit. With that demographic leaving, practices will suffer the loss of some of their best clientele.

While it may not happen in your respective state, it is important to watch the developments in this questionable and unprecedented decision. None of us wish to see anyone live below, or even at, the poverty line. But if history tells us anything, this mandate, seen by legislators as a boost to the California economy, will further increase the exponentiation of their already bloated debt load. After all, as unemployment increases, the state will be responsible for benefits, further adding to the economic mess that is California. I am not shallow, nor am I bereft of compassion. But rather, I am a centrist who believes that the market should determine wages, not the politicians and the labor bosses that line the pockets of re-election campaigns.

www.dir.ca.gov, 2016, Department of Industrial Relations, State of California, retrieved on-line 2 April 2016


© Copyright 2016
A Bardstown resident, Dr. Edmond Sims Hall, age 77, passed away Thursday, February 11, 2016 in Flaget Memorial Hospital. He was born October 20, 1938 in Troy, Alabama to the late Leon Edward and Carolyn Sewell Hall. Dr. Hall graduated from Auburn University School of Veterinary Medicine in 1966 where he was a member of Omega Tau Sigma Fraternity. After graduation he moved to Madisonville, Kentucky to start his veterinary practice. He later moved to Bardstown where he practiced veterinary medicine from 1970-1999. He was the former owner of Central Kentucky Animal Clinic in Bardstown, a lifetime member of the Kentucky Veterinary Medical Association, was named the Kentucky Veterinarian of the Year in 2004, a member of the Southern Kentucky Team Penning Association, the 1998 AQHA 3rd place Champion, a member of Parkway Baptist Church, Harmony Sunday School Class, Nelson County Cattleman's Association, served on the Nelson County Fair Board, and was active in 4H. In 2001 he traveled to England where he and other veterinarians worked to eradicate an outbreak of bovine foot and mouth disease. After selling his practice, he continued his career with the Department of Agriculture and Homeland Security from 1999-2014.

Dr. Hall is survived by his wife of 53 years, Chris Floyd Hall, two daughters, Kim (John, Jr.) Oakley and Kay (John) Gordon, five grandchildren, three great grandchildren, and his sister, Jane (Gordon) Foster as well as many beloved cousins, nieces, and nephews.

The family requests that expressions of sympathy take the form of contribution to the American Heart Association.

It's Time...
And she's ready, too!

You've built your practice. You've helped many throughout the years. You even put off retiring a couple of more years just to be sure. Now it is time!

Put Simmons' 37 years of experience to work for you. Call...

Wilson W. McManus II, DVM CVPM
Simmons MidSouth
256.650.8387 | midsouth@simmonsincc.com

practice sales • practice appraisals • buyer agency • sales facilitation • exit strategy
KVMA Animal Hall of Fame

Presented by the Kentucky Veterinary Medical Association

Objectives
- To honor and recognize exceptional animals
- To allow KVMA members to share in their patients’ outstanding accomplishments by serving as nominators.
- To share with owners in the joy of the human-animal bond by recognizing outstanding pets.

Requirements
- Nominee must be an animal that has exhibited an act of bravery or performs a service to an individual or community, or exemplifies the affection, loyalty, and value of the human-animal bond.
- A KVMA member must make nominations for the award.

Award Recipient
- A committee of the KVMA will determine recipient of the award.
- The award will be presented during the 2016 KVMA Mid-America Veterinary Conference.
- Plaque and monetary award will be presented.
- Animal(s) and their owner(s) should be available to receive the award and participate in the public recognition.

Nomination Form

KVMA Sponsor:
Name of DVM: ____________________________

Clinic Name: ____________________________
Address: ________________________________
Office Phone: ____________________________ Email: ________________________________

Years known nominee: ____________________

Nominee:
Name: ____________________________ Species: ____________________________
D.O.B: ____________________________ Color: ____________________________
Breed: ____________________________ Sex: ____________________________
Collar size: ____________________________

Owner:
Name: ____________________________
Address: ______________________________
Day Phone: ____________________________ Email: ______________________________

Return Nomination Form By August 1, 2016 to:
KVMA
PO BOX 4067
Frankfort, KY 40604-4067
Questions? Call KVMA at (800) 552-5862 or e-mail: info@kvma.org

(NEXT)
DO YOU KNOW AN ANIMAL HERO? NOMINATE THEM TODAY!

- Give specific examples of how the animal exemplifies the affection, loyalty, security, and value of the human-animal bond.
- Attach additional pages if needed.
- Attach a photo of the animal.

____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________

Release

The Kentucky Veterinary Medical Association (KVMA) will publicize the Award. In some cases, the KVMA may ask the owner and/or veterinarian to appear with the animal at a public information event and/or a personal interview.

All such events shall be subject to the animal's availability and the owner's approval, but the KVMA will be allowed the non-commercial use of the animal's image and/or noise reproduction. For any reason, we ask for the undersigned release.

I hereby grant to the KVMA, its successors and assigns, and those acting under its permission or upon its authority, or those by whom it is commissioned:

1. The unqualified right and permission to reproduce, copyright, publish, circulate, and otherwise use photographs and/or motion pictures of me and my animal, and voice and/or noise reproduction, whether taken in studio or elsewhere, in black and white or in color, alone or in conjunction with other persons or characters in any part of the world, in accordance with the above purpose and intended use.

2. All of my rights, title and interest in and to all negatives, prints, tapes and reproduction thereof. I also release the KVMA and its successors and assigns if any, from any and all rights, claims, demands, actions, or suits on account of the use of publication of said photographs and/or motion pictures or tapes.

I have read and understand the release stated above, and agree to its conditions. I also testify that the information given on this application for the KVMA Animal Hall of Fame Award is true and correct to the best of my knowledge.

Owner's Signature: ___________________________________________ Date: ____________________________
During my time here at Auburn, I have become involved in different clubs that have helped enhance my educational process as well as my personal and emotional growth. One club in particular has made my journey through vet school a much better experience. That club is Christian Veterinary Fellowship. Christian Veterinary Fellowship, or CVF as we call it, is a branch off of Christian Veterinary Missions, which is an organization that exists to share the love of Christ through veterinary medicine. This organization works “in communities worldwide to help equip and encourage veterinary professionals and students to build relationships with others through the use of their veterinary knowledge and skills so that lives are transformed.”

At lunchtime every Wednesday, my CVF club meets in the second year classroom, where local churches in the Auburn area provide home cooked meals (which are delicious!) and we also have a time of worship and hear a message brought by different speakers that come talk to us. It is perfect that this meeting falls right in the middle of the week because it makes me set aside school worries so that I can just relax in the presence of God. Sometimes, during a really hectic week, I thoroughly enjoy having what is like a mini church service brought to the school; it always seems to make my day go so much better.

Being involved in this club has made me want to do more in my community as well as reach out to other parts of the world. This past December I made the decision to go to Mongolia this summer through CVM (Christian Veterinary Missions) with a group of Auburn students and two Auburn professors. From June 24th to July 9th I will be in Ulaanbaatar, Mongolia, from which I will travel out to the rural countryside and spend two weeks out there. Along with providing veterinary care, I will be building relationships with the people around me. I am excited for this amazing opportunity and for the calling that has been put on my heart to go out into the world to share the things that I love.

No matter where you are or the type of veterinary medicine that you practice, building relationships with your clients is a central role. We not only serve our animal patients but also their owners, allowing us to get to know them better than perhaps any other medical profession can allow. We are all called to serve in some form or fashion, which is what makes this profession so special. ♦

www.funnyvet.com
Craig N. Carter, director and professor of epidemiology at the University of Kentucky Veterinary Diagnostic Laboratory (UKVDL), recently took the helm of the American Veterinary Epidemiology Society (AVES) as president for a five-year term.

AVES was founded by James H. Steele in 1964 to recognize global leaders in infectious disease epidemiology and public health and to foster research to combat infectious diseases in both animals and humans. The society has recognized more than 70 world-renowned scientists through awarding the K.F. Meyer/James H. Steele Gold Headed Cane Award, which Carter received in 2011, primarily for his work on zoonotic diseases.

“I consider it such a great honor and privilege to serve as the president of the American Veterinary Epidemiology Society for the next five years,” said Carter. “Since leaving my ambulatory practice in Texas, I have worked as an epidemiologist in service, research and teaching roles in the university, military and international consulting environments for over thirty years. Dr. Jim Steele, founder of the AVES and the CDC division of epidemiology, was my graduate professor, mentor and dear friend for many years until his death at 100-years young in 2013.”

Carter was recruited from Texas A&M University to the UK College of Agriculture, Food, and Environment in 2005 to build an epidemiology program to provide for the early detection of animal disease outbreaks such as Mare Reproductive Loss Syndrome. In 2007, he was appointed to his current position at UKVDL where he oversees lab operations, conducts research and works with his graduate students.

One of Carter’s goals for the AVES is to attract more bright students into careers in epidemiology. Sponsored by Hartz Mountain Corporation, the AVES hosts its annual meeting each year as part of the American Veterinary Medical Association (AVMA) meeting. The 2016 meeting will be held in July, in San Antonio, Texas. A celebration of the 100th anniversary of the U.S. Army Veterinary Corps will also be held at Fort Sam Houston in San Antonio in conjunction with the AVMA meeting. Carter’s military career spanned from 1967-2008, retiring as a full colonel in the U.S. Army Reserve Veterinary Corps.

Carter said he has thoroughly enjoyed his many years as a faculty member at UK.

“Now nearing the end of my career, I delight in this opportunity to give something back to the AVES and to a scientific discipline that has been so good to me and the world.”

Candid Corner
January 30 dawned bright and sunny on the Plains, matching the faces of the 120-member Class of 2017. Family and friends eagerly congregated for the College of Veterinary Medicine’s White Coat Ceremony.

The milestone event for the Class of 2017 was held under a large white tent to ensure family members could attend, and more than 800 were present. KVMA President-Elect Walter Haines had the honor of putting the white coats on the Kentucky Veterinary Students at the White Coat Ceremony.

Congratulations from KVMA! ♦

Photos courtesy AUCVM. See more photos on the Auburn College of Veterinary Medicine’s Facebook page!

Dr. Ruby Perry, dean of Tuskegee University’s College of Veterinary Medicine, Nursing and Allied Health, gives a congratulatory welcome.
During our training for collecting samples in veterinary school, we learned the adage “Garbage in, Garbage out.” This gave us a quick way to remember that if we submit a poor sample, the test results could be incomplete or inaccurate. Times and testing methods are constantly changing, but this adage holds true. In this article, we will cover a few common ways to improve your samples and results.

Sample and Test Selection - Your diagnostic lab wants to give you the best results possible.

Be sure to consult the client handbook or sample submission section when it comes to what and how to submit a sample or what tests might be available. Give a phone call if there is any question regarding the best test or samples needed. Getting the right sample, in the right amount, shipped in the right way will give you the right results.

Forms - Information is often as important as the sample. One word applies here, and that word is “complete.” Each piece of information gives a clue to the pathologists and lab personnel. The more information provided, the better the test options, results, and interpretations you will receive.

Swabs, tissues, and fluids –
Whether it is a tissue sample, swab, or fluid sample, isolation of the microbe is optimized when the sample is collected early in the disease process and transported to the lab quickly. Use of a swab with culture media, maintained at 4 degrees C, and received by the lab within 24-48 hours will improve culture results.

Try to collect samples for culture in the most sterile way possible. In most cases, environmental contamination is not of interest. So eliminate the chances of contamination and get to the source of the infection. Since the contents of white blood cells can decrease the viability of bacteria in an infected sample, attempt to swab abscesses deeply or collect deep fluids.

Slides and tissues for cytology and histopathology –
Prepare, label, seal, and deliver safely

To accurately identify the exact source of a sample and prevent misidentification, label each slide or container clearly. The pathologist will be looking for changes in cell structure or organisms.

For slides, allow them to air dry. Avoid heat fixing as it damages the cells. Blood smears need to be thin. When in doubt, make 2-3 that vary slightly. Use a slide transport container to keep slides safe during transport.

Formalin preserved tissues need care too.

Tissues should be less than 1 cm in thickness.

1. Use 1 part tissue in 10 parts formalin.
2. Use containers with screw top lids that are leak proof.
3. Use parafilm or tape around the edge of the lid to seal it and place the jar along with a paper towel into a sealable plastic bag.

If shipping slides and histopathology samples in formalin, place the slides and formalin in a separate sealable bags to protect slides from formalin fumes.

Whole Blood Submissions

Usually when looking at whole blood, the cell morphology and type are important. To preserve this do the following:

1. Collect blood with slowly using a larger gauge needle when possible to prevent rupture of cells.
2. Use a vacutainer tube containing anticoagulant. EDTA (purple topped tubes) is the most common. However, some tests require other anticoagulants. Be sure to refer to the client handbook or call if you have any questions regarding the type of sample.
3. Do not force the blood quickly through a needle. You may remove the needle from the syringe and the stopper from the tube, place the blood inside, and replace the stopper. If using a needle to directly place blood into the tube, go slow and do not force the cells through the needle.
4. Immediately rock the tube carefully and slowly to mix the anticoagulant. If a clot forms, the sample will not give accurate cell/platelet counts.
5. Keep the blood cool from collection until it arrives at the lab. Avoid heat or extreme cold.
6. Carefully wrap tube individually and pack within a ziplock bag. Consider placing inside a prescription bottle to further protect the sample.

Serum submissions

Poor serum quality can affect many tests. It is important to collect the sample carefully using the following guidelines:

1. Avoid forcing blood through a small needle. Collect blood with a larger gauge needle when possible. Consider removing the needle from the syringe and stop-
per from the vacutainer to allow depositing the blood directly into the tube. If you use the needle directly into the vacutainer, allow it to enter slow and carefully. Never force blood through a needle as this will rupture cells.

2. Serum separator (tiger top) and serum collection (red) tubes may be used.

3. Placing the tube on a horizontal surface for 20-30 minutes allows the blood to clot over a larger surface, which releases more serum. This is especially helpful if a centrifuge is not available or a very small sample is all you can get.

4. After the blood has clotted, remove the serum from the clot. Centrifugation is typically used for this. Using a serum separator tube (tiger top) or removing the serum to a new tube is very important to prevent hemolysis of your sample.

5. Keep tubes in a cool place at all times. Avoid any heat or extreme cold.

Swabs for Virology and Molecular Diagnostics

Culture tubes with gel media do not work for virology or molecular diagnostic testing. A sterile dacron swab placed into a clear top tube with a drop of sterile water or saline is ideal.

Shipping – The object of the game is to get your precious samples to the lab in excellent shape. Consider the following guidelines:

1. Use the triple barrier rule –
   Layer 1 - Proper samples in proper holding containers
   If breakable, carefully add protective wrap and consider a secondary container (prescription bottle etc) to add a layer of protection.
   Layer 2 - Sealable plastic bag with an absorbent paper towel.
   Layer 3 - Sturdy outside container (box or cooler)
   Fill any empty space in the box with cushioned filler. Properly mark for diagnostic specimens.

2. Keep paperwork in a separate sealed plastic bag.

3. Place ice packs in a separate sealed plastic bag.

Remember, whenever in doubt, refer to the client handbook or sample submission webpage section or call your lab regarding test requirements, best sampling techniques, and shipping.

---

Sample Submission (cont.)
The Elephant In The Room

by Ali Judah, Tuskegee University/SVM, Class of 2017

What would you do if you won the lottery? With the recent Powerball reaching a record high of 1.5 billion dollars, I’m sure a lot of people have been contemplating that question. Of course, the answer varies from one person to another. The first thing that came to my mind was my family. I would first use the money to help my family: parents, brother, aunts, uncles, cousins, and their kids. And when I thought about my cousins, who among them have a total of 6 young kids ranging in age from 2-11 years, I thought about the present and future burden that the expense of their children’s education will be.

This got me thinking about the cost of my own education and the tuition for spring semester that was recently due. My fellow Kentucky students and I are extremely privileged and thankful to have help with a portion of the tuition from the state of Kentucky. However, even with help, vet school is still unimaginably expensive and students, whether at Tuskegee or any other vet school, have massive student loans and what seems like insurmountable debt.

I recently turned 26. The most thrilling but, in reality, sad thing about turning this age is receiving the boot from my parents’ insurance plan. I am lucky to have extremely supportive parents offering as much emotional and financial support as they can. My parents have afforded me a great education and allowed me to primarily focus on my schooling. However, since I entered vet school in fall of 2013, they have opened my eyes to the finances and financial planning that comes with “growing up.” The financial education my parents provide me is in addition to the lectures that Tuskegee and our club, Veterinary Business Management Association, offer and are invaluable to my future financial success. However, along with entering my third year and turning 26 came an epiphany—the realization that I will very soon be entering the workforce and will no longer have the safety net that vet school provides. This is an exciting yet anxiety-ridden achievement. Not only do we get to start our lives as full-fledged veterinarians, we also begin the slow, daunting process of loan repayment.

Now, back to the hopes of one day winning the lottery and what to do with the millions of dollars. After I made sure my family and I were secure, then I started to think what charities and organizations I would support. But that brought me back to my classmates and students in general and all of the debt that most will incur. The veterinary profession is plagued with one of the highest suicide rates, which is mainly attributed to compassion fatigue. However, could more of it be attributed to “financial fatigue?” I’m sure most have read, heard, or are even living with crippling student loan debt. One of my classmates (and probably more) has loans that collect $20 or more in interest every day. EVERY DAY. It's unfathomable. It’s discouraging to think that the dream, what all of us work so hard to achieve, is clouded by this burden. I don’t mean to be a wet blanket, but it’s disappointing to think that some might not continue to accomplish their goals, whether it’s opening their own clinic, continuing their education, or just practicing what or how they would genuinely want, for fear of debt. Either way, I still believe that doing whatever it takes to follow your passions is the way to go. It is not the monetary rewards that make veterinary medicine such a wonderful profession; it’s the genuine passion for the work.

Winning the lottery may solve financial troubles for a select few but, unfortunately, it won’t help all of the students and graduates drowning in debt. We all need to work toward a future where the burden of paying for education won’t be so great. Without some relief from the financial constraints posed by education and the debt to salary ratio, the supply of vets will undoubtedly decrease. Hopefully, sometime in the near future, there will be an answer to this incredible problem. Unfortunately, it appears that it will take time to remedy this problem. So, in the meantime, I may just try my luck at the lottery and continue to dream of a matching Powerball ticket.

LETTERS TO THE EDITOR

Every effort will be made to try and print letters that are on topics of the most general interest. The Kentucky Veterinary News reserves the right to edit letters for length and content as necessary. All submissions must contain the author’s name, address, e-mail address (if applicable), and phone number so that we may contact you to be sure of the letter’s authenticity. Only the author’s name and home town will be published. No letter will be published anonymously. Letters may be submitted electronically (Word File please) to: info@kvma.org or by “snail mail” to: KVMA, PO Box 4067, Frankfort, KY 40604-4067
From the Director’s Desk
Debbie Reed, DVM, MPA
Breathitt Veterinary Center (BVC)
Hopkinsville, KY

The Governor’s Budget is a hot topic at the BVC and at UKVDL. Possibly by the time you read this the news will be much better. Your KVMA board has worked hard on your behalf to produce a better Veterinary Practice Act that will protect the profession and each of us as veterinarians. Again, the outcome of this legislation may be known by the time this is published but I wanted to express my appreciation for all the hard work done by many individuals in support of the veterinary profession.

On Friday I learned of the passing of a man I considered to be a legend in Kentucky veterinary medicine. Dr. Ed Hall was of the old school, having graduated from Auburn in 1966, however he publicly embraced the changes in veterinary medicine, whatever his real feelings were. I first met Dr. Hall when he organized a State Veterinary Emergency Response Team in the early 2000’s. Because I was practicing in eastern Kentucky at the time, he always greeted me by asking if I had worn shoes that day. I enjoyed his stories of private practice, his bragging on his family and his opinions on any matter. His was a distinctive personality, shaped by the years as a large animal vet and honed by a few years in the public sector. I hate that we have lost his stories, his recollections of a way of life that has gone. We need these memories to remind us of how far we’ve come and sometimes, what is important. My personal condolences go out to his family.

As a child, I could not understand why my father, a farmer, hated snow and winter. We raised hogs and while they were in confinement, he still had to worry about water lines freezing and electric outages. As a practice owner, I hated mud in the winter more than snow. Muddy roads to get to farm calls, muddy pastures to traverse and the hardship that the mud and cold put on livestock. Cold and wet calves shivering were a terrible picture in my mind. As a livestock owner, I still despise what mud and cold weather do to animals. As Director of the BVC, I hate snow and ice because of the adversity it causes the staff. I have to make the decision to open the BVC and expose people to bad roads or delay opening and cause problems with deliveries. If I make the decision to close altogether I possibly cause a hardship to animal owners and veterinarians. None of the alternatives are ideal. An ideal snow for me would begin on Christmas Eve and be completely gone by Christmas night!

If the weather looks dicey, please check our Facebook Page for possible delays or closings. This seems to be the most efficient method of getting out information for most people. Also check there for other information about the construction of our new building. The engineering company still says end of August for completion. We will be holding a big grand opening and ribbon cutting—I hope each of you plan to join us.

Hoping for clear skies!
Debbie Reed, DVM
Director, Breathitt Veterinary Center

Continued pg. 22
Diagnostic Laboratory Rounds (cont.)

Changes in Antibiotic Sensitivity Testing Tracie Jenkins, Microbiology Lab Tech III

The Breathitt Veterinary Center like many diagnostic laboratories, utilizes the SENSITITRE system for determining the sensitivity or resistance of bacterial organisms to antibiotics. It mechanizes the testing and standardizes the way each antibiotic is tested.

Recently ThermoFischer, the manufacturer of the SENSITITRE system has notified the BVC that there will be changes in the antibiotics against which the bacteria are tested for companion animals. When you receive sensitivities, please note that there will be one set of antibiotics for Gram + organisms and another set for Gram – organisms.

These changes will be positive ones for you, the practitioner as the number of antibiotics tested has significantly expanded and will be more specific for the organisms that are isolated from the case.

<table>
<thead>
<tr>
<th>Current Companion Plate</th>
<th>New Gram Negative</th>
<th>New Gram Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ampicillin</td>
<td>Amikacin</td>
<td>Amikacin</td>
</tr>
<tr>
<td>Amoxicillin/clavulanic acid</td>
<td>Amoxicillin/clavulanic acid</td>
<td>Amoxicillin/clavulanic acid</td>
</tr>
<tr>
<td>Ticarcillin</td>
<td>Cefazolin</td>
<td>Cefazolin</td>
</tr>
<tr>
<td>Trimethoprim/sulfamethoxazole</td>
<td>Cefpodoxime</td>
<td>Cefpodoxime</td>
</tr>
<tr>
<td>Gentamicin</td>
<td>Cefovecin</td>
<td>Cefovecin</td>
</tr>
<tr>
<td>Penicillin</td>
<td>Cefpodoxime</td>
<td>Cefpodoxime</td>
</tr>
<tr>
<td>Ceftiofur</td>
<td>Ceftazidime</td>
<td>Ceftazidime</td>
</tr>
<tr>
<td>Enrofloxacin</td>
<td>Cefalexin</td>
<td>Cefalexin</td>
</tr>
<tr>
<td>Cefovecin</td>
<td>Chloramphenicol</td>
<td>Chloramphenicol</td>
</tr>
<tr>
<td>Cephalothin</td>
<td>Doxycycline</td>
<td>Doxycycline</td>
</tr>
<tr>
<td>Amikacin</td>
<td>Enrofloxacin</td>
<td>Enrofloxacin</td>
</tr>
<tr>
<td>Cefpodoxime</td>
<td>Gentamicin</td>
<td>Gentamicin</td>
</tr>
<tr>
<td>Imipenem</td>
<td>Imipenem</td>
<td>Imipenem</td>
</tr>
<tr>
<td>Erythromycin</td>
<td>Marbofloxacin</td>
<td>Marbofloxacin</td>
</tr>
<tr>
<td>Marbofloxacin</td>
<td>Orbifloxacin</td>
<td>Nitrofurantoin</td>
</tr>
<tr>
<td>Oxacillin</td>
<td>Piperacillin/tazobactam</td>
<td>Oxacillin</td>
</tr>
<tr>
<td>Cefoxitin</td>
<td>Pradofloxacin</td>
<td>Penicillin</td>
</tr>
<tr>
<td>Ticarcillin/Clavulanic acid</td>
<td>Tetracycline</td>
<td>Pradofloxacin</td>
</tr>
<tr>
<td>Cefazolin</td>
<td>Trimethoprim/sulfamethoxazole</td>
<td>Rifampin</td>
</tr>
<tr>
<td>Clindamycin</td>
<td></td>
<td>Trimethoprim/sulfamethoxazole</td>
</tr>
<tr>
<td>Doxycycline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chloramphenicol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rifampin</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Trichomoniasis: Rules and Policy in Kentucky

Commonly referred to as Trich, this infection is receiving widespread media attention throughout the US cattle industry. To date Kentucky has, through luck or policy, remained unaffected. Having said that, the Breathitt Veterinary Center tests several bulls each month that are either coming into the state or are entering another state with strict requirements about testing movement. When I inquired as to Kentucky legislation covering Trichomoniasis, SVO Dr. Robert Stout said that while there are no specific regulations addressing Trich, it would be covered under KRS 257.040 which prohibits bringing into Kentucky an animal with a disease that is considered to be reportable to the OIE.

Trich is a silent disease: the only symptoms are cows that are open on regular pregnancy checks, cows with an extended breeding period, or cows that come back into heat on a delayed cycle. Trich is spread through the breeding process by the bull; an uninfected bull may catch it from a cow or vice versa.

Testing for Trichomoniasis is not as simple as a serum test. A preputial scrape/wash is required to be submitted and the BVC policy is to run a PCR test. Some states still require a culture, a few require both culture and PCR. These requirements for movement or sale vary from state to state and from sale to sale. Prior to testing a bull, please check

Continued pg. 23
Diagnostic Laboratory Rounds (cont.)

with the state to which it is going for the proper testing as well as checking the rules if it is going to a sale.

In order to test for Trich, the BVC requires the use of a shipping package/media called InPouch, produced by BioMed Diagnostics. This small, flat plastic pack contains a liquid that helps keep the organisms alive while shipping and can encourage reproduction of the Trichomonas vaginalis organisms that causes the disease. By utilizing this product, the BVC technicians feel that their ability to find the organism is enhanced. Should you need both a PCR and a culture, the InPouch again is essential as the bag and contents are examined directly for the organism. In the past the BVC did accept preputial washes from clinics, but because of the very positive outcomes with the InPouch system, the decision was made to exclusively utilize this product for testing.

A YouTube video, produced by BioMed Diagnostics can be found at https://www.youtube.com/watch?v=b-fyp2JSV7TI with instructions and tips for ease of use. Should you need to test animals, please call the Breathitt Center and request BioMed Diagnostic InPouch Trich paks be shipped to you. The cost of the paks will be added to your monthly bill.

BVC Online Portal

Did you know that you can pay your bill at the BVC online? Were you aware that it is possible to access case reports 24/7? We have an online portal through which you can look at case results anytime you desire. Call and speak to Jessica to set up this time saving and convenient method of receiving reports or paying your bill.

Please provide the information below and BVC will create an account for your business.

Person/Contact Name:  
Business/Government Agency Name and office:  
Mailing Address:  
Phone Number (include extension if used):  
Fax Number:  
Email address:  
Does the same person receive the billing statements and the diagnostic reports? If they are different people, please provide mailing address, phone, fax, and email address for the individual receiving the billing information.

Reports, Billing Statements, and Invoices are sent via email unless an alternative report delivery method is requested (e.g., fax, US mail, etc.).

• Diagnostic Reports are sent when released
• Billing statements are prepared monthly (usually the first day of each month) and include supporting detailed testing invoices. Please let BVC know if you do not wish to receive detailed invoices.

BVC accepts payment online by credit card or electronic check at the following link or by check mailed to BVC:

• Pay online with Visa, MasterCard, and Discover credit card or with electronic check (ACH) at https://secure.touchnet.com/C21099_usstores/web/product_detail.jsp?PRODUCTID=11  
• You do not have to register to pay online just complete the information requested on each screen
  ❏ You will have option to register if you would like to store your account information to avoid reentering the data each time you pay. THIS IS NOT REQUIRED but does provide added convenience.  
  ❏ If you are a new user and choose to register click on the register now button that appears on the right side of the screen labeled Delivery Address.  
  ❏ Fill in the requested information and click Create Account

Are you interested in Web Portal Access (online report access)? If so please request access at the following link https://breathitt.murraystate.edu/BVCOnline/Login.aspx.
Mark Your Calendar!

Upcoming Events

July 7– 10, 2016 - 2016 Canadian Veterinary Medical Association (CVMA) Convention. Scotiabank Convention Centre, Niagara Falls, Ontario. The 68th Annual Convention will excite, inspire and motivate! In collaboration with the Registered Veterinary Technologists and Technicians of Canada (RVTTC), this unique four-day event features a strong scientific program, with 30 speakers from Canada and the United States. Four days’ worth of labs, concurrent streams exploring companion animal, ruminant, equine, practice management and animal welfare, and a mind-body workshop. Contact: Sarah Cunningham; tel: (613) 236-1162/(800) 567-2862 ext. 121; fax: (613) 236-9681; email: conventions@cvma-acmv.org; website: http://www.canadianveterinarians.net/science-knowledge/annual-convention.

July 16-17, 2016 - American Association of Zoo Veterinarians present Exotic Animal Medicine for the Clinical Practitioner. Atlanta, Georgia. AAZV offers 14 hours of CE endorsed by the American College of Zoological Medicine. Lectures are geared to the private exotic animal clinical practitioner and may include topics such as avian, herpetological, small mammal and fish medicine. Registration includes lecture materials, refreshments and certificate of attendance. Meet with zoo and wildlife veterinarians from around the world at the Sunday evening reception at Georgia Aquarium which includes admission and one drink ticket. Registration fee: $350 prior to midnight EDT, July 22. After June 22 regis. fee $400. Rooms available, conference rate of $139. at the Hyatt Regency Atlanta. Hotel reservations: Https://aws.passkey.com/event/14130743/owner/323/home. Conference registration: http://www.AAZV.org/event/EAMCPAtlanta Contact Admin@AAZV.org for additional information.

July 22-23, 2016 - CE Wellness Seminar for Equine Practitioners at The Jaeckle Centre, 100 Saddle Springs Blvd, Thompsons Station, TN 37179; speakers: Kinetic Vet, Rood Pharmacy, Boehringer Ingelheim, PulseVet and more. For more information contact: Melanie Fransen mfransen@jaecklecentre.com or 859.492.7348

Welcome New KVMA Members

Dr. Amanda Brumley, Richmond, KY
Dr. Candace L. Basham, Bluegrass Veterinary Specialists & Animal Emergency, Louisville, KY
Dr. Brian Davidson, Lexington, KY
Dr. Karianne C. Duncan, Mayfield Veterinary Clinic, Mayfield, KY
Dr. Tim Twehues, McCaw Veterinary Clinic, Nicholasville, KY
Dr. Patrick E. Godfrey, Nash, Cleveland, & Godfrey, DVM, Danville, KY
Dr. Callie Whitlock, Nash, Cleveland, & Godfrey, DVM, Danville, KY
Dr. Debbie S. Ruehlmann, Metropolitan Veterinary Specialists, Louisville, KY
Dr. Iga Stasiak, Kentucky Department of Fish & Wildlife, Frankfort, KY
Dr. Brigetta Hughes, Breathitt Veterinary Center, Hopkinsville, KY
Dr. Aurie P. Bouchard, Hagyard Equine Medical Institute, Lexington, KY

If alcohol or drug dependency is a problem in your life or the life of a loved one or colleague, perhaps it’s time to talk with someone who understands and can help.

Voluntary and Confidential.

Sam Vaughn, DVM - (502)245-7863 or e-mail: aviansam@gmail.com
Roy Burns, DVM - (502)238-5333 or e-mail: roy.burns@louisvilleky.gov
The KVMA Foundation was established in May 1989 with “a commitment to improve the profession of veterinary medicine by educating the public and developing future leaders in animal industry through financial assistance.”

One of the primary functions of the Foundation was to receive and distribute contributions and own properties, unacceptable practices for a non-profit organization such as the Kentucky Veterinary Medical Association. The Foundation places no liabilities on the KVMA.

In recent years, the Foundation has been active supporting many activities. Among them:
- Kentucky 4-H
- Kentucky FFA
- Kentucky Young Farmers
- The White Coat Ceremonies at Auburn University CVM and Tuskegee University SVM
- Gifts for KY first year veterinary students
- Disaster Relief Programs

The Foundation sympathy card program, begun in 2004, has helped support the KVMA. Since 2004 there has been $54,506.00 raised by the card program!

An organization is only as strong as its membership and the KVMA has always been strong. Those of you who support or have supported the Foundation in the past, we thank you. We hope others of you will join us today. We need your participation!

Sample message inside of the sympathy card:

Dear Jones Family,

The Doctors and Staff of Doe Animal Hospital wish to express their heartfelt sympathy with your recent loss of Fluffy. Losing a special friend is always difficult because of the close bond we share with them. Comfort can be found in the special memories they gave us that will last eternally. To honor Fluffy’s memory, the Doctors and Staff of Doe Animal Hospital have made a monetary donation to the Kentucky Veterinary Medical Foundation. This donation helps support our work to improve the lives of animals and people through education.

The Kentucky Veterinary Medical Foundation

Thank you to recent card program contributors:
The Animal Clinic-Lawrenceburg, Pennyrile Animal Clinic-Madisonville, Reidland Veterinary Clinic, Grants Lick Veterinary Hospital-Butler, Dr. Barbara A. Schmidt-Union, Pendleton County Veterinary Hospital-Falmouth, Crestwood Veterinary Hospital-Crestwood, Goose Creek Animal Clinic-Louisville, Eastpoint Animal Clinic-Louisville, West Liberty Veterinary Clinic-West Liberty, Dr. William H. Leonard-Lexington, Knox County Veterinary Services-Barbourville, Springfield Animal Clinic-Springfield

---

Frontline®

TRITAK™ BRAND PRODUCTS

Spring 2016  25
Dr. Jerry M. Allen, Small animal only, Central KY area. Monticello, KY (606) 307-2926
Dr. Kristin Barrilleaux, 225-454-0007, email kristinb521@yahoo.com, Greater Louisville area, primarily SA Medicine, relief/part time/full time. Graduated from LSU SVM in 2006.
Dr. Sueleaf (Sue) Berlin, small animal medicine and surgery relief services, Kentucky and Indiana, 502-266-9322, berlinrs@bellsouth.net.
Dr. Tracy Boehm, Relief and part time, Northern KY and Greater Cincinnati, Small Animal. 859-803-4987 or sdrge@yahoo.com.
Dr. C. Perry Brown, 2444 Lexington Road, Winchester, Kentucky 40391 SA. 859-745-1050 email: lpbrown32@bellsouth.net
Dr. Mark Butler, Available for small animal relief work throughout Northern Kentucky and Southwest Ohio. More info and resume available at www.CincinKkyvetRelief.com 1106 Mt Zion Rd., Union, KY 41091 happyt@cheerful.com 859-534-0658 (home), 740-705-1500 (cell)
Dr. Jose R. Castro, 2024 Cedargreens Rd., Knoxville, TN 37924 Ph: 813-957-5930, joseebe@yahoo.es Equine Relief Veterinarian. General practice and surgery.
Dr. Randall M. Collins, Small animal relief veterinarian for the Bowling Green, Ky. area. 615.325.3877
Dr. Emily (Emma) Dawson, Greater Louisville Area (will consider areas beyond). SA primarily, limited exotic/equine. Please call or email with any inquiries at (502) 608-6108 or auvet07@gmail.com
Dr. L. Dapkus, Small Animal relief veterinary services, long or short term, statewide. 859/623-8461
Dr. Fredrick C. Evans, SA medicine, limited surgery, Shelbyville-Louisville area. phone 502-386-5834, leave message.
Dr. Amber Foul, Dogs and cats, canine reproduction. Louisville area, (815) 693-9024, afaul.dvm@gmail.com
Dr. Virginia Garrison, Virginia E Garrison, DVM, 1270 Old Log Lick Road, Winchester, KY 40391. 859-492-9253. vegg52@gmail.com
Small Animal & Exotics. Will travel in Kentucky.
Dr. Julia Gowley, Small Animal Medicine, Surgery and Spinal Manipulative Therapy. 10+ years experience. Available for the Louisville and Lexington area. Relief and short term work. email: jfgowley@gmail.com. Call 715-828-4838.
Dr. Jeanette Gibson, 1681 Glensboro Road, Lawrenceburg, KY 40342, phone: (502) 839-1467, (859) 967-4703 cell or (859) 269-0600 office, email: jgibsondvm@aol.com. Licensed in OH & KY, SA. Will travel KY & southern OH.
Dr. Jane Goedeke, 962 Old US 52, New Richmond, Ohio 45157 Phone: 513-368-7383, email: goedekej@hotmail.com Lic. OH and KY. SA med. and soft tissue surgery. Gr. Cinti and N. KY w/in 30 mi of Cincinnati.
Dr. Tracy Jenkins, Lexington, KY. SA exclusive, 20 years experience, will travel. References available. Phone (859) 797-3888, email: tj3600@windstream.net.
Dr. Stacey Phelps Kimmrer, 214 Jesselin Dr., Lexington, KY 40503; phone (859) 303-8666, cell (859) 699-2411 or email staceyvet@ymail.com. SA, Lexington and surrounding areas. ’91 grad.
Dr. Stephen M. Kline, 8109 Bentbrook Place, Pewee Valley, KY 40056, (H) 502-618-3882, (C) 502-689-4702 or email: dvmkline@yahoo.com. Professional interests in SA medicine and surgery, radiology and ultrasound.
Dr. Jessie Lay Available full/part time associate position in central KY area. 5 yrs. experience in busy mixed animal practice. SA surgery and internal medicine. LA experience (horses, livestock, extensive small ruminant medicine). email: jess.lay.dvm@gmail.com. (859) 583-8415.
Dr. Gerald Lowry, 1205 Glenellem Dr., Danville, KY 40422. Home# 859-236-2933, cell# 407-721-5462. SA, 44 years experience, references, willing to travel. Auburn ’64, email: gerlow27@aol.com. Lic. KY and FL.
Dr. Mary E. Mattingly, 2000 Auburn University graduate medicine, surgery (soft tissue) and emergency. Willing to travel Fayette and surrounding counties. Any day of the week, willing to do several days in a row. Contact: drmarymatttingly@gmail.com, 859-229-1625.
Dr. Jim McCarnery, SA, Avian, willing to travel. 167 Old Georgetown St., Unit 2018, Lexington, KY 40508; phone (903) 603-8585
Dr. Robert Medley, 93 Auburn Graduate, small animal only in northern KY and southern IN. Contact: 502-338-0360.
Dr. Franklin C. Mercer, 6210 Hwy 62 E, Beaver Dam, KY 42320 phone: 270-256-1430 or 270-925-5466 willing to travel Western and Central KY
Dr. Sachiko Miyakawa, SA only, Central Ky area. Contact (859) 361-3142.
Dr. Danelle Peckler, LA & SA Medicine and Surgery. Will cover extended periods of time, entire state of KY, will cover emergency & ambulatory (provide vehicle), evening on call staff. Walnut Grove Farm Veterinary Relief Services; 115 Butler Street; Paris, KY 40361 ph: 859-338-6247 (leave message) fishingdcp@aol.com or wirehorselady@yahoo.com.
Dr. Patricia Riggs, SA medicine, soft tissue surgery. Lexington and surrounding areas. email: vetwantobe@aol.com, phone: (859) 983-3537.
Dr. Tony Sheets, small animal, Central and Eastern KY. Versailles, KY. (606) 483-2645 or (859) 873-6463.
Dr. Lionel T. Smith, 6307 Apex Dr., Louisville, Ky. 40219. Cell# (502) 593-3610, Home# (502) 290-3619. SA. Will Travel.
Dr. Erin Tepe, 938 North Bend Rd., Hebron, KY 41048 Cell/work: (859) 653-2381 Home: (859) 689-9122 SA and Emergency Veterinary Relief, Licensed KY, OH and IN.
Dr. Katie Todd, SA relief services in the Louisville area. Emergency, general practice, spay/neuter. Contact (502) 457-3055 or kttodd@gmail.com
Dr. Phil Topham, TravelDVM97@windstream.net Phone (330) 592-7256
Dr. Nina Waldron, SA medicine and surgery. For resume and more information: (815) 451-9109 or Nina.Waldron@gmail.com. Available for relief/part time/full time. Central and Eastern Kentucky (Lexington, KY).
Dr. Alexis K. Wallace, 1990 Auburn 1430 or 270-925-5466 willing to travel Western and Central KY
Dr. Sachiko Miyakawa, SA only, Central Ky area. Contact (859) 361-3142.
Dr. Danelle Peckler, LA & SA Medicine and Surgery. Will cover extended periods of time, entire state of KY, will cover emergency & ambulatory (provide vehicle), evening on call staff. Walnut Grove Farm Veterinary Relief Services; 115 Butler Street; Paris, KY 40361 ph: 859-338-6247 (leave message) fishingdcp@aol.com or wirehorselady@yahoo.com.
Dr. Patricia Riggs, SA medicine, soft tissue surgery. Lexington and surrounding areas. email: vetwantobe@aol.com, phone: (859) 983-3537.
Dr. Tony Sheets, small animal, Central and Eastern KY. Versailles, KY. (606) 483-2645 or (859) 873-6463.
Dr. Lionel T. Smith, 6307 Apex Dr., Louisville, Ky. 40219. Cell# (502) 593-3610, Home# (502) 290-3619. SA. Will Travel.
Dr. Erin Tepe, 938 North Bend Rd., Hebron, KY 41048 Cell/work: (859) 653-2381 Home: (859) 689-9122 SA and Emergency Veterinary Relief, Licensed KY, OH and IN.
Dr. Katie Todd, SA relief services in the Louisville area. Emergency, general practice, spay/neuter. Contact (502) 457-3055 or kttodd@gmail.com
Dr. Phil Topham, TravelDVM97@windstream.net Phone (330) 592-7256
Dr. Nina Waldron, SA medicine and surgery. For resume and more information: (815) 451-9109 or Nina.Waldron@gmail.com. Available for relief/part time/full time. Central and Eastern Kentucky (Lexington, KY).
Dr. Alexis K. Wallace, 3976 Lazy Creek Rd., Lanesville, In 47136. 812-987-5661- cell, email - akwvet@hotmail.com SA, some LA experience Licensed in IN and KY, Auburn 1990
Dr. Gina Yeargan, SA surgery and medicine, including thyroidectomies (no orthopedics at this time) 859-327-7199 please leave a msg if no answer
If you are working as a relief veterinarian and would like your name listed, please contact the KVMA at (800) 552-5862, fax (502) 226-6177 or e-mail: kvma@aol.com and we will be glad to add you to our list.
SA - Small Animal, LA- Large Animal, EX- Exotics, EQ- Equine

Relief Veterinarians
The West End Veterinary clinic in Louisville, Kentucky is looking for a full or part-time associate veterinarian. Benefits include: paid holidays, paid vacations, paid PLIT dues, health insurance, and a 401k plan. If interested please e-mail resume to cohnrac@gmail.com or fax resume to 812-951-0389. (SP16)

Full or part-time associate veterinarian needed. Fast-paced, high volume, have been in business over 53 years and still growing, 7 doctors, above average benefits, 401-k, etc. We focus on keeping an upbeat, pleasant work environment, and practice high quality medicine. Positive attitude, team player and good communication skills are a must. If interested, please contact: Chris Davis at cwdavis1962@yahoo.com.

Dixie Animal Hospital, 9428 Dixie Hwy., Louisville, Ky. 40272 (502) 937-2987 (SP16)

North Central Kentucky Practice adding new location and new building seeking third vet. Progressive medicine, laser surgery, orthopedic surgery including plating, online pharmacy, 90% small animal/10% large animal/exotic/equine. Small town life near major metro area with great referral center. New grads welcome! E-mail expandingkentuckyvet@outlook.com for more information. (SP16)

Full or permanent part-time veterinarian needed for a busy small animal and exotic veterinary hospital. Our hospital provides advanced procedures, including digital radiology, ultrasound, endoscopy, laparoscopy, etc. Applicant must be a highly motivated individual with great customer service skills, who practices high quality medicine. For more information contact Dr. Michael Putnam at 859-623-3898, or send resumes to 2019 Catalpa Loop Rd. Richmond, Ky. 40475. (SP16)

Banfield Pet Hospital is seeking a veterinarian in Newport. Practice high quality medicine with the latest technology and evidence based medicine. Work with a well-trained team. We offer competitive compensation and a great benefits package including 5 weeks paid-time off, health insurance, 401K and more. Apply online at www.banfield.com/careers (W16)

Do you want to do the things you were trained to do in tech school? Then you need to consider joining the team at Animal Care Clinic, Lexington, KY as a veterinary technician. Our veterinary practice is growing as we move into a new 13,000 square foot hospital and we need to find people who consider pets to be a member of the family. We are looking for upbeat, energetic, enthusiastic team players who are committed to enhance the health and well being of our patients. Our technicians perform the tasks they were educated to do such as medication administration, nursing care, client education, perform-
ing laboratory, anesthesia, and radiology procedures. If you want to be a member of our staff, send your resume to Gladys@animalcareclinic.net. Check us out on the web at www.lexingtonveterinarin.com. Drug testing will be a component of the application process for the successful candidate. (W16)

**Wanted: Veterinary Technician** for a 5 DVM AAHA accredited SA/Exotic hospital in Bowling Green, KY. All Creatures Animal Hospital is growing and is a great work environment. We have openings for several Veterinary Technicians who enjoy working in a fast paced, high quality, multi DVM practice. Pay is competitive and commensurate with experience. Please send resume to all_creatures@bellsouth.net (W16)

Fast-paced small animal practice located in Western Kentucky is seeking a **full-time veterinarian** with a minimum of 1 to 2 years experience to join our staff of 16. Benefits include 401K, Health Insurance Allotment, Continuing Education, Professional Dues/Membership fees, and Uniforms. Please email resume to MAH1601@yahoo.com. (W16)

**Full-time associate veterinarian** needed for busy, progressive 7 doctor small animal practice in Northern Kentucky. Experience preferred. Above average compensation and benefit package, 40 hour workweek and no on call. We have a great team and are continuing to grow. Excellent communication skills and a positive attitude are a must. email: dr.mcglasson@noahsarkanimalclinics.com. website: www.noahsarkanimalclinics.com (W16)

**Full-time associate veterinarian** will be needed to join Chevy Chase Animal Clinic in Lexington, Ky. We are a busy 2-3 small animal veterinary practice in a neighborhood setting with top quality medical and surgical capabilities. We have a fantastic clientele who want the best for their pets. It is a busy practice with excellent support staff. New graduates (2016) are encouraged to apply. Competitive compensation package. Please email resume to chevychaseanimalclinic@hotmail.com. (W16)

**Full-time emergency veterinarian** for 24 hour AAHA hospital in Cincinnati. We are seeking a motivated individual who wishes to practice medicine at the highest level. We offer a very good salary and benefit package. We have a 3 doctor rotation who average 33 hours/week with large blocks of time off. Interested individuals should send resume and cover letter to: DrGrady@gradyvet.com (W16)

**EQUIPMENT FOR SALE**

**X-ray processing equipment:** Used APF Mini-med Automatic X-ray Processor, 2-10X14, 2-14x17, and 1-8X10 film cassettes, red light, label imprinter and large film storage bin call Pam at 859-854-5055. (SP16)

We have gone digital and have an **Alphatek AX200 film processor for sale.** Also 2 14x17 and 2 10x12 film cassettes. All accessories and chemicals for developer also on hand. Included are a metal cabinet for storing film and some unexposed film. Please call if interested in some or all. (502)348-2525. (SP16)

**For Sale:** CL05 15w Cutting Edge Surgical Laser and Harmony-P Therapy laser, with accessories, must go. Purchased in 2013, barely used one year. $25,000 OBO. Also have two pneumatic stainless steel surgical tables for sale. Eastland Animal Hospital, Lexington. cell - 502-803-5599 (W16)

**For Sale:** 2003 La Broit Classic 1 Mobile Unit 5 drawers weighing 130# to fit SUV/Crossover 37” W x 20.5” H x 30” deep $1000 OBO-able to text pictures of unit Kresinvet@gmail.com 502-633-3512 (W16)

**For Sale:** 8’ Bowie Vet box. Fits Pickup 1988 or newer. Day/night heater and refrigeration. $2000.00 Auto-processor and 2 X-ray cassettes. Tanks included. $300.00 502-225-0606 (F15)

**PRACTICES FOR SALE**

**For Sale:** Goose Creek Animal Clinic, Louisville, KY is a one-man practice that has operated continuously for 33 years. The purchaser will be buying a turn-key operation with an active client base. We operate from a rented building in a shopping center, and all furnishings, fixtures, equipment, and supplies will remain with the business after the sale. I have complete historical financial records upon request. In addition, I would consider staying on as a part-time veterinary practitioner at Goose Creek for as long as necessary to enable a smooth owner transition for my clients. Contact: Ray Watson, D.V.M. (502) 821-3194 (W16)

**Selling solo small animal practice,** with real estate, in Louisville, Ky. Established 41 years. Experienced staff. Turnkey operation. Owner retiring. Contact Rick Goranflo at 502-445-9890 or rickgoran@bellsouth.net. (F15)
The KVMA’s NEW limited edition book, "Celebrating 100 Years of Compassionate Care" and accompanying CD, "Voices of Kentucky Veterinarians," share amusing and heart-warming stories you will want to share, dozens of rare historic photographs, and much, much more about 100 years of veterinary medicine in the Commonwealth of Kentucky that YOU are a part of!

Don’t miss out on owning these entertaining and important KVMA publications! Quantities are limited so order today to guarantee delivery for the holidays. Don’t let this chance to own a part of Kentucky veterinary history pass you by.

INCLUDES PULL OUT POSTER OF KENTUCKY VETERINARY HISTORY!

Book $35
CD $15
Book/CD $42.50 +tax/shp

Order by mail, or online at www.kvma.org

Order Form

Name: _____________________________________________________________
Address: __________________________________________________________
City: __________________ State: ______ Zip: __________ Phone: __________

#____ Book @ $35.00/each + $2.10 (6% KY Sales tax) $37.10 __________
#____ CD @ $15.00/each + $.90 (6% KY Sales tax) $15.90 __________
#____ Book/CD Combo @ $42.50/each + $2.55 (6% KY Sales tax) $45.05 __________
Shipping & handling per item/set $6.00 __________
Total __________

PAYMENT METHOD
Cash or Check #___________ Amount ___________ Date___________ (Please make check payable to KVMA)
Credit Card: _____ MasterCard _____ VISA
Credit Card #: _____________ Exp. Date _____________ Sig. Code (3 digit code) _____________
Signature __________________________

Mail or Fax to:
KVMA
PO Box 4067
Frankfort, KY 40604
Phone: (800) 552-5862
Fax: (502) 226-6177
Email: info@kvma.org
Protect your livelihood with all the right coverage through AVMA PLIT. We are the most trusted source of professional, business and personal coverage for every stage of your career.

our expertise is your strength

Workers’ Compensation • Business Property & Liability • Employment Practices Liability • Umbrella Liability • Commercial Auto • Flood • Data Breach • Professional Liability • Veterinary License Defense • Professional Extension (Animal Bailee) • Embryo & Semen Storage Coverage • Safety & Risk Management • Resources • Personal Auto • Homeowners • Renters • Personal Excess (Umbrella) Liability

AVMA | PLIT
Protecting you through it all

For a coverage comparison of your entire insurance portfolio to the PLIT Program, call 800-228-PLIT (7548) or visit avmaplit.com

Announcing MedVet Ophthalmology

We are pleased to announce the addition of board certified ophthalmologist, Dr. Rachel Mathes, to the MedVet Lexington team.

MedVet is delighted to respond to the interest of our referral partner community in an experienced ophthalmology specialist with excellent accessibility.

To reach Dr. Mathes, please call (859) 276-2505.

Rachel Mathes, DVM, MS, DACVO

MedVet Lexington

www.medvetforpets.com
Support our advertisers

Does Your Communication Protocol Match Your Medical Protocol?

Take Vetstreet’s Communication Protocol survey to see how you score on your marketing and communication efforts. Start your survey now or call us at 888-799-8387 to arrange an in-practice consultation.

http://vetstreetprotocolsurvey.com

MORE INSIGHT

helps you make the most of your practice’s cash flow.

KNOW YOU HAVE A DEDICATED BANKER WHO UNDERSTANDS YOUR INDUSTRY AND YOUR NEEDS.

As a healthcare professional, you want to spend more time helping patients and less time worrying about your finances. With dedicated Healthcare Business Bankers, PNC provides tools and guidance to help you get more from your practice. The PNC Advantage for Healthcare Professionals helps veterinarians handle a range of cash flow challenges, including insurance payments, equipment purchases, and managing receivables and payables. In such a fast-moving business, PNC understands how important it is to have a trusted advisor with deep industry knowledge, dedication and a lasting commitment.

Cash Flow Optimized is a service mark of The PNC Financial Services Group, Inc. (“PNC”). Banking and lending products and services, bank deposit products, and treasury management services, including, but not limited to, services for healthcare providers and payers, are provided by PNC Bank, National Association, a wholly owned subsidiary of PNC and Member FDIC. Lending and leasing products and services, including card services and merchant services, as well as certain other banking products and services, may require credit approval. All loans and lines of credit are subject to credit approval and require automatic payment deduction from a PNC Bank business checking account. Origination and annual fees may apply. ©2015 The PNC Financial Services Group, Inc. All rights reserved. PNC Bank, National Association. Member FDIC.
The Right Place to Find the Right People.

When you’re responsible for hiring veterinary professionals and support staff, the KVMA Career Center can save you time and money by helping you find the right people faster. As a member of the Veterinary Career Network (VCN), the KVMA Career Center gives you access to the best source of local and national professionals, as well as to veterinary and vet tech schools and colleges. When you want the best, go to where the best are, the KVMA Career Center.

Visit careers.kvma.org/employers and start getting results today!