

A close-up photograph of a white horse with brown speckles and a brown foal resting its head against the horse's neck. The background is a blurred green field under a blue sky.

# SVMA NEWS



SASKATCHEWAN  
VETERINARY MEDICAL  
ASSOCIATION

AUGUST 2018  
VOLUME 53, ISSUE 3

4

2018 SVMA  
CONFERENCE PROGRAM

9

WHAT'S HAPPENING  
WITH BSE

12

8 HABITS OF  
SUCCESSFUL PRACTICES

15

THE MIND-BODY  
CONNECTION



SVMA NEWS is a publication of:

**SASKATCHEWAN VETERINARY MEDICAL ASSOCIATION**

202-224 Pacific Avenue,  
Saskatoon, SK S7K 1N9  
T: 306.955.7862 • F: 306.975.0623  
E: svma@svma.sk.ca • www.svma.sk.ca  
Editor: Sue Gauthier  
T: 306.955.7868 • E: sgauthier@svma.sk.ca

Publications Mail Agreement No. 40016569  
Return undeliverable Canadian addresses to:  
Saskatchewan Veterinary Medical Association  
202-224 Pacific Avenue, Saskatoon, SK S7K 1N9

**SVMA MISSION**

We are an organization dedicated to the protection of the public by ensuring the proficiency, competency and ethical behaviour of its members in the practice of veterinary medicine. Our association promotes veterinarians and veterinary medicine. We support the physical, personal, financial and professional well-being of our members through continuing education and professional interaction. We regulate our profession through the licensing of veterinarians, approval of practices and disciplining of members as required.

**THE SVMA BELIEVES IN**

- the personal responsibility of veterinarians to develop and maintain competency in their chosen area of veterinary medicine
- fostering our profession by involvement in education of future and present veterinarians
- quality veterinary practice, humane animal care and compassionate treatment of the client
- providing for public protection and confidence through the fair and unbiased administration of The Veterinarians Act
- enhancing the public's awareness of veterinary medicine and its contribution to society
- the unbiased treatment of members and we expect members to treat each other fairly
- supporting members by providing guidance and information

**COMMERCIAL FOUR-COLOUR AD RATES:**

	Single	4 issues
Outside back cover	\$1200	\$4400
Inside front/back cover	\$1100	\$4000
Standard full page	\$1000	\$3600
Half page	\$525	\$2000
Quarter page	\$275	\$1000
Business card	\$150	\$500
Insertions	\$300	\$1100

All advertising rates are subject to GST

ISSUE	DEADLINE
February	Jan 6
May	April 6
August	July 6
November	Oct 5

The material distributed in SVMA News does not necessarily reflect the opinion of the members or council of the Saskatchewan Veterinary Medical Association

Cover photo: Shutterstock



2018 SVMA  
CONFERENCE PROGRAM



8 HABITS OF  
SUCCESSFUL PRACTICES

- 03 President's Perspective
- 08 Bylaw Buzz
- 10 Registrar's Desk
- 14 GHP Update
- CS Animal Health Perspectives
- 19 Veterinary Caregivers need caring too
- 20 Report from the Ministry of Agriculture
- 21 Reflections on the Spring Veterinary Retreat



WHAT'S HAPPENING  
WITH BSE



THE MIND-BODY  
CONNECTION

- 22 Update from WCVM
- 23 On Campus at the WCVM
- 23 Discipline Case Report
- 25 SAVT Update
- 26 Member News
- 28 CVMA UPDATE
- 30 You Said it!
- 32 Classifieds
- 34 Membership Changes

## president's perspective

Dr Lesley Sawa

Alas, my year as SVMA president is coming to an end. It has been an exciting, fun filled ride that allowed me to participate in decisions for some of the important issues affecting veterinary medicine. I have travelled across western Canada and to the United States to discuss all of these issues and the one thing I realized is that we all share common problems, common goals and a real dedication to veterinary medicine and public protection. It has been an honour to be involved in this process.

This year the Animal Protection Act was opened and several changes were made including mandatory reporting by the veterinarian in suspected cases of abuse. This has been a slightly contentious issue. The animal welfare discussions we had helped provide needed education on this subject as veterinarians come to understand their role in this process. The discussions have been adapted into a four-hour animal welfare seminar on our education portal through the website that can provide more information for veterinarians who may still have some questions.

Speaking of the continuing education portal, our SVMA office has done an amazing job of getting the portal up and running with several seminars on antimicrobial stewardship and animal welfare with more seminars to come. Continuing education is a great new website feature that will be nice for all of us to access at our leisure.

The Group Health Insurance and Benefits Plan (GHP) through Saskatchewan Blue Cross is up and running. There has been some good response from the membership and participation is increasing as we speak. Our office staff has worked very hard on this project to negotiate exceptional health benefits for our large group of members. If you haven't had a chance, take a look at what is offered and see if this plan may augment or improve on your current health plan.

Our Bylaw re-write is now done, and I feel it is going to help us clarify some of the grey areas that were present in our previous set of Bylaws. This has been a big undertaking and will provide us with more up-to-date language and allow for a more ease in making decisions when looking to the Bylaws

for guidance. Supplemental Operational Policy documents that address the day to day functions of certain sections of the Bylaws have also been drafted. These are not directly part of the Bylaws and can be assessed and modified as necessary by Council. Members can send comments or concerns about the supplementary documents at any time and these can be addressed by Council. Please be sure to have read the new Bylaw document through before the AGM. You need to be able to fully understand what you are voting on and it is your responsibility as a self-regulating profession to participate in the process that governs your livelihood.

One of the issues facing our profession is the lack of veterinarians pursuing mixed or large animal practice. This problem is multifactorial and it is hard to come up with solutions. It has become an even bigger issue in the west with Alberta pulling its participation and funding out of WCVM. We are pleased to announce the launch of our new Preceptorship Program (PP), jointly funded by the SVMA, individual practices and the Saskatchewan Cattlemen's Association. The PP provides 3rd year students with experience in a rural setting, which in proven to increase numbers of graduates who go into rural practice. Because this is one of the major issues facing practices all across Canada, finding solutions to this problem is becoming a major focus on both provincial and national levels.

Come October, cannabis will be legal in Canada and we as veterinarians need to make sure we are prepared for the questions that will be coming from clients. Research is starting on the effects of cannabis on pain, anxiety and seizure activity. There will be more information coming in the future of the potential uses and benefits that we may see in animals. In the meantime, make sure clients are aware of the potential dangers of cannabinoids in animals. Cannabis is a complex of many components, not just THC.

Dogs have more receptors in their brains for cannabinoids than people. This is why we see toxicity. We must also understand that there are different types of cannabis, some stronger than others, some will be home grown, some manufactured. It is a complex subject that needs our attention. Once the evidence based science is in place, we will be better able to advise clients. In the meantime, keep an eye out for more information from the CVMA on this subject.

Veterinary medicine in Saskatchewan will be facing some challenges in the future. Our Association has been proactive on these

fronts and participating in forums and discussions with our colleagues in other provinces. Some of the things we have been discussing include lack of veterinarians and RVTs, access to veterinary care in remote areas, telemedicine, unregulated rescue groups crossing provincial and country borders without proper steps being taken to control or assess for disease, marketing and perception of veterinary medicine in the public's eyes, corporate ownership of veterinary clinics, bans of feline declawing and wellness and mentorship just to name a few. We have a lot of work ahead of us and we need your input and expertise to come up with strategies to address these concerns.

In closing, I would like to invite you to join Council or a committee. I wish I had joined Council a long time ago. Being involved in the issues and giving my opinion has been really worthwhile. We need to hear a variety of voices: seasoned practitioners, ten years out, five years out, one year out, small, mixed, large, educational, all voices. Together, we have the skills and expertise to manage and come up with amazing solutions that will move us toward a brighter future in veterinary medicine.

Thanks for the opportunity to be involved and represent you all. I look forward to seeing everyone at this year's celebratory AGM. 110 years - we should be very proud!!





# 2018 SVMA CONFERENCE AGM & TRADE EXPO SEPTEMBER 6-9, 2018



**SHERATON  
CAVALIER  
HOTEL  
SASKATOON**

**T**he 2018 SVMA Conference, AGM and Trade Expo are just around the corner! 2018 is a special year for our Association as we celebrate our 110th anniversary, and preparations are underway that promise to make this our best conference yet. We can't wait to see our many regular conference-goers again and look forward to welcoming many new faces as well.

Your CE Committee has put together another excellent group of Speakers for 2018. Experts from across the US and Canada have been selected for their knowledge of leading-edge veterinary science and technique. Look for timely topics like cannabis toxicity, forensic pathology, bee health and diseases, pet pig surgery, equine dentistry and more. Our fully RACE approved CE program provides 36.5 total hours of scientific CE, or 16

hours each for large, and companion streams. Add another 3.5 by registering for a wet lab for a total of 19.5 CE hours.

This year, the SVMA conference is moving downtown to the Sheraton Cavalier Hotel on the beautiful Saskatoon waterfront, right in the heart of the city's best scenery, shopping and nightlife.

Visitors to Saskatoon will enjoy loads of great restaurants, patios and live music within walking distance of the hotel. The Meewasin Trail is right at your doorstep for a relaxing walk, run, or bike ride anytime. The hotel has a great water park with multiple slides, pools and hot tubs. There are plenty of reasons to come for more than just the conference – and bring

the family!

A block of rooms has been reserved at the Sheraton for the special conference rate of \$159/night. Visit our website for the link to booking your conference rate room. The deadline for guaranteed booking at the conference rate is August 9.

Worried about parking? No need- the Sheraton Cavalier is providing free parking to

all conference registrants, based on availability. There is also street parking and an Impark lot next door to the hotel.

We have arranged some new and exciting events this year to celebrate our 110th. Along with the annual SVMA Awards Night Banquet, the celebration continues on Saturday night with the Cocktails & Connections dinner/

reception open to all registrants, followed by an evening party cruise on the Prairie Lily. Welcome also to the WCVM Class of '78 who is holding their 40th reunion during the conference.

Haven't had a professional photo taken lately? SVMA is providing complimentary professional photos during the conference. Registrants may sign up

for a session with our professional photographer during the conference and receive free digital photos and an 8x10" print.

Registration is now open! Don't forget to register by Friday August 24 for early bird discounts.

If you have any questions, contact Sue Gauthier anytime. We couldn't be more excited to welcome you back to Saskatoon in September!

## PLENARY

### "50 SHADES OF BEIGE" COMMUNICATING WITH THE CROSS-CULTURAL ADVANTAGE

Everybody can benefit from communicating more effectively. However, when 20% of Canada's population is foreign-born (and much higher in urban centres), communicating with the cross-cultural advantage is arguably one of the

most important types of communication to understand in the 21st century. Veterinary practices, with an ever more culturally-diverse client base plus an increasingly multicultural workforce, will benefit greatly from this topic.

#### TINA VARUGHESE

Tina Varughese is a professional speaker and trainer specializing in cross-cultural communication, work-life balance and inclusive leadership, based in Calgary AB. *Sponsored by IDEXX and WDDC*



## CE Highlights

### VCPR CASE DISCUSSION

Understanding the VCPR is more important now than ever. All of us have questions about creating and maintaining a proper VCPR with clients. This hour moderated by Dr Judy Currie will address handling VCPR correctly in common and uncommon situations. Bring your questions!



## COMPANION ANIMAL

### MARIJUANA TOXICOSIS

Marijuana/THC toxicosis is becoming an increasing concern for veterinarians as pets are exposed to a variety of recreational and medical marijuana products. We are seeing an increase in the number of cases of toxicity as well as in the severity of toxicity. Ingestions involving concentrated cannabis products

(shatter, butter, oil, etc) can result in life threatening poisoning. We will discuss routes of exposure, diagnosis and treatment, including lipid therapy for life threatening toxicity.

#### ERIN SIMMONDS

BSc DVM DACVECC  
Medical director and critical care specialist, VCA Canada Guard-



ian Veterinary Centre, Edmonton AB.

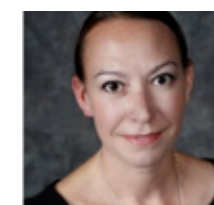
Additional sessions with Dr Simmonds: **Diabetic Emergencies in Dogs and Cats**

### VETERINARY FORENSICS: RECOGNITION, REPORTING, FORENSIC NECROPSY

Three sessions on veterinary forensics will cover factors to increase suspicion of abuse as a diagnosis, how to approach making the diagnosis; live forensic exam and collection of evidence including photography, documentation of findings, and necessary diagnostics specific to legal cases; an in-depth approach to

forensic necropsy, with discussion of drawing conclusions and making interpretations from findings; a concluding discussion about writing statements for law enforcement, what they want out of your statement, and what will be expected of you in court if you are asked to testify.

**MARGARET DOYLE**  
DVM, BSc, MVB, MSv,



#### MRCVS

Forensic consulting services provider for the Calgary Humane Society, the Calgary Police Service and the Alberta SPCA.

### ISOXAZOLINES: A NEW CLASS OF ECTOPARASITICIDES

Flea and tick infestation is a major health problem in dogs and cats. A new class of veterinary insecticides/ acaricides, the isoxazolines, has demonstrated excellent efficacy against them. After covering the differences between isoxazolines and the older oral flea adulticides (including their mechanism of action),

we will discuss and compare the isoxazolines currently available in Canada (fluralaner, afoxolaner and sarolaner). Isoxazolines also happen to be effective against numerous other canine and feline external parasites.

#### VINCENT DEFALQUE

DVM, DACVD  
North West Veterinary Dermatology Services



in Vancouver BC and St Albert AB. *Sponsored by Royal Canin*

Additional conference sessions: **Feline Pruritus**  
**Canine Demodicosis**



## LARGE ANIMAL

### CRITICAL APPRAISAL OF EVIDENCE AND DRUG DECISION-MAKING SCENARIOS

Three sessions covering a review what types of evidence support drug decisions and how to critically appraise evidence and apply it to clinical decision-making; common uses of drugs, particularly antibiotic, and the evidence for or against their

use. Possible scenarios will be perioperative use, respiratory disease, contagious abortion, and foot rot in ruminants.

**VIRGINIA FAJT**  
DVM, PhD, DACVCP  
Texas A&M University  
College of Veterinary  
Medicine and



Biomedical Sciences  
Sponsored by  
Merck Animal Health

### HONEYBEE BIOLOGY, BASIC BEEKEEPING PRACTICES, IMPORTANT DISEASES

Two hours covering honey bee biology and beekeeping practices in Western Canada with special emphases on those aspects that are related to honey bee health and diseases. Most important bee diseases in Saskatchewan will emphasize

etiology, pathogenesis, diagnosis, therapy and prevention of most common diseases. The objective of both lectures is to provide basic information that is important to understand for all future "Bee Vets".

**ELEMIR SIMKO**  
DVM, DVSc, DACVP



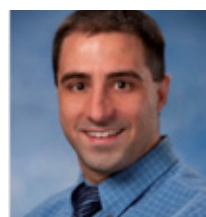
Anatomic Pathologist,  
WCVN Department of  
Veterinary Pathology

### SURGICAL COMPLICATIONS WITH ALPACAS

Camelids are susceptible to the same surgical complications as other animals. However, sometimes their unique anatomy and physiology can make even experienced veterinarians feel out of their comfort zone when dealing with complications. In this session, we will discuss some of the

complications that we've experienced at one referral hospital, including incisional complications, orthopedic complications, and obstetrical complications.

**ANDREW NIEHAUS**  
DVM, MS, DACVS-LA  
Head of Farm Animal  
Surgery, Ohio State  
University



Additional sessions:  
**Anesthesia and  
Surgery of Pet Pigs**  
**Useful Nerve Blocks  
for Cattle**

## MEETINGS

### ANNUAL GENERAL MEETING AND MEMBERS' FORUM LUNCH

Friday Sept 7th is a busy day with the Association's Annual General Meeting in the morning, followed by the Members' Discussion

Forum Lunch. As always, every SVMA member is encouraged to attend the AGM.

This is an important year, as we will be

voting on our proposed updated Bylaws.

Registration is not necessary for either the AGM or the Members' Forum Lunch.

## WET LABS

Wet labs take place Thursday Sept 6, 5 – 9 pm at the Western College of Veterinary Medicine.

### EQUINE DENTISTRY IN AMBULATORY PRACTICE

Routine as well as advanced equine dentistry procedures in a field practice setting. Participants will have the opportunity to review basic dentition on skulls and as well as cadaveric heads, practice charting, and use of the Power-Float®. Participants will practice basic dental radiography, which can be useful in a field setting for identifying disease processes in teeth which may not be apparent on oral exam. Participants



will also practice local anesthetic techniques and intra-oral extractions.

**KATE ROBINSON**  
DVM, BSc  
Field service clinician,  
University of Saskatchewan Veterinary  
Medical Centre  
Sponsored by  
scil Animal Care Co

### REHABILITATION FOR CRANIAL CRUCIATE LIGAMENT RUPTURE

An introduction to rehabilitation for both surgically and conservatively-managed cases of cranial cruciate ligament rupture (CCLR). It will address analgesia, modalities and therapeutic exercises, focusing on techniques easily performed in general practice. It will also go over the general progression of exercises and useful milestones for knowing when to increase the difficulty of exercises. Participants will have the opportunity to practice measurement of joint



angles, muscle palpation, passive range of motion, stretching and therapeutic exercises in healthy dogs and dogs with CCLR. We will also include a brief demonstration of the underwater treadmill.

**ROMANY PINTO**  
DVM, CVA, CCRP  
Clinical associate,  
University of Saskatchewan Veterinary  
Medical Centre

## SOCIAL EVENTS

### 110TH ANNIVERSARY AWARDS BANQUET

Friday Sept. 7, 5 pm

2018 is a banner for our Association as we celebrate 110 years of success and pride for veterinary professionals across Saskatchewan. Join us for dinner, awards and live jazz with the Neil Currie Trio on Saturday night at the Sheraton's 'Top of the Inn' ballroom, overlooking Saskatoon's waterfront and its many bridges. This will be a party to remember! Purchase tickets separately when you register.

**Cocktails 5 pm**  
**Dinner 6:30 pm**

### COCKTAILS & CONNECTIONS DINNER/RECEPTION

Saturday, Sept. 8, 5 - 7 pm

Everyone is invited to gather and unwind while perusing the Trade Expo. Catch up with colleagues and make new connections. Mobile dinner buffet will be served. Look for your free drink ticket in your badge holder. This reception is included with conference registration.

Our industry partners are a vital part of our conference. Registrants are encouraged to visit the Trade Expo as often as possible during the conference.

### PRAIRIE LILY BOAT CRUISE

Saturday, Sept. 8, 7 - 9 PM

Welcome aboard! There's nothing like sunset on the water.

The 110th anniversary celebration continues with a private evening cruise on the famous Prairie Lily riverboat. Plenty of hors d'oeuvres and great music will be served at this floating party. (Cash bar) Purchase tickets separately through registration portal.

### WCVN CLASS OF '78 40 YEAR REUNION

Saturday, Sept. 8, 7 pm

The WCVN class of 1978 is gathering at the Sheraton on Saturday night to reminisce and celebrate good times past and present. Welcome Class of '78!

## REGISTRATION

Visit [www.svma.sk.ca/index.php?p=conference-homepage](http://www.svma.sk.ca/index.php?p=conference-homepage) for registration details, the full CE program, conference schedule, speakers, special hotel rates, everything! Call Sue Gauthier, SVMA Conference Coordinator anytime for further information.

### IMPORTANT DEADLINES:

**AUGUST 9**

Deadline for guaranteed room availability at the Sheraton Cavalier Hotel for the special conference rate of \$159/night.

**AUGUST 24**

Cut off for early bird registration discounts.

### SOME COMMENTS FROM PAST SVMA CONFERENCE ATTENDEES:

*Thanks for 50 minute sessions- it's just right.*

*Excellent conference, topics and speakers- my compliments to the organizing committee!*

*I really appreciate the focus on practical knowledge we can take back to the clinic and use right away.*

*Food was excellent and plentiful – great job. Good to have lots of variety and a proper breakfast. Thank you for catering to those with Celiac disease/gluten intolerance.*

*Overall a great experience for my first time! I will definitely be returning for future conferences. The lectures all pertained to the industry today- very up to date.*

*Thanks so much for letting RVTs attend. The seminars were very beneficial and it's nice to get CE at events that are relevant to what you experience.*

*Very professionally-done CE program. Thank you! It's great to have this so close to home.*

*First time attending- impressed! I will try to attend again.*

*Many good speakers, well done. I am sorry I missed the AGM.*

If you haven't attended the SVMA conference before, make 2018 your first!

## SPONSORS





# Bylaw Buzz

“If you can't say something nice, don't say nothin' at all.

Thumper, from Disney's Bambi



Dr Judy Currie, Registrar

**Gossiping about one's colleagues is addressed by two SVMA bylaws.**

**The first is 32.1,**

*The member should first of all be a good citizen. No act should be committed that will reflect unfavourably upon the profession.*

**The other is 32.4,**

*No member shall belittle or injure the professional standing or character of another member, or criticize or disparage another member's service to a client. If a member's actions reflect professional incompetence or professional misconduct or neglect or abuse of a patient, such should be brought to the member's attention and, if appropriate, to the attention of the chairman of the professional conduct committee or to the registrar.*

To quote Thumper, “If you can't say something nice, don't say nothin' at all.” Poor grammar, but words many, many parents have used to teach children about how to treat others.

I periodically receive calls from members with concerns about rumours and gossip within the profession. Recently, the frequency of such calls has increased. This Bylaw Buzz is a reminder to all SVMA members that chin-wagging about one's colleagues is unprofessional, reflects unfavourably on the profession (and on the gossiper) and is a Bylaw infraction for which veterinarians can be (and have been) disciplined.

**Need I say more?**

  
**ROYAL CANIN®**

**A FOOD ELIMINATION TRIAL:**

## THE GOLD STANDARD DIAGNOSIS

FOR A CONFIDENT DIAGNOSIS  
AND MANAGEMENT, PRESCRIBE  
ROYAL CANIN® ANALLERGENIC



# The Role of Canadian Veterinarians in Reaching BSE Negligible Risk Status

Dr Alex McIsaac

Canadian Food Inspection Agency  
Alex.mcisaac@canada.ca

**Veterinarians are encouraged to test Over Thirty Month (OTM) cattle with neurological symptoms that test negative for rabies as they are at high risk of having BSE.**

The present BSE risk categorization system is designed to recognize the effectiveness of investments countries have made to mitigate the spread and eventually eradicate the disease; the World Organization for Animal Health (OIE) categorizes risk as “negligible risk,” “controlled risk,” or “undetermined risk.”

Canada was assigned “controlled risk” status while our main trading partner, the United States, attained “negligible risk” status.

The CFIA is currently preparing its 2019 submission to the OIE applying for “negligible risk” status. This application will include details of Canada's BSE sampling and awareness programs together with information regarding the level and type of participation of all implicated parties in the cattle industry. The stakeholders include the CFIA's federal, provincial and territorial partners as well as Canada's cattle industry and veterinary communities.

More specifically, the CFIA's submission will include evidence of compliance with the provisions of the OIE Terrestrial Animal Health Code as they apply in the following areas:

- policies designed to protect animal and human health are based on an appropriate assessment of risk,

- BSE awareness, education and reporting programs have been implemented,
- an appropriate feed ban is in place,
- there is diagnostic competency within the laboratory system,
- BSE surveillance has been conducted in accordance with the OIE's BSE guidelines and
- any BSE infected domestic animals were born more than 11 years ago (this will be achieved in 2020).

The last case of BSE was identified in Alberta in 2015 (animal born in 2009).

Canada's feed ban has been in place since 1997 and an SRM removal and permitting system was put in place in 2003 (a large percentage of large animal practices in SK have SRM permits) with further enhancements added in 2007.

Canada continues to strive to attain 30,000 BSE surveillance samples yearly from across the country to provide evidence of the effectiveness of Canada's BSE control measures. Saskatchewan's share of that number, which is based on the Over Thirty Month (OTM) cattle population, is approximately 7,500 samples. This number of BSE test samples has not been achieved for some time. In

Saskatchewan, 53% of the BSE surveillance samples are collected by private practitioners and the remainder by CFIA inspectors. Samples are exclusively collected from on-farm locations across Saskatchewan. Information on the sample status and testing results may be found on the CFIA website, (<http://inspection.gc.ca/animals/terrestrial-animals/diseases/reportable/bse/enhanced-surveillance>).

OTM Cattle with neurological symptoms that test negative for rabies are at high risk of having BSE and should be tested for this disease. Over the past few years, the number of samples from this group submitted for BSE testing has been steadily declining. We need to increase BSE testing of negative rabies samples. Veterinarians are asked to be sure to complete a BSE agreement form when collecting samples from rabies suspect OTM bovines.

Should the OIE grant Canada negligible BSE risk status it would enable Canada's beef industry to reengage with its trading partners with the goal of removing any ongoing trade restrictions on Canada's beef exports.

The Canadian Food Inspection Agency appreciates the support of the veterinary profession in improving Canada's BSE status.



# registrar's desk



**Judy Currie, DVM**  
Registrar, secretary/treasurer  
306.955.7863  
jacurrie@svma.sk.ca

The current SVMA Bylaws have been criticized for being too long, cumbersome and outdated. Over the SVMA's 110 year history, several amendments and additions have been made to stay current with the changing times. The result is a rather disorganized document with quite a lot of outdated and redundant content. The existing set of Bylaws needed to be tidied up and modernized to suit the current needs of the Association. Over the past year, a new Bylaw document has been drafted, reviewed, commented on and edited by your SVMA Council and other members.

Bylaws are legally binding for SVMA members and can be overly restrictive if too rigid, or open to too much interpretation if written too loosely. The Bylaws are the operating rules of the Association and play a pivotal role in how the Council makes business decisions and sets direction for the future.

Because the primary mandate of the SVMA is public protection, any bylaws written for the purpose of influencing economic outcomes for Association members cannot be included. In Saskatchewan, the only regulation prohibiting dispensing by veterinarians is an SVMA bylaw, specifically Bylaw 31.11.7. Its intent is protection of market share interest for small practices by attempting to limit sales of medications by large practices that are better able to purchase large volumes at discounted prices.

As an act of professional integrity, we are choosing to be proactive and remove protectionist phrasing from our rewritten Bylaw document. As a result, one of the potentially controversial changes to the Bylaws is allowing dispensing as a stand-alone activity. That is, allowing one veterinarian to fill another's prescription. This is currently recognized elsewhere in Canada as an acceptable practice.

Member comments and suggestions

about the proposed new Bylaws were posted during the 60-day comment period in the spring. All suggested edits, additions and changes have been considered and incorporated where possible. When a suggested change was not added to the draft Bylaws, it was for one of a few different reasons, including:

- the suggested change was contrary to The Veterinarians Act, 1987 or other legislation,
- the suggested change appeared to be protectionist,
- the suggested change pertained to an issue over which the SVMA has no authority, or
- it was covered elsewhere in the new Bylaws or in one of the Supplemental Policy Documents.

The Supplemental Policy Documents (SPDs) encompass subject matter extracted from the SVMA Bylaws, using wording from several sources including the current Bylaws. This was done to make the Bylaws more concise by removing more routine subject matter that can be dealt with by following the Bylaws rather than by being Bylaws. In other words, the purpose of the SPDs is to clarify

the intent and to set out the operational details of the updated Bylaws. As a reminder, the Supplemental Policy Documents include:

- operational policies for membership categories
- operational policies for prescribing, dispensing, compounding and selling pharmaceuticals
- operational policies and standards for continuing education
- operational policies for advertising and public education

The SPDs will also make housekeeping easier in future. When Council deems that editing is needed for protocols for implementing Bylaws or for definitions of things like membership categories, operational policy updates like these can be handled in a timely manner instead of having to wait to be dealt with at an AGM. In the same way, members can address suggestions or concerns about operational policies to Council for consideration at any time.

The entire new Bylaw document will be presented for voting at the AGM on September 7th. The Annual Report must be sent out to all members thirty days in advance of the AGM. You have very likely already received a notice that the Annual Report, which includes the final draft Bylaws and Supplemental Policy Documents, is now available for your review on the Members' Side of the SVMA website.

The side-by-side presentation of the current and new Bylaws clearly shows and explains the proposed changes. Several sections of the old Bylaws have either been moved to one of the Policy Documents or removed entirely. Much of the new Bylaw document consists of sections that are present in the current version but in a different order and with slightly different wording. The meaning and intent have been preserved in these areas, which have had housekeeping

edits only. These sections have been printed in **green** text. Any substantive changes have been printed in **red** text to highlight the sections or items that members present at the AGM may want to discuss prior to the vote.

In the side-by-side or 'comparison version', the current set of Bylaws is in the left column in black text in its current, numerical order. The new version is in the right column. You will notice the coloured sections of the new version are not in numerical order. This is because they have been aligned with their counterpart sections of the current Bylaws to make comparison easier. Also, in the right column are notes indicating where a section has been removed completely from the Bylaws or moved to one of the Supplemental Policy Documents.

Two ways of presenting the new Bylaws for voting were considered. One way is to separate them into sections to review, discuss and then vote on each section individually. The other is to review the significant changes made to the entire document and then hold a single vote. Because the new Bylaws can only function as a complete unit, the decision was made to hold a single vote.

The Bylaw document will not be edited during the AGM. The 60-day comment

period, multiple reviews and many meetings with the lawyer who created the draft have resulted in a version that, once approved by the membership, can be easily implemented by the Council and SVMA committees.

If there are enough voting members at the AGM who disagree strongly with the content of the proposed new Bylaws, the document will have to be tabled for a future vote. The Association would then continue to use the current Bylaws. In such a case, the Bylaw draft will then be posted to the website for another predetermined comment period. Any suggested changes will be made, and a newly drafted Bylaw will be presented to the members for a vote at the AGM in 2019.

Chris Masich, the lawyer who has drafted the new Bylaw document for us, will be present at the AGM to provide any needed clarification. Also present will be Nicholas Stooshinoff, who will comment on the reasons for changes to the complaints process and any other concerns.

We believe you will be pleased with the improved brevity and clarity of the proposed new Bylaws. Please attend the AGM on Friday September 7 in Saskatoon and be part of the discussion and voting. 🐾

## Another AGM? Why should it matter to me?

AGMs are an opportunity to discuss the most important concerns of your profession

AGMs give new practitioners a big-picture view into the SK veterinary profession

AGMs give all members a voice and a vote

AGMs enable members to effect change

All members are encouraged to attend the SVMA Annual General Meeting

Friday September 7,  
8:30 – 11:30 am,  
Sheraton Cavalier Hotel,  
Saskatoon

# THINKING OF RUNNING FOR COUNCIL?

When you think about your Association's decisions and policies, do you wish you had more influence? Would you like an opportunity to handle things differently? The opportunity is here, at the SVMA Council table

Your Council is made up of member veterinarians just like you. Every SVMA member has important ideas and perspective to share. We want your point of view, your knowledge and your ideas.

Any SVMA members with five+ years of practice experience are welcome. Members with experience from volunteering with other SVMA committees are preferred. Two-year Coun-

cil terms go by quickly, and Council members invariably say they obtain a wealth of knowledge and insight about the Saskatchewan veterinary profession to take back to their practices.

If you are interested, please contact the SVMA office or a current Council member for more information. Nominations for Council seats can be made during the AGM.

**BE PART OF THE PROCESS. SHAPE THE FUTURE OF YOUR PROFESSION. RUN FOR A SEAT ON COUNCIL.**



# 8 HABITS OF HIGHLY SUCCESSFUL PRACTICE OWNERS

We asked some SaskVet practice owners to tell us about their strategies for success. Thank you to everyone who shared your ‘pearls of wisdom’.

- 1 HIRE GREAT STAFF**

**H**ire great staff and treat them well! Have consistent rules, goals and rewards that are fair and upfront. Regular staff meetings and performance reviews help accomplish this.

Skilled, compassionate and motivated veterinarians, managers, technicians, receptionists and assistants are fundamental components to a successful veterinary hospital. Our team works very well with one another, shares the same passion and love for the job, and we all support one another in any way that we can.

One of the key successes to our business is having well organized, influential managers. I do not micromanage my management team, this is very important. As a veterinarian and a business owner, I empower them to provide ideas, strategies and solutions to all situations. I also trust and support their decision-making abilities to any concerns that they may face. Having to not deal with the common day to day business decisions, as well as staff or clients concerns, allows me to focus on my patients and their health rather than be distracted and/or spending my time on the more mundane tasks. We have regular meetings to discuss current situations, and most importantly, the future and what we need to do together to get there. We understand one another, are all forward thinkers and share the same philosophy of providing gold standard care to our patients and clients.
- 2 NURTURE WORKING RELATIONSHIPS**

**W**e are very lucky to practise in an area where we know and respect our colleagues even though they are competitors. No one wins trade wars and a warm relationship is better for everyone.

We have always nurtured a good working relationship with all industry representatives. This has been mutually beneficial because as our business flourishes we have relied a great deal on our industry partners for things such as keeping up on inventory when supplies are scarce, demonstrating a new piece of equipment, new lab tests and, of course, prompt service when repairs are needed.
- 3 COMMUNICATE**

**P**ractise and teach your staff great communication skills with clients! We may not always be able to save or cure an animal, but upfront honest discussions and cost estimates go a long way to making whatever outcome happens not a surprise to clients in the end. Most complaints to the SVMA arise not from poor veterinary services, but rather lack of effective communication between client/veterinarian along the way.

We never want to be seen as doing something ‘under the table’ or a little shady in any regard. As a friend once told me – integrity is like virginity, you only get to lose it once!
- 4 PARTICIPATE IN THE COMMUNITY**

**A**s business leaders and visible members of our community, we strongly believe in giving back to the people that ultimately support us. We volunteer for community organizations, support local agricultural clubs, sponsor a scholarship for graduates entering into animal sciences, AHT programs, and pre-vet, and provide financial support for many worthwhile groups. Volunteer on boards and committees. Whether it’s on your local credit union, 4H group, rink board or SVMA council, it feels good to contribute and give back to the community.

Our motto has been “buy local” wherever possible. We foster positive and loyal relationships with our local tradespeople. We have expanded four times and we have not had problems or surprises with our contractors thanks to our great relationships. We always hire the same plumber or same electrician, we do not “shop” for the cheapest service and we pay all invoices promptly. As a result, when a situation has arisen in which their services are needed on short notice they have always come through for us.

## 5 WATCH THE DOLLARS

**T**ry to stay within the realm of the fee guides. It has helped enormously to have worked with professionals with respect to guiding financial decisions and looking closely at expected levels of expenses, especially in the area of wages for staff and associates.

Manage by statistics. Pay attention to client reviews. If some-

thing is not working well, make the necessary corrections and change it for the better. We all make mistakes, that’s what makes us human. Learning from these mistakes and moving forward is invaluable.

We participate in economic surveys and find the reports to be very helpful in determining how

we are doing in comparison to our colleagues, both provincially and nationally. The fee guides have also been a great reference tool when setting our own service fees and when taking into account our 24-hour setting overhead.

## 6 STAY CURRENT

**G**et CE in every year. The annual SVMA conference is something I try to attend regularly as much as I can. In my mind, AGM attendance should be compulsory for each practice in the province even if every practitioner can’t make it every year. The saying “the world is run by those who show up” is very true. While members don’t typically think about SVMA policies discussed at the AGM on a daily basis, it needs to be remembered these are the rules we play by. (Just because I don’t consciously remember why I should stop at a stop sign doesn’t make it any less important!)

The continuing education offered at the annual conference is usually timely and applica-

ble. It tends not to focus on the specialist minutiae seen at other meetings, rather it does an excellent job of providing good quality continuing education to general practice veterinarians who make up the vast majority of the SVMA membership.

I encourage all veterinarians and technicians employed at our hospital, including myself, to attend major conferences at least annually, stay current on the latest standard of care and regularly review free digital journals/articles, such as Clinician’s Brief. The hospital also provides membership to VIN and maintains an up to date reference library. Practical focused courses have also been a great way to rejuvenate our skills and expand

our services. We have monthly lunch and learns where our reps come in and provide a one hour CE to all staff, in addition to occasionally our vets provide our own internal CE to staff on certain topics such as blood transfusions, restraint, etc.

Since day one I have made sure that we pass our accreditations with flying colours; it is a source of pride that my hospital follows to the letter all laws, bylaws and regulations. (We are also very proud to be one of the small percentage of veterinary clinics in North America to have voluntarily put forth the effort and work required in earning and maintaining our AAHA accreditation).

## 7 LOOK TO THE FUTURE

**P**lan ahead: set 1-year, 5-year and 10-year goals. Keep these in writing and set a plan to try get to where you want to be. Don’t just sit back and see what happens. Take control!

We have always spent a lot of time having various people come to the practice either on volunteer, practicum, or summer student programs. We have hosted many high school students as part of work experience programs or gaining hours for application to tech schools. Every year we host at least one and sometimes two RVT practicum students and try most years to hire a third year vet student to gain practical experience. These

students in many cases have gone on to become valued employees in our practice and are an excellent networking cog when it comes to recruiting. As a partnership, we have always made it clear to associate veterinarians that future partnership is always a possibility if desired.

We have always invested in state of the art medical equipment, even if detrimental to my own income. Our recent acquisition, a CT scanner, has proven to be a wonderful tool in helping our patients. Furthermore, through our renovations and expansions, in addition to being mindful of practicality and efficiency, we have also consid-

ered the comfort of our staff and clients by providing a modern, comfortable and welcoming atmosphere.

Participation in the training and mentorship of future veterinarians is a new endeavour for us. This summer we have accepted six- 3rd year veterinary students from the WCVN as part of their externship program. These students will work with us from 2 to 4 weeks at a time. This undertaking has been a refreshing, rewarding and enjoyable experience for all our veterinarians, staff, and from the students themselves! We were pleased to be able to offer them our in clinic living quarters as well.

## 8 HAVE FUN!

**W**e tend to spend a lot of time with the people we work with, so we strive to make the work atmosphere enjoyable and to offer times outside of work to get together socially if people

want to. It can be something as simple as firing up the BBQ in the summer to have burgers for lunch up to providing an enjoyable elegant Christmas staff party.

Take time for yourself! Plan that

holiday you want and deserve. Make time for your spouse, kids, parents and friends. The key is planning and making work-life balance happen. It’s fun and fulfilling!



# GREAT FEEDBACK ON THE GROUP HEALTH PLAN

All SVMA members know about the new Group Health and Benefits Plan (GHP) that launched March 1st of this year. Many individuals and practices signed up for the GHP early on, and more enrolments come in to our office all the time.

So far, the GHP is rolling out wonderfully with only good feedback being returned. Here are some comments from GHP users:

*“We have been really happy with the coverage so far! Prior to coverage, my receptionist got a Twin Rix vaccine that cost \$80. After coverage, she went for her booster and it was totally covered. Her pharmacist was shocked as they don't generally see drug plans cover this vaccine and was wondering where she got such awesome coverage!”*

*“My experience with our plan has been excellent so far. The app is very easy to use and being able to scan receipts right there is great. Direct billing with the pharmacy is perfect.”*

*“I have not taken complete advantage of it yet, but it is much better than the grief [my old provider] gave me. The fact that it covers some of my husband's medical expenses is a bonus.”*

*“My family has had some dental work done recently as well, and between this plan and my husband's, we have yet to pay for anything dental related. Also, prescriptions that had been declined before because of previous history are now covered. We are really happy.”*

## GROUP HEALTH AND BENEFITS PLAN

update

# OTHER PLANS MAY NOT BE WHAT THEY SEEM

Some Association plans that promise large group stability and shared rates are not what they seem. It's been known to happen that a business that's part of a so-called 'association' plan can get hit with a significant premium increase at renewal time, to that company alone, because of a high claim history.

We want to assure everyone that the SVMA Group Health Plan will not and cannot do that. Rates for all practice classifications are the same for everyone. No practice or individual member will ever be singled out with an increase in premiums.

For more information, visit [www.svma.sk.ca](http://www.svma.sk.ca) /Member's Side or contact Ken Dornan 306-261-6965 or Don Cole 306-270-6446.



*“Mr Duffy lived a short distance from his body.” This famous line from James Joyce's The Dubliners is an accurate description for how many people live their lives – with the mind disconnected from the body. In academia, we even joke that our bodies are simply means of getting our heads to more committee meetings!*

### EMBODIMENT

Descartes famously stated, “I think, therefore I am”, solidifying a dualism of “mind” versus “body” that had started in ancient Greece, was endorsed by Christianity, and became “common sense” to the philosophers of the Enlightenment.<sup>1</sup> Descartes also said, “There is nothing included in the concept of the body that belongs to the mind, and nothing in that of the mind that belongs to the body.” These deep-seated assumptions about both the separation of mind and body and the primacy of mind over body remained in place in religion, society and academia for hundreds of years.

But modern neuroscience now shows that we think not just with our minds, but with our whole bodies. In Descartes' Error: Emotion, Reason, and the Human Brain, the neurologist António Damásio argued that it is wrong to assert that only minds think: “the mind is embodied, in the full sense of the term, not just embrained”. This radical change in thinking has led to the research field of Embodied Cognition. Researchers in this area are exploring a complex relationship between the bodily expression of emotion and the way that emotional information is processed<sup>2</sup>



THE QUESTIONS

My personal doorway into the world of mindfulness training and teaching was through major depression. Mindfulness practices were effective in relieving my last episode of depression and preventing depression relapse. Because of my veterinary medical background, I am profoundly interested in “how” mindfulness works with the relationship between mind and body. I have investigated and sought (in an embodied way) to grasp an understanding of the mechanisms by asking myself these questions:

- How does paying attention to the toes of my left foot alleviate my depression?
- How does following the breath sensation lead to metacognition when negative thoughts arise about my self-worth?
- Why must I push myself to activity to improve my mood and not wait for my mood to improve to initiate activity?

SOMATIC ATTENTION

Mindfulness training (MT) results in numerous benefits for psychological disorders such as depression, anxiety, obsessive-compulsive disorder, ADHD, drug and alcohol addiction, overeating, and physical disorders such as chronic pain and skin disorders. Numerous behavioral and neural mechanisms have been proposed to explain the positive outcomes associated with MT.<sup>3-8</sup> In all MT programs I have investigated, the majority of the training involves embodied attention practices; referred to by neuroscientists as somatic attention. Somatic attention practices teach students to directly feel when the mind has wandered from the target of focus and to relate the fluctuations of body and breath sensations to the arising and passing of thoughts, feelings and emotions. This cultivates metacognition, a decoupling of “thoughts” from the “thinker”, and allows the student to see thoughts as mental events rather than as facts. Metacognition appears to be the grand mechanism of MT efficacy; monitoring moment by moment experi-

ence allows someone like me to step back from distressing thoughts and feelings and see them as transient rather than getting caught in rumination and negative thought patterns.<sup>3</sup> But how do we get from focusing on the breath or our toes to relief from depression? A glimpse into the mechanism was

“Heightened awareness of body sensations, postures and movements enables me to recognize my whole mind/body reactions in stressful situations and allows me to take proactive action.”

done using functional magnetic resonance imaging (fMRI) to evaluate the effects of an 8 week MT course.<sup>9</sup>

The study revealed that there are two different brain networks that are in competition for self-reference. When one is activated, the other is inactivated. Network 1 is the lateral prefrontal cortex network. When you pay attention to a sensory stimulus at a high level of detail in the present moment, you are exercising this network.

Network 2 is the medial prefrontal cortex network that controls “rumination” (rehearsing the future/rehashing the past) and coordinates self-judgment. Everyone alternates between network 1 and 2 thinking, but people with excessive activation of Network 2 are more likely to agree with statements such as “I spend a great deal of time thinking back over my embarrassing or disappointing moments.”

Rumination is a feature of depression<sup>10</sup> and reduction in rumination is associated with successful remission of depression.<sup>11</sup> Subtle awareness of body sensations in MT activates Network 1 while deactivating Network 2. The authors of the fMRI study concluded that MT in somatic attention cultivates a distinct experiential mode in which thoughts, feelings and bodily sensations are viewed less as being “good” or “bad” or integral to the “self” and treated more as transient mental events that can be simply observed.

In the MT practices such as attention to the breath and the body scan, specific localized somatosensory attention is emphasized (e.g., noticing where you feel the breath most vividly, noticing any and all sensations in the toes of the left foot). But initially, most people cannot detect their individual toes in the way that they can detect their individual fingers. So why can’t you sense your toes?

The body receives vast amounts of sensory input on a continuous basis. High order cognitive processes, including selective attention and working memory capacity, rely on our capacity to focus on relevant sensory informational input and screen out irrelevant information. Without such filtering, the flood of sensory information would overwhelm our cognitive abilities (which is what it is like to be autistic). All body sensations have to go through the thalamus to the cortex. So the thalamus acts as a “gate keeper” to prevent sensory overload of the cortex. About 85% of the input from your environment never even registers in your attention, because the thalamus determines what is important for you to focus on at any given moment. As an example of this filtering ability, while reading this essay you are probably not noticing the sensation of your buttocks on the chair you are sitting in even though the body is continuously registering the contact – that is until you just read this sentence!

So it is the thalamocortical neurons that control what sensory input reaches the ce-

rebral cortex. In the cortex, there is a “map” of your body; famously depicted by the Canadian neuroscientist Wilder Penfield.

The reason for the distorted appearance of the body parts in the map is that the amount of cerebral cortex devoted to a given body region is proportional to the density of the nerve supply to that region, not to its physical size. Penfield’s somatosensory cortical map shows that for the average person much more sensory input comes from the fingers than the toes, so it’s not surprising that it is difficult for most people to sense their toes when first doing the body scan.

Recent work from the neuroscience laboratory of Dr Catherine Kerr using magnetoencephalography shows that the cortical map is controlled by an electrical current known as the alpha rhythm.<sup>12</sup> Where the oscillations of the alpha rhythm are small, that area of the cortex is activated. Where the oscillations of the alpha rhythm are large, that area of the cortex is shut off. In essence, a large alpha rhythm turns down the “volume knob” on sensation in that area.<sup>12</sup> There is increasing evidence that cortical maps exhibit neuroplasticity and can change with physical changes (e.g., loss of one’s hands will decrease the map area for hands and the area for feet will increase if they are used in the place of the hands) as well as sensory attentional training.<sup>13</sup>

Kerr and coworkers were able to show that after MT, subjects’ neuronal response to a cue to attend toward or away from the left index finger was significantly faster and greater than that of the control group, with MT practitioners performing better in resetting their sensory filters in anticipation of a touch stimulus.<sup>12</sup> Alpha rhythms in other sensory systems in the cortex (e.g., visual and auditory systems) appear to follow the same general principles. By repeatedly engaging and disengaging alpha rhythms across the body map, we are learning to directly modulate them.

Over an MT course, the skills learned during the somatic attention practices begin

to be applied to mental events such as thoughts, feelings and emotions. With practice, we learn to control the flow of information through the brain. Attentional resources are then available to filter distractions and attend to moment by moment demands of daily life. Controlling the “volume knob” of the alpha rhythm associated with specific parts of the body generalizes to the rest of thalamocortical interactions and appears to explain how mindfulness meditators achieve greater control over working memory and more easily regulate their emotions and thoughts. This mechanism is consistent with the studies that show structural changes in the cortex after MT,<sup>6,14</sup> and with studies that correlate MT with enhanced attention and reduced errors in tests of visual selective attention<sup>15</sup> and improved working memory capacity.<sup>16</sup> Therefore, MT that focuses on somatic attention teaches you to have better control over the editing function of your thalamus, giving you better control of the “volume knob” of the alpha rhythm as you learn to feel and control your own cortical rhythms. That is how mindfulness practitioners are able to decrease negative ruminative memories or associations by attending to a body sensation such as the breath.

EMBODYING EMOTION

The clinical benefits of MT have been well established for the treatment of depression and prevention of depression relapse. The best known MT for depression is Mindfulness Based Cognitive Therapy (MBCT).<sup>17-22</sup> Cognitively, MBCT’s efficacy is attributed to developing the ability, during times of potential relapse, to recognize and disengage from ruminative, negative thoughts. Kerr’s work demonstrates the neurophysiological method of preventing or treating depression by MT enhanced control of cortical alpha rhythms. However, embodied cognition also plays an important role in depression, in that sensory input in a bodily format makes a direct contribution to emotional states. So while depression is thought of as a mental

disorder, it manifests itself in the body. In what is known as the “depressive interlock configuration”, bodily and cognitive feedback loops become locked into a self-perpetuating configuration that maintains depression.<sup>23</sup> For example, when cognitive (context of the situation) and sensory (proprioceptive) information are interlocked, then a person will feel sad or hopeless rather than just think about sadness or hopelessness.

It is now recognized that physical body position and movement can change the way that you think, the conclusions you draw, and the decisions you make.<sup>2</sup> This relationship between body and emotion has been explored in a number of studies. One of the first to show the relationship was a study that required participants to hold a pen in their teeth, which causes contraction of the zygomaticus muscles – the muscles involved in smiling.

Participants with the pen-in-teeth rated humorous cartoon as funnier than people holding a pen just with their lips, which inhibits the muscles of smiling.<sup>24</sup> There are also a number of studies that have investigated the gait patterns of clinically depressed patients. People suffering from depression walk slower, take smaller steps, have smaller arm swings and have more lateral sway to the upper body with reduced vertical up and down movement.<sup>23,25,26</sup> Other studies demonstrate the effect of posture, in that a slumped versus upright sitting posture affects levels of depression and recall of positive or negative thoughts.<sup>27,28</sup> Depressed people show perceptual and attentional bias for sad faces and bias against positive faces, resulting in an impaired ability to read emotions during social encounters.<sup>29-31</sup> This impairment can interfere with a depressed person’s ability to perceive and experience social support.

Interoception has also been identified as an important mechanism facilitating cognitive and emotional regulation in mindfulness.<sup>32</sup> Interoception is the perception of internal visceral sensations such as the

REFERENCES

1. Claxton G, Lucas B, Webster R. Bodies of Knowledge: University of Winchester, 2010.

2. Niedenthal PM. Embodying emotion. *Science* 2007;316:1002-1005.

3. Shapiro SL, Carlson LE, Astin JA, et al. Mechanisms of mindfulness. *J Clin Psychol* 2006;62:373-386.

4. Carmody J, Baer RA, E LBL, et al. An empirical study of the mechanisms of mindfulness in a mindfulness-based stress reduction program. *J Clin Psychol* 2009;65:613-626.

5. Berkovich-Ohana A, Glicksohn J, Goldstein A. Mindfulness-in-

duced changes in gamma band activity - Implications for the default mode network, self-reference and attention. *Clin Neurophysiol* 2012;123:700-710.

6. Farb NA, Segal ZV, Anderson AK. Mindfulness meditation training alters cortical representations of interoceptive attention. *Soc Cogn Affect Neurosci* 2013;8:15-26.

7. Holzel BK, Hoge EA, Greve DN, et al. Neural mechanisms of symptom improvements in generalized anxiety disorder following mindfulness training. *Neuroimage Clin* 2013;2:448-458.

8. Zeidan F, Martucci KT, Kraft RA,

et al. Brain mechanisms supporting the modulation of pain by mindfulness meditation. *J Neurosci* 2011;31:5540-5548.

9. Farb NA, Segal ZV, Mayberg H, et al. Attending to the present: mindfulness meditation reveals distinct neural modes of self-reference. *Soc Cogn Affect Neurosci* 2007;2:313-322.

10. Nolen-Hoeksema S, Morrow J. A prospective study of depression and posttraumatic stress symptoms after a natural disaster: the 1989 Loma Prieta Earthquake. *J Pers Soc Psychol* 1991;61:115-121.

11. Querstet D, Cropley M. Assessing treatments used to reduce

rumination and/or worry: a systematic review. *Clin Psychol Rev* 2013;33:996-1009.

12. Kerr CE, Jones SR, Wan Q, et al. Effects of mindfulness meditation training on anticipatory alpha modulation in primary somatosensory cortex. *Brain Res Bull* 2011;85:96-103.

13. Kerr CE, Shaw JR, Wasserman RH, et al. Tactile acuity in experienced Tai Chi practitioners: evidence for use dependent plasticity as an effect of sensory-attentional training. *Exp Brain Res* 2008;188:317-322.

14. Holzel BK, Carmody J, Vangel M, et al. Mindfulness practice leads to increases in regional

brain gray matter density. *Psychiatry Res* 2011;191:36-43.

15. Semple R. Does Mindfulness Meditation Enhance Attention? A Randomized Controlled Trial. *Mindfulness* 2010;1:121-130.

16. Jha AP, Stanley EA, Kiyonaga A, et al. Examining the protective effects of mindfulness training on working memory capacity and affective experience. *Emotion* 2010;10:54-64.

17. Munshi K, Eisendrath S, Delucchi K. Preliminary long-term follow-up of Mindfulness-based cognitive therapy-induced remission of depression. *Mindfulness (N Y)* 2013;4:354-361.

18. Kerr CE, Sacchet MD, Lazar SW, et al. Mindfulness starts with the body: somatosensory attention and top-down modulation of cortical alpha rhythms in mindfulness meditation. *Front Hum Neurosci* 2013;7:12.

19. Hamidian S, Omid A, Mousavinasab SM, et al. Comparison of the Effect of Mindfulness-based Cognitive Therapy Accompanied by Pharmacotherapy With Pharmacotherapy Alone in Treating Dys-thymic Patients. *Iran Red Crescent Med J* 2013;15:239-244.

20. van Vugt MK, Hitchcock P, Shahar B, et al. The effects of mindfulness-based cognitive therapy on affective memory recall dynamics in depression: a mechanistic model of rumination. *Front Hum Neurosci* 2012;6:257.

21. Marchand WR. Mindfulness-based stress reduction, mindfulness-based cognitive therapy, and Zen meditation for depression, anxiety, pain, and psychological distress. *J Psychiatr Pract* 2012;18:233-252.

22. Michalak J, Heidenreich T, Meibert P, et al. Mindfulness predicts relapse/recurrence in major depressive disorder after mindfulness-based cognitive therapy. *J Nerv Ment Dis* 2008;196:630-633.

23. Michalak J, Troje NF, Fischer J, et al. Embodiment of sadness and depression--gait patterns associated with dysphoric mood. *Psychosom Med* 2009;71:580-587.

24. Strack F, Martin LL, Stepper S. Inhibiting and facilitating conditions of the human smile: a nonobtrusive test of the facial

feedback hypothesis. *J Pers Soc Psychol* 1988;54:768-777.

25. Sloman L, Berridge M, Homatidis S, et al. Gait patterns of depressed patients and normal subjects. *Am J Psychiatry* 1982;139:94-97.

26. Sloman L, Pierrynowski M, Berridge M, et al. Mood, depressive illness and gait patterns. *Can J Psychiatry* 1987;32:190-193.

27. Riskind JH. They stoop to conquer: Guiding and self-regulatory functions of physical posture after success and failure. *Journal of Personality and Social Psychology* 1984;47:479-493.

28. Wilson VE, Peper E. The effects of upright and slumped postures on the recall of positive and negative thoughts. *Appl Psychophysiol Biofeedback* 2004;29:189-195.

29. Rock PL, Roiser JP, Riedel WJ, et al. Cognitive impairment in depression: a systematic review and meta-analysis. *Psychol Med* 2013;1-12.

30. Bistricky SL, Ingram RE, Atchley RA. Facial affect processing and depression susceptibility: Cognitive biases and cognitive neuroscience. *Psychological Bulletin* 2011;137:998-1028.

31. Goeleven E, De Raedt R, Baert S, et al. Deficient inhibition of emotional information in depression. *J Affect Disord* 2006;93:149-157.

32. Hölzel BK, Lazar SW, Gard T, et al. How Does Mindfulness Meditation Work? Proposing Mechanisms of Action From a Conceptual and Neural Perspective. *Perspectives on Psychological Science* 2011;6:537-559.



heartbeat and sensations of breathing that are often linked with emotions. Enhanced interoception is thought to facilitate understanding and processing of emotional reactions to external stimuli and events. MT teaches you how to engage emotion-laden sensations in the chest, throat and stomach without being flooded by emotion. By learning to shift attention with equanimity across both challenging and non-challenging body sensations, students learn to “de-bias” their attention to emotion-laden sensations. This regulatory learning enables mindfulness practitioners to work with and be present to difficult emotional experiences.

### Conclusions

Research in MT associates the ability to stay mindfully in contact with the body with less rumination and fewer depressive episodes and improves accurate perception of emotional facial expressions. With MT, increasing awareness of the interaction of body states with cognitive and emotional processes as-

sists people in recognizing and disengaging from negative thought processes but also in recognizing and disengaging from negative body patterns (e.g., posture or movement patterns) and internal sensations (e.g., breathing patterns) that escalate negative emotional states.

So what does that mean for how mindfulness works for me? For relief of a depressed state, bringing my attention to body sensations by means of a body scan or breathing meditation shifts my neural circuits out of the medial prefrontal cortex network that likes to perpetuate rumination and self-judgment into the somatic attention network of the lateral prefrontal cortex. It is simply impossible for my mind to obsess on why I always say or do the wrong thing when it is busy noticing the toes of my left foot or the flow of air across my upper lip. This then generalizes across the cortical functions and I am able to see that thoughts, feelings and emotions arise, linger and pass away just like body sensations. Like a mindfulness “mus-

cle”, practice improves my ability to do this mental shifting and control my own cortical rhythms.

In addition, the heightened awareness of my own body sensations, postures and movements enable me to recognize whole mind/body reactions to situations and allows me to take proactive action before a depressed mood can take hold. Before I am cognitively aware of stress or negative emotions, I can better perceive their bodily effects (e.g., clenching of my teeth; rapid and shallow breathing; slumped posture; frowning). Attending to these bodily manifestations, I can adjust my posture, walk faster, take a deep breath, relax my jaw and smile – and completely change my emotional and cognitive perspective on the situation. I can better look for and perceive the emotional support shown in the facial expressions of the people that love me. And I can get myself to the gym or out for a run even when I don’t feel like exercising, knowing that I will soon be glad that I did.



## VETERINARIAN'S DOG IMPORTATION CHECKLIST

Points to discuss before or after a client imports a dog(s) into Canada



### Before a decision is made to import:

- Imported dogs may carry diseases, which are uncommon or exotic to Canada.
  - o These diseases may be transmissible to other animals and/or people (i.e. [zoonotic](#)).
  - o Some diseases may not be curable (e.g. leishmaniasis).
- Imported dogs may have unknown and unresolvable behavioural issues.
- Transport can be lengthy and stressful and increase disease susceptibility.
- Importing dogs means less likelihood that local dogs will be adopted.

### Before dogs enter Canada:

- Examination by a qualified veterinarian in the country of origin.
- Rabies vaccination (as required by the [Government of Canada](#)).
- Other core [vaccinations](#).
- [Deworming](#), including tapeworm.
- Treatment for external parasites (e.g. [fleas](#) and [ticks](#)).
- [Heartworm](#) testing.
- Tests for diseases that may be present in country of origin, but not present or uncommon in Canada (e.g. Leishmania in the Mediterranean basin and South America, Brucella canis in US midwest).

### After dogs enter Canada:

- Quarantine dogs for 30 days (minimum 14 days) in a house or a facility away from other animals and high-risk people (e.g. young children, elderly, compromised immune systems).
- Monitor closely for signs of any illness and consult a veterinarian as needed.
  - o [Rabies](#) risk may persist for up to six months.
  - o Culture suspected bacterial infections due to risk of multi-drug resistant organisms.
- Examination by a veterinarian as soon as possible (even before going home).
- Repeat vaccinations or tests as needed.
- Behavioural assessment.
- Repeat heartworm test after six months.
- [Spay](#) or [neuter](#).

canadianveterinarians.net

This and other useful information for clients is available for download from the SVMA website, as well as in printed form from the SVMA office.



# Animal Health Perspectives

## WeCAHN – A Vision for a Collaborative, Comprehensive Animal Health Intelligence Network in Western Canada

By: Carl Johnson, CEO, Prairie Diagnostic Services, Inc.

Early warning of endemic disease threats, increasing zoonotic disease pressure, and animal and public health interests in general all stand to benefit from having a comprehensive inter-laboratory surveillance system across the western provinces. Enter “WeCAHN” – the Western Canadian Animal Health Network!

The vision for WeCAHN was an outcome of a meeting amongst the Canadian Animal Health Surveillance Network (CAHSN) Laboratories in February of this year. Representatives of CAHSN Labs, CFIA and interested veterinary epidemiologists from across Canada met in Vancouver to re-envision the future of animal disease surveillance. Numerous western Canadian initiatives and well-intended, but under-supported efforts, have been made in the past. Species-specific surveillance (swine, beef) programs, funded in part by producer associations, have been particularly successful but are limited in scope. In the western provinces, CAHSN itself has also had a fledgling surveillance program collecting data from livestock and poultry submissions from western laboratories enabling the tracking of disease incidence in the four western provinces. The existing CAHSN network has no funding, no dedicated resources and suffers from infrastructure



From: Lees, W., Johnson, C., Trokhymchuk, A., “Building a Collaborative Regional Animal Health Intelligence Network in Western Canada”, presented at the 2018 CAHLN Annual Meeting, June 10-13, Winnipeg, MB

limitations. We can do better than this in western Canada!

The Ontario Animal Health Network (OAHN) and the Réseau D'Alerte et D'Information Zoosanitaire (RAIZO) system in Quebec are well designed, comprehensive animal disease surveillance programs funded provincially. There is dedicated infrastructure and support, and active engagement from animal health stakeholders including veterinary practitioners and animal agriculture interests. In western Canada, the Canada-West Swine Health Intelligence Network (CWSHIN) is another successful model to learn from as we envision a more comprehensive and sustainable animal health intelligence network designed to meet the needs of animal agriculture and the veterinary profession in

western Canada.

To be sustainable, WeCAHN needs dedicated funding, expertise and effective Laboratory Information Management Systems (LIMS) at contributing Labs. The vision as presented by Dr. Wayne Lees in his plenary presentation at the Canadian Animal Health Laboratory Network (CAHLN) Annual Meeting in Winnipeg in June, is to design an animal health intelligence network amongst the western provincial laboratories covering more than just swine health, selected beef cattle operations or be limited by provincial borders.

Western Canadian veterinary diagnostic labs have a treasure trove of test results and syndromic disease information from all animal species. The first challenge is mining this data in

### WHAT'S INSIDE

- 1 WeCAHN – A Vision for a Collaborative, Comprehensive Animal Health Intelligence Network in Western Canada
- 2 Ocular Fluid Submissions in Toxicology
- 3 Rodenticide Poisonings in Western Canada
- 3 SNAP 4DX test in horses
- 4 Congratulations!
- 4 Dr. Chris Wojnarowicz Retires

an efficient and timely manner, but also protecting premises and owner privacy. Efficient LIMS infrastructure at each laboratory setting can accomplish this and more, and can do so in near real-time speed. Rapid, effective early warning alerts when facing an endemic disease outbreak is extremely valuable information to have in protecting animal agriculture in western Canada. Furthermore, being able to routinely document a “disease free”, high health status of Canadian herds and flocks is critically important to Canada’s agricultural export interests.

Beyond the digital infrastructure needed, well-trained and dedicated veterinary epidemiologists, infectious disease experts and IT programming skills are needed to ensure not only the integrity of the data, but also to have data trends reviewed and communicated effectively to stakeholders. The importance of clinical interpretation and

Continues on Page 2



From Page 1

follow-on communication of findings, helps elevate a data-rich surveillance system like this to a truly meaningful animal health intelligence network.

Building relationships amongst stakeholders is the hidden benefit, whether they be practicing veterinarians, subject matter experts in academia, animal agriculture specialists in government service or decision-makers in the animal agriculture and health industries. What better than having relationships built through engagement over animal

health information sharing, when there is an urgent need to respond to an impending disease threat? Outbreak preparedness hopefully begins with early warnings, but efforts end successfully when there are timely decisions and bold actions that have a positive impact. Sound, contemporary animal health data along with efficient interpretation and communication is therefore critical. This does not happen, nor do things go well, when people are not effectively networked either!

The WeCAHN concept has great promise but needs

sustainable funding to become a reality. Contributing provincial laboratories individually do not have all the resources required to make this happen. While the IT infrastructure and epidemiologic expertise already exist in some labs, these resources are fully committed to achieving other lab objectives. To bring disease surveillance from a “side of the desk” effort, to become a fully supported and sustainable service, adequate funding is key. The best chance for success is a public-private funding model. Let’s bring all interested parties together, not only to benefit from access to important animal

health intelligence and the networking this creates, but also to share in its cost through grants or in-kind contributions. If done well, all stakeholders benefit and will see a return on their investment, as will western Canadian agriculture.

Keep an eye on this webpage for posting of the Proceedings from the 2018 CAHLN Annual Meeting (<http://cahln-rctlsa.com/actes-et-presentations-anterieurs/>). Dr. Lees’s plenary talk: “Building a Collaborative Regional Animal Health Intelligence Network in Western Canada”, is full of great information.

# Rodenticide Poisonings in Western Canada

By: Dr. Barry Blakley, Veterinary Toxicologist, WCVN.

Non-target poisonings with rodenticides continues to be a problem in a variety of animal species. Historically, strychnine was the most common agent involved in many instances. Reduced sales and more restrictive regulatory requirements have reduced non-target poisonings by more than 50%. The occurrence of poisonings with the anticoagulant rodenticides, in particular, the second generation products has increased substantially. With effective treatment options, many animals do survive poisoning episodes. Non-target poisoning with fluoroacetate and cholecalciferol are rarely encountered.

In recent years, a new single-dose rodenticide, bromethalin is now available. Many retail outlets carry this extremely potent and effective rodenticide. This neurotoxin is extremely toxic to non-target species such as dogs or cats. Bromethalin is rapidly absorbed and has a half-life at about 5-6 days. It is excreted primarily by biliary excretion. Treatment, may be, in part, focused on reducing biliary excretion. In spite of its rapid absorption, clinical manifestations are delayed for 10 hours to 3 days, depending upon the dose.

Bromethalin uncouples oxidative phosphorylation in the CNS resulting in reduced mitochondrial energy production (ATP), which ultimately impairs NA/K ATPase activity and sodium transport resulting in cerebral edema and increased CSF pressure. Clinical manifestations are observed at dosages of about 1.67mg/kg, BW. Death is observed in dogs at about 4.7 mg/kg, BW. Cats are more susceptible to

poisoning. Due to the delayed onset and development of cerebral edema, acute and chronic manifestations may be highly variable and dose-dependent. Acute poisoning is associated with hyper-excitability, muscle tremors, seizures, hind limb hyper-reflexia, mydriasis and CNS depression progressing to coma and death. Chronic poisoning is often more typical resulting in vomiting, depression, tremors, opisthotonus, nystagmus, abnormal posture, fore limb extensor rigidity, lateral recumbency and paresis.

Cerebral edema and spongy degeneration of white matter of the brain and spinal cord may be present. Diffuse vacuolation of white matter may also be evident. Clinically, increased CSF pressure and electroencephalogram activity may be detected. Bromethalin can be detected in the fat, brain and liver of affected animals. PDS does not currently run the analytical testing. If the animal is known to have been exposed, emetics may be helpful. The administration of mannitol to reduce cerebral edema and dexamethasone may

provide some improvement. Diazepam administration is often recommended. The daily administration of activated charcoal for several days will reduce enterohepatic recycling of bromethalin.

In spite of timely treatment, the prognosis is often guarded at best. Recovery, may require several weeks with prolonged anorexia. The non-specific manifestations of bromethalin poisoning in association with the poor response to treatment and the lack of confirmatory testing make this disease problem clinically challenging.

# Ocular Fluid Submissions in Toxicology

By: Dr. Barry Blakley, Veterinary Toxicologist, WCVN.

Prairie Diagnostic Services has the ability to analyze a variety of tissues, feed and fluid matrices for investigative purposes. Occasionally ocular fluid concentrations of agents such as metals like magnesium, potassium or sodium are comparable to respective plasma or serum concentrations. Analysis of vitreous humor or aqueous humor is possible. Normal values are often available.

After death, animals may not be found for several days. The ability to collect blood, liver or other tissue samples may be compromised during the autolytic process. Frequently, ocular fluid may remain “preserved” for a longer period of time and provide useful diagnostic information. In many instances, chemicals, metals, etc. may readily diffuse into the eye, but are unable to diffuse outwardly in a rapid fashion. Consequently, detection in ocular fluid may be possible.

Following death, metabolic processes, decomposition and bacterial growth may alter the presence of many agents in the blood or tissues. In the ocular fluid, many of these natural processes are delayed which may enhance the opportunity for detection.

The analysis of ocular fluid may be advantageous under certain physiological conditions with varying types of agents. Chemicals or minerals that are rapidly metabolized or denatured after death are potential candidates for analysis in ocular fluid. Small molecules or gases that are rapidly transported or diffuse across membranes are also possible agents that may be suitable for detection. Currently, PDS analyzes ocular fluid for nitrites. In dead animals, nitrites are readily oxidized by decomposition processes. These metabolic processes are significantly reduced in ocular fluid which will enhance

detection. Altered physiological states associated with renal failure, dehydration, etc. may enable detection of “ante-mortem” body concentrations in ocular fluid. Examples may include, many metals and urea. Other agents that potentially could be detected in ocular fluid may include gases such as ammonia, cyanide, hydrogen sulfide or nitrogen oxides gases. Feed additives such as urea or monensin, theoretically, could be detected. A variety of drugs, antibiotics, or insecticides with typically short half-lives and appropriate chemical characteristics could also be detected in ocular fluid.

In one recent case, the ocular fluid from a cow that died unexpectedly was evaluated for nitrites. Pathological examinations indicated the cow had inhaled an irritating gas. Further investigation determined the cow had been exposed to nitrogen oxide gases resulting in irritation, pulmonary

edema and death. The analysis of tissues for the gases is diagnostically a challenge. The nitrogen oxide gases are small molecules that rapidly penetrate all tissues including the eye. After death, the gases are rapidly released or metabolized in most tissues excluding the eye. In the “sheltered” environment in the eye, the nitrogen oxide gases are converted to nitrite. Detection of high concentrations of nitrite in the ocular fluid in the presence of lung damage due to irritation is consistent with a diagnosis of nitrogen oxide gas inhalation and acute death.

Ocular fluid analysis may have some useful application in the oil and gas industry. In some instances feed companies may also identify useful applications. Further development would be necessary to validate these diagnostic strategies for routine use. Currently, PDS only provides analysis for nitrites or minerals in ocular fluid.

# SNAP 4DX test in horses

By: Dale Godson, Microbiology Lab (Virology/Immunology), PDS

Because studies have shown some mixed results in using the SNAP 4Dx as a test for horses, our policy was to recommend referred-out tests over the SNAP test. However, I noticed in a recent case that IDEXX is now using the SNAP test as their method. Thus, I would recommend the following testing policy:

1. The SNAP 4Dx can be used in horses as an initial screening assay for both diseases.
2. If clients ask about testing options, referred-out tests are available for complementary testing or as follow up to the SNAP test result.

- Lyme disease: Multiplex antibody test (Cornell)

- Anaplasma: CBC with examination of blood smear, PCR (Idexx, Manitoba Veterinary Diagnostic Services Laboratory)

## Background

The SNAP® 4Dx® was successfully used to detect antibodies to *B. burgdorferi* and *A. phagocytophilum* in infected horses (Chandrashekar et al., 2008; Veronesi et al., 2014), but the test performed less well in a population of horses with a low prevalence of disease (Schvartz et al., 2015a; Schvartz et al., 2015b)

The SNAP® 4Dx® also compared favourably with the Cornell multiplex test for detection of antibodies to *B. burgdorferi* (Wagner et al., 2013)

References:

Chandrashekar, R., Daniluk, D., Moffitt, S., Lorentzen, L., Williams, J., 2008. Serologic Diagnosis of Equine Borreliosis: Evaluation of an In-Clinic Enzyme-Linked Immunosorbent Assay (SNAP (R) 4Dx (R)). *International Journal of Applied Research in Veterinary Medicine* 6, 145-150.

Schvartz, G., Epp, T., Burgess, H.J., Chilton, N.B., Lohmann, K.L., 2015a. Comparison between available serologic tests for detecting antibodies against *Anaplasma phagocytophilum* and *Borrelia burgdorferi* in horses in Canada. *Journal of Veterinary Diagnostic Investigation* 27, 540-546.

Schvartz, G., Epp, T., Burgess, H.J., Chilton, N.B., Pearl, D.L., Lohmann, K.L., 2015b. Seroprevalence of equine granulocytic anaplasmosis and Lyme borreliosis in Canada as determined by a point-of-care enzyme-linked immunosorbent assay (ELISA). *Can Vet J* 56, 575-580.

Veronesi, F., Passamonti, F., Moretti, A., Morganti, G., Vardi, D.M., Laus, F., Marenzoni, M.L., Spaterna, A., Coletti, M., Fioretti, D.P., 2014. Evaluation of the performance of a rapid enzyme-linked immunosorbent assay in the detection of *Anaplasma phagocytophilum* antibodies in horses. *Vector Borne Zoonotic Dis* 14, 317-323.

Wagner, B., Goodman, L.B., Rollins, A., Freer, H.S., 2013. Antibodies to OspC, OspF and C6 antigens as indicators for infection with *Borrelia burgdorferi* in horses. *Equine Veterinary Journal* 45, 533-537.



## Congratulations!

Dr. Yanyun Huang (PDS Veterinary Pathologist) won the prestigious Canadian Animal Health Laboratory Network Laboratorian of the Year Award for 2018. The award was presented to Yanyun at the gala banquet at the CAHLN Annual Meeting in Winnipeg (June 2018). Nominations come from across Canada and reflect: "Any scientific worker who has made a significant contribution to animal health laboratory medicine in Canada. A nominee might be an outstanding diagnostician, educator, researcher, mentor of future laboratorians, or other contributors to the field."

Yanyun is truly deserving of this recognition for a number of reasons: 1) diagnostic expertise



and heavy, diverse caseload (>1000 cases in 2017); 2) research (a recipient of 2 research grants totaling more than \$320K); 3) teaching and mentoring (PhD co-advisor, teaching

support for WCVN veterinary students and Department of Veterinary Pathology graduate students); 4) outreach (invited speaker at international and Western Canadian veterinary

conferences, co-author of 6 peer-reviewed papers, Canada West Swine Health Intelligence Network advisor); 5) business development initiative (built the business platform and network for remote diagnostic work-ups for clients in China), and 6) leadership contributions for our Diagnostic professional team and PDS Leadership Team. Please join me in congratulating Yanyun!

Presenting at the 2018 CAHLN Annual Meeting were: Anatoliy Trokhymchuk, Musangu Ngeleka, Yanyun Huang and Rambod Movasseghi. Also, Dr. Wayne Lees, a member of the PDS Board of Directors, presented on our vision for a Western Canadian Animal Health Intelligence Network (WeCAHN).

## Dr. Chris Wojnarowicz Retires



Dr. Chris Wojnarowicz retired from PDS at the end of May after 41 years in the veterinary profession. Chris obtained his DVM in 1977 from the University of Warsaw and practiced large animal medicine in Poland, the USA and Denmark. After immigrating to Canada in 1984, he worked as a veterinary pharmaceutical sales representative in

Saskatchewan for Rogar/STB Inc. and passed the NEB examination in 1987. Chris went on to join the Meat Hygiene Division of Agriculture Canada and remained in the federal force for ten years, initially in Winnipeg and then in Greater Vancouver. In 1997, Chris entered in the Master of Veterinary Science program in the Department of Veterinary Pathology at WCVN. He completed his residency in anatomic veterinary

pathology in 2000 and joined PDS, Saskatoon in July 2001. In 2006, he earned Poultry Board Certification. With his expertise in pathology, his broad professional background and a willingness to help whenever he could, Chris was a valued member of the pathology team at PDS and a valuable resource for all clients. We wish Chris and Barb all the best in this new phase of their lives. Szczęśliwa emerytura!!

### READERS' FEEDBACK

The **Animal Health Perspectives** editorial team (Dr. Moira Kerr, Brian Zwaan and Kathryn Tonita) invite readers' comment on material published in the newsletter or questions on material submitted by contributors.

Submit your comments or concerns to Dr. Moira Kerr (email: moira.kerr@pds.usask.ca) and they will be forwarded appropriately.

## VETERINARY CAREGIVERS need caring too

The veterinary profession is by nature hectic, emotionally demanding, and downright draining. It is very difficult to see helpless creatures suffering when it is our passion for animals that brought us to the profession of veterinary care in the first place. Unlike practitioners of human medicine, veterinarians and vet techs face constant scrutiny from our clients looking for justification for the costs of the medical services we provide to the animal community.

All of this pressure can build up and exact a toll on our "work- life balance". It is therefore essential that we be mindful of

the importance of self-care in the face of the often heavy demands of our professional lives before they get the better of us. But sometimes, we are already there, feeling overwhelmed and burnt out, without realizing how we got there, or worse, how to get back to feeling "normal".

If you are feeling burned out, at your wits' end or even depressed, please consider taking advantage of the counselling that is provided by your Association free of charge.

SVMA offers professional counselling to all of our member DVMs and RVTs. There is no waiting period for eligibility, and

the wellness plan covers four hours of professional mental health services annually.

**To make an appointment, call: Professional Psychologists & Counsellors (PPC) (306) 664-0000.**

PPC will ask for your license number, and will provide sourcing, referral and direct payment to a registered mental health professional.

At no time will the SVMA staff or members know the identity of any persons using this service.

**For more information and wellness resources, visit Resources and Information/Member Wellbeing on the SVMA website.**



**TERRY A. JACKSON, CPA Inc.**  
CHARTERED PROFESSIONAL ACCOUNTANT

**All About Veterinarians**  
*Consulting, Coaching, Valuations, Negotiations, Purchase / Sale*

**Terry A. Jackson, CPA, CGA**  
**Nika Dorofeyeva, CPA, CA**  
Phone: 604.939.2323      info@jandacga.com



**THERESA COLLINS-NELSON, AHT/VT**  
TERRITORY MANAGER - MANITOBA/SASK

**Email:** tcnelson@rafter8.ca      **Cell:** 204 771 1497  
**Toll Free:** 800 461 8615      **BUS:** 403 291 3640 Ext 23  
**Toll Free Fax:** 888 292 4548      **Fax:** 403 250 2703  
87 Skyline Cr NE, Calgary AB T2K 5X2



## report from the ministry of agriculture

Mikayla Waller, Summer Student, Animal Health Unit, Livestock Branch

# Disease Investigation Unit

The Western College of Veterinary Medicine (WCV) Disease Investigation Unit (DIU) is a partnership between the Saskatchewan Ministry of Agriculture and the WCV. This specialized unit has been operating in Saskatchewan for over 10 years. The DIU supports private veterinary practitioners who are faced with complex and unusual animal health situations.

Based out of the regional veterinary college, the DIU is able to draw upon on the knowledge and experience of a diverse group of veterinarians, researchers, and animal health specialists. This access provides Saskatchewan livestock producers and veterinarians with the ability to seek an expert opinion, and to receive financial assistance, on cases which are out of the ordinary or prove difficult to diagnose.

Provincially funded, the DIU is a valuable disease and animal health surveillance tool.

The unit's activities provide an opportunity for early response and reduced economic impact due to foreign animal disease, unusual animal health conditions, or food safety issues. The DIU program also serves to strengthen Saskatchewan's veterinary infrastructure, helping the province to continue to meet expectations set-out by the World Organization for Animal Health (Office International des Epizooties-OIE).

The DIU has taken on more than 160 cases since 2007, the majority of these cases involved cow-calf operations. This should come as no surprise, considering that beef is the largest livestock sector in Saskatchewan. Throughout the years, the DIU has also taken on cases involving sheep, goats, horses,

llamas, pigs, chickens, elk and bison. Statistically, the most common reasons for initiation of DIU investigations are unexplained cases of high infertility, undiagnosed disease, or high mortality rate. In terms of outcomes, the most common findings are related to management, nutrition, and toxicology. These cases are primarily solved through diagnostic testing conducted by Prairie Diagnostic Services Inc., located on the WCV campus.

The DIU program is also a significant resource for students. Many investigations involve large operations and require significant diagnostic testing; assistance from graduate students in Department of Large Animal Clinical Sciences and senior veterinary students provides unique learning opportunities, while also supporting the operation of the DIU unit. Students involved in DIU cases benefit directly and cases often reach a wider audience through classroom and educational presentations. Several DIU cases have evolved into larger research projects and some have become published journal articles.

The Saskatchewan Ministry of Agriculture sees the DIU as an integral disease surveillance tool and plans to provide \$60,000 annually for the next 5 years. For more information on Saskatchewan's DIU program please see the contact information below. 🐾

**WCV**  
**Large Animal Clinic**  
**306-966-7178**

**Dr John Campbell,**  
**Coordinator**  
**john.campbell@usask.ca**

**Dr Sarah Parker,**  
**Assistant Director**  
**sarah.parker@usask.ca**

**Go Solar!**  
**Save money and the planet,**  
**while saving your patients.**



**SkyFireEnergy**  
Solar Energy Systems  
WESTERN CANADA'S TRUSTED SOLAR PROVIDER

**SASKPOWER**  
**20% SOLAR REBATE**  
**AVAILABLE UNTIL**  
**NOV 2018**

**info@SkyFireEnergy.com | www.SkyFireEnergy.com | 1-87-SKYFIRE-1 | 306-952-6235**

# reflections on the Spring Veterinary Retreat

Sue Gauthier, Communications and Members Services Coordinator

**As I crested the hill above the Living Skies Retreat Centre, it was immediately obvious why this spectacular view has been drawing people here for 55 years. The facility, formerly known as St Michael's Retreat House, was built as a retreat centre for Franciscan monks in 1963. Over the years since then, untold numbers of religious and secular groups have come here to experience the quiet beauty of the Qu'Appelle Valley.**

This past April, four veterinary professionals, Drs Trisha Dowling, Lynne Sandmeyer and Kathy Keil plus Erin Wasson, WCV Veterinary Social Worker, teamed up to facilitate Saskatchewan's first veterinary mindfulness retreat, entitled Building Resiliency, Cultivating Compassion, and Putting Them 'Into Practice'. A diverse group of 24 attendees from Saskatchewan, Alberta and Manitoba (and myself) gathered together for 8 CE hours of mindfulness training plus meditative yoga over a 24 hour stretch from late Saturday afternoon to late Sunday afternoon. The time frame was meant to enable interested veterinary caregivers who had worked on Saturday to attend, and several did.

With its naturally lit chapel and modest sleeping quarters, Living Skies reflects its monastic origin. Modern touches like a private shower in each room make the facility more liveable for today's retreatant, but the Franciscan monks who built the centre knew

what they were doing when they faced the common area entirely with windows looking on to the lushness of the surrounding hills and forest. Hiking trails and a meditative labyrinth complete the setting.

The venue was unmatched, except possibly by the food. Homemade meals and snacks were delicious and plentiful, and Living Skies' signature cinnamon buns were beyond incredible. (Fortunately, we were able to get our hands on the recipe and share it with the group as a souvenir of our event.) I thought mindfulness training for our group of 24 attendees fit into the Living Skies setting beautifully.

Each facilitator presented a unique part of the mindfulness picture. Trisha Dowling introduced the neuroscience behind mindfulness practices and helped us understand why mindfulness has been so widely praised for its numerous benefits for psychological disorders such as depression, anxiety,

obsessive-compulsive disorder, ADHD, drug and alcohol addiction, overeating, and for physical disorders such as chronic pain and skin disorders.<sup>1</sup>

Erin Wasson led an exercise that enabled us to focus in on where in our bodies we tend to experience different emotions. On Sunday she led an interesting and revealing exercise about conflict styles.

Several relaxing meditation sessions and mindful movement exercises were guided by Kathy Keil. Lynne Sandmeyer and Trisha Dowling went into depth with cultivating compassion. Finally, a discussion on taking resilience and compassion back to the practice wrapped up the retreat.

Attendees were encouraged to relax and practice self-care at all times. Exploring the grounds and hiking the trails were popular on this, one of 2018's first really beautiful spring weekends. We wore nametags, but there were no titles or credentials- names only. There were no professional designations to get in the way of relating through the common experience of veterinary practice. There was also no 'personal disclosure' required. Most insights were internal, so people who weren't as comfortable sharing their thoughts could do all their reflecting privately and still enjoy the whole retreat experience.

#### References

1. The Mind-Body Connection Dr Trisha Dowling 2018

#### But as they say, don't take my word for it. Here's what attendees thought:

*"I absolutely loved it and would love to do it again. I thought it would be a nice little break for the weekend and a way to meet other like-minded people, but really it was so much more. I would absolutely recommend it to others."*

*"I like that you care about the wellbeing of veterinarians. Our profession is very emotionally demanding and being able to cope with these feelings is important."*

*The 'Mindfulness Team' is planning another veterinary retreat for the same weekend next year.*

*"The retreat was worthwhile and relevant. The material covered will be useful and applicable to our work environments. I did find it challenging to be open and vulnerable among our competitive peer group, but the facilitators did very well in encouraging us to be open-minded. Thanks to all of you!"*

*"The distinction between empathy and compassion is a very important one that I never much thought about before. The idea that we must also have compassion for ourselves is so very important yet seldom practised- it was good to have attention brought to this."*

*"This was a great experience. I would like to do more and would recommend it. Thank you."*

*"I see the importance of this in our industry and in everyday life as well. I would also recommend this to others as a way of taking care of our minds and bodies that I feel we miss out on most days."*

*"It was very rewarding to be able to feel more grounded in and aware of my body and what it is telling me. I believe practising this more will significantly help reduce a lot of the stress that I carry."*



from the wcvm

# An Update

from the dean

Dr Douglas Freeman  
Western College of Veterinary Medicine

**Accreditation:** The WCVM has successfully maintained its accreditation with the American Veterinary Medical Association's (AVMA) Council on Education (COE), following its comprehensive accreditation site visit in October 2017. In mid-April, the council confirmed the WCVM's status of "accredited with minor deficiencies," referring to items that have minimal or no effect on student learning or safety and are typically resolved within one year.

News of Alberta's withdrawal from the WCVM Interprovincial Agreement didn't affect the college's most recent accreditation, but as we continue to explore new opportunities, the COE will require updates on the status of the interprovincial partnership and college funding in the WCVM's annual interim reports.

Our WCVM team works hard to maintain our college's quality program, facilities and resources, so it's gratifying to receive external confirmation that our efforts are successful. Statistics collected since the last accreditation site visit in 2010 show that the WCVM is succeeding in its mission to serve as a western Canadian centre of veterinary education, research and clinical expertise. Examples include the following:

- WCVM students have consistently scored in the top 22 percent of all students globally taking the North American Veterinary Licensing Examination (NAVLE).
- Ninety-eight per cent of WCVM alumni who were surveyed two years after graduation felt prepared for their careers.
- Based on employer survey results, 85 per cent of respondents are either satisfied or

very satisfied with their WCVM-educated employees.

The COE's main goal is to assess whether a college meets accreditation standards so there is minimal feedback. However, the COE's final report did note several key programs and facilities at the college and across campus, including the WCVM's Indigenous engagement efforts as well as the new simulation centre and its co-operative relationship with other U of S health science colleges.

**AAHA accreditation:** In May, the WCVM Veterinary Medical Centre hosted an onsite evaluation as part of its regular accreditation process with the American Animal Hospital Association (AAHA). After a positive evaluation visit, the VMC's dual AAHA accreditation status for general practice and specialty practice was renewed. During her onsite visit, the AAHA consultant evaluated all aspects of the VMC's clinical services and programs for companion animal patients. To maintain accredited status, clinics must be re-evaluated every three years by AAHA veterinary experts who evaluate the practice on 900 standards of veterinary care.

**Gold medal performance:** When Dr Jessica Paravicini returned home to Vancouver Island after the University of Saskatchewan's Convocation in early June, the newly-minted veterinarian brought back more than memories of her graduation. Among her prized possessions was the WCVM's highest honour for graduating veterinarians — the WCVM Faculty Gold Medal. The award is annually presented to the graduating



WCVM Faculty Gold Medal recipient  
Dr Jessica Paravicini and Dr Douglas Freeman

student who has shown "the highest proficiency in the science and art of veterinary medicine" during the four-year DVM program.

Paravicini grew up on her family's acreage in Qualicum Beach, B.C., and before coming to Saskatoon in 2014, she earned a Bachelor of Science degree in biology at Vancouver Island University. Now practising at a small animal clinic on Vancouver Island, Paravicini may pursue a veterinary specialty in the future after spending a few years in general practice. Paravicini received her commemorative medal during the university's convocation exercises on June 7 where she graduated from the WCVM with "Great Distinction." Later that same day during the college's awards program, she received a \$3,000 prize for her academic achievements along with a Zoetis General Proficiency Award worth \$1,000.

Although classes are out, it's still a busy time at the college with various projects and activities. We wish everyone a great summer and invite you to stop in if your travels take you near Saskatoon! 🐾

## on campus at the wcvm

Joana Bruce

**H**ope everyone's summer is treating them well! We students are glad to be away from the classroom, that's for sure! The class of 2018 had their graduation on June 7th. Their day started with convocation, where they received their Doctor of Veterinary Medicine, followed by an awards banquet with brunch. By now, they have entered into the workforce as real-life veterinarians and I wish them all the best! As the class of 2018's chapter closes at the WCVM, the class of 2022's chapter into veterinary medicine is just beginning. I would like to welcome and congratulate the 78 new first year vet students from all over Western Canada.

Every summer, some of the second-year students (class of 2020) put together a team,

called Global Vets. These students fundraise all year to be able to go to different countries throughout the summer to help provide veterinary care to animals. This year, some of the teams have been to Thailand, South America and Africa. Many other students from Saskatchewan have been spending their summers working in rural parts of the province through the Summer Student Mentorship Program and the new Preceptorship Program.

The class of 2019 has already begun the journey of fourth year by participating in many summer externships around the world, working in clinics, and performing clinical rotations at the WCVM and other Canadian vet schools. As for me, I just participated in an externship in Fes, Morocco at the



American Fondouk. The American Fondouk is a non-governmental organization in Fes tailored to the working mules, donkeys and horses of Fes – it was an interesting experience and I saw very fascinating cases and learned a lot about equids!

As this is my last report as the SVMA student representative, thank you to all who have read my articles. One more year to graduation! 🐾

## Discipline Case Report

SVMA Discipline Committee

# RESULTS OF DISCIPLINE CASE 2016-04

**T**he Discipline Committee (DC) convened a hearing of Case #2016-04 Professional Conduct Committee vs Dr Tiffany Pomarenski on May 4, 2018. The report of the Professional Conduct Committee (PCC) had indicated there was evidence Dr Pomarenski may be guilty of professional misconduct based on information and a complaint the Committee had received.

### FINDINGS

With regard to Bylaw 22.8(a), Dr Pomarenski showed poor judgement in providing anaesthesia and attempting to reduce the hip luxation. Although the DC sympathized with the situation as presented, it did not relieve Dr Pomarenski of her obligation to meet the established standards of practice.

With regard to Bylaw 22.8(b), Dr Pomarenski failed to demonstrate adequate judgement in recognizing her practice limitations and referring to a qualified practitioner. With regard to Bylaw 22.8(c), Dr Pomarenski contravened the SVMA Code of Ethics.

With regard to Bylaw 22.8(s), Dr Pomarenski attempted to reduce the hip luxation under general anesthesia without proper monitoring and without the benefit of x-ray and failed to refer the client to a clinic with the proper diagnostic and gas monitoring facilities. By failing to do so, the DC determined Dr Pomarenski's actions to be unbecoming, improper, unprofessional or discreditable.

With regard to Bylaw 31.1, by not adhering to the limitations and standards of her ambulatory practice, the DC

determined that Dr Pomarenski was not practising veterinary medicine to the best of her ability.

With regard to Bylaw 31.6, by failing to refer and choosing to use a general anesthetic with the intent of manipulating the hip and without the benefit of radiographic diagnosis, it was deemed Dr Pomarenski was operating outside the scope of her practice.

With regard to Bylaw 31.10, Dr Pomarenski did not fulfill her legal obligations to her client and did not comply with the laws, Bylaws and regulations governing her actions.

With regard to Bylaw 31.14, by failing to refer and by attempting to reduce the hip luxation without the benefit of an x-ray Dr Pomarenski failed in her responsibility to provide her patient with the best possible

veterinary care.

With regard to Bylaw 33.7, Dr Pomarenski's breach of the SVMA Code of Ethics was evidence of unethical behaviour and was considered to be professional incompetence or professional misconduct.

### PENALTY

The Discipline Committee determined the penalty should be as follows:

1. A Letter of Reprimand;
2. No Fine; and
3. Pay to the SVMA all costs (\$42,649.24) related to the inquiry and hearing into the member's conduct by April 30, 2019. If the member fails to pay the amount owing by the due date, the member is to be suspended until the amount is paid in full.

FOR MORE WCVM NEWS, VISIT [WCVMTODAY.USASK.CA](http://WCVMTODAY.USASK.CA) OR FOLLOW @WCVMTODAY ON TWITTER OR FACEBOOK. YOU CAN ALWAYS CONTACT ME (306-966-7448; [DOUGLAS.FREEMAN@USASK.CA](mailto:DOUGLAS.FREEMAN@USASK.CA)) IF YOU HAVE QUESTIONS OR COMMENTS.



# 34th Annual Saskatchewan Association of Veterinary Technologists' Conference

## NOV 2-4 2018

SASKATOON INN  
SASKATOON SK

WELCOME RECEPTION  
TRADESHOW  
MARKETPLACE  
CONTINUING EDUCATION  
WET LABS  
ANNUAL GENERAL MEETING



TO REGISTER AND FOR MORE  
INFORMATION VISIT US AT  
[WWW.SAVT.CA](http://WWW.SAVT.CA)



## SAVT update

Breanne Barber, RVT  
SAVT President Elect

Summer has hit us hard here on the Prairies with constant thunderstorms, rain, heat and of course, the humidity!

SAVT has been busy "Facing the Future" for the upcoming conference which will be held November 2-4 in Saskatoon, SK. Registration is planning to open in September and we have a wide variety of speakers and wet labs to choose from.

The June SAVT meeting was held in person for those who were able to make it. It was a nice change from the monthly teleconference. The sunshine was enjoyed by all and we would like to thank Darlene Ford for being a such a fantastic hostess!

The SAVT Bylaw/Policy committee is working hard on updating our bylaws and policies for the upcoming AGM in November. This a time-consuming task and I applaud all the members of that committee for their hard work so far. The Continuing Education (CE) committee is developing new ways to create more CE opportunities for RVTs in rural communities so that they do not have to have the added

expense of travelling three or more hours to obtain CE. Having more CE options available will give the opportunity for more advancement in the workplace.

The Veterinary Technician Specialties (VTS)/Mentorship committee has created a list of Veterinary Technician National Exam (VTNE) preparation courses which can be found on the SAVT website. The 2nd year students helped out greatly by letting us know how the resources worked and if they were helpful in their VTNE preparation. As always, the committee is open to mentoring anyone who is struggling with the VTNE examination.

The Public Relations Committee (PR) has sent out proclamations to many major cities and organizations in the province to get them to declare October as National Veterinary Technician month. The PR committee has heard back from a few so far and have even been asked by some of the mayors to have a member present while they make the declaration. The SAVT is very excited to have such a wide presence for the month of October all over Saskatchewan.

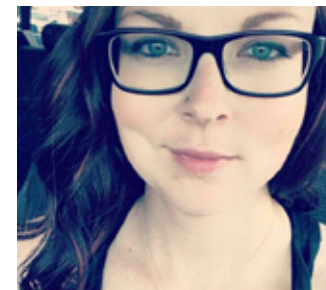
The SAVT just recently

celebrated our 34th birthday! This non-profit organization all started with a great group of women and has grown so much in the past 34 years.

All of the men and women in this organization should feel honoured, empowered, and be proud of who they are and what they can accomplish. We are facing the future with so many changes and new beginnings with this organization and I am so happy to embrace them with an open mind.

Every year we give an award to a graduate from each of the Veterinary Technician programs at Sask Polytech and Lakeland College who excels in academics, leadership, and growth of the profession. This year the awards went to Daniel Novacosky and Victoria Rude! Congratulations Daniel and Victoria, we wish you all the best in your future as RVT's!

A number of newly graduated technologists are writing their VTNEs and have applied for provisional memberships. We wish them all luck on their exams and their exciting new careers! 🐾





## CONGRATULATIONS



**Tessa Lydia Isabel Leaman** was born June 10, 2018. At 7 lb 9 oz and 21 inches, Tessa was definitely in a hurry - she came rushing into the world with only 8 minutes from hospital arrival to delivery. She'll keep us on our toes! Samuel, Wilson and Elizabeth love her, and our family of six is doing great!



**Terri receives CVMA presidential medallion from outgoing president, Dr Troye McPherson.**

Congratulations to **Dr Terri Chotowetz** of Saskatoon, who was inducted into the position of 2018-2019 President of the Canadian Veterinary Medical



Association (CVMA) at their AGM in July. SVMA is very proud that one of our excellent veterinarians will be representing Canada on the worldwide stage.

Congratulations to **Bernice Ruf, RVT**, recipient of the Canadian RVT of the Year Award. This award is



presented by the RVTTC and sponsored by Hills Pet Nutrition Canada. It is awarded to an RVT who exemplifies the definition of an outstanding individual in the profession of veterinary technology. Bernice has been recognized for her exemplary work in practice and with mentoring high school, vet tech and DVM students. Her passion is teaching others about the amazing world of veterinary technology and instilling a passion for the profession in her students.

## We Sadly Announce...

### DR DOUGLAS A SCHMEISER, SOM, QC

SVMA is very saddened to share the news of the passing of our dear friend Doug Schmeiser on April 28, 2018, at Royal University Hospital, Saskatoon, after a brief illness.

Doug was a legal advisor for the SVMA for many years. He served the Association with excellence and faithful dedication and was given an Honorary SVMA Membership in 2016, making him one of only two people ever to receive that honour.

Doug is lovingly remembered by his wife of 38 years, Irene (Ositis) Schmeiser; his brothers Percy (Louise) Schmeiser and family, James (Teresa) Schmeiser and family, and sister-in-law Larisa Ositis; children Mary Ellen (Darcy) Stann, Robert (Donna) Schmeiser (Robbie (Chelsea), Kaitlyn (Tim) Landeryou (great-granddaughter Lilia) and Matthew), Jamie (Vivian) Schmeiser (Peter, Sophia and Veronica), Gary (Janet) Schmeiser (Noah and Nathaniel), Peggy (Katrina) Schmeiser-Weggel (Samuel and Kata); daughter-in-law Phyllis Schmeiser (Stephanie); and numerous nieces and nephews in Canada, Australia, and elsewhere.



He was born in Bruno, SK, attended school there and went on to obtain his BA and then LLB with Great Distinction at the University of Saskatchewan in 1956. He received his LLM (University of Michigan)

and was admitted to the SK Bar in 1958 and later completed his Doctorate at the University of Michigan in 1963. He became a tenured professor in 1961, Dean 1974-77, and Professor Emeritus in 1995 at the College of Law, University of Saskatchewan. Other career accomplishments included authoring a number of legal textbooks, Chair of the Law Reform Commission of SK, President of the SK Bar Association, Constitutional Advisor to many Provincial and International Governments, and a prominent role in creation of the Canadian Constitution. He advised and lectured on legal, constitutional and judicial matters in The Maldives, Russia, Sudan, Zimbabwe, Tanzania, Ethiopia, Australia, China, Hong Kong, Japan, Ukraine and Latvia. For many years he served as Legal Assessor to the SK College of Physicians and Surgeons and advisor to the Saskatchewan Veterinary Medical Association.

Doug's interests and activities were many and varied. He loved working on and caring for the land, was an avid birder and fisherman, served as President of Nature Saskatchewan and as a Board Member of Nature Canada. He was a Diamond Life Master in Bridge. He also tried his hand at fiction with the novel, 'A Settling of Accounts', published in 2009. With his cherished wife Irene at his side, he was an accomplished traveller. Together, they explored and built many friendships around the world. He enjoyed time with family, especially his grandchildren.

Doug was a man of faith and strongly believed in building his church and community. He served as President and Campaign Chairman of the Saskatoon United Way, on the boards of St Paul's Hospital and Emmanuel Health, and numerous other committees and boards. He financially supported the causes he served, and also contributed to many scholarships and other foundations.

A Vigil of Prayer was held in May at St Thomas More College Chapel at the University of Saskatchewan, Saskatoon. The Mass of Christian burial was celebrated at Holy Spirit Roman Catholic Parish in Saskatoon. Dr Schmeiser was interred at Hillcrest Memorial Gardens, Saskatoon.

The family wishes to express its thanks to the Saskatoon Cancer Clinic, and in particular, the dedicated staff of the Oncology Ward of Royal University Hospital. Any donations in his name would be appreciated by Friendship Inn, Saskatoon Community Foundation, Hospice and Palliative Care at St Paul's Hospital Foundation, or a charity of your choice. Condolences may be left at [www.saskatoonfuneralhome.com](http://www.saskatoonfuneralhome.com).

### WE FONDLY REMEMBER

It is with great sadness that we announce the passing of Mrs Eldi Just at 88 years of age on June 16, 2018 with her family by her side.

Eldi was the only layperson to ever hold the position of SVMA registrar. She started her relationship with the profession early on when she worked in the Department of Bacteriology and Pathology at the Ontario Veterinary College, University of Ontario (now University of Guelph) during her husband's DVM studies there. Ken Just received his DVM in 1963, and Eldi was his office manager and surgical assistant for many years. The SVMA 'office' was fondly remembered by her sons, as it was also their dining room! Indeed, in the seventies, the SVMA didn't have a home yet.

The many stories from their veterinary life together are colourful and varied, from funny to sad, and always very interesting. Many a drug rep had lunch on her kitchen table in Melfort, the town where they had their first practice, Mohawk Animal Clinic. Later on, they built a small animal clinic in Yorkton: Ambassador Animal Clinic.

Eldi was always very understanding if I could not attend family events when I was "on duty" as she put it, because that was the norm back when she was a practising veterinarian's wife. She seldom saw her husband during calving season but she kept the clinic going and communicated with him via two way radio while he was on farm calls: "Ken! Mrs Smith is here with her dog with an ear infection! Do hurry up!"



**Former SVMA registrar Eldi Just with her husband, Dr Ken Just**

Mom fought a very aggressive form of a soft tissue sarcoma for a couple of years, and in the end opted for a medically assisted death. From her experience as a veterinarian's wife she felt she had the right to a peaceful and dignified death, just like the many animal patients she helped care for. She left this

world peacefully, surrounded by the love of the family she created. She leaves behind her three sons Murray (Marlene), Howard (Maria) and David (Allison) as well as 5 grandchildren and 6 great-grandchildren. She is pre-deceased by her husband Ken and one great-grandchild.

*Respectfully and fondly submitted by Eldi's daughter-in-law, Dr Maria Just.*

### WITH DEEP SADNESS

It was with deep sadness that the family of Nora Lee Cochrane of Saskatoon, formerly of Melville, announced her passing on Saturday, June 23 at the age of 63. Nora Cochrane, RVT, practiced for 40 years in Melville at the side of her husband Dale Cochrane, DVM.

Nora Lee was born on October 4, 1954 in Port Colborne, Ontario to Irving and Evelyn (Puttick) Knoll. She attended Steele Street Public School and Port Coborne High School. Nora Lee moved with her parents to Saskatoon in 1973 where she went to Kelsey College and graduated as an Animal Health Technologist in 1975. Nora Lee met her future

husband Dale at the Veterinary College in 1975. They were united in marriage on August 28, 1976 at Augustana Lutheran Church in Saskatoon. She worked at the Calgary North Veterinary Clinic for a year, then worked side by side with Dale at the Melville Veterinary Clinic for 41 years.

Nora Lee and Dale were blessed with three sons, Kelly, Kevin and Craig. She was the proud grandmother of six grandchildren, Liam, Errol, Natalie, Bodhi, Koby and Zara. She also raised numerous dogs, cats, bunnies, hamsters, potbellied pigs, lambs, horses, ponies, buffalo calf, turtle, and cattle. In June of 2017 Nora Lee and Dale retired and moved to Saskatoon to be closer to her family.

Nora Lee was a member of SVMA, SAVT, Good Shepherd Lutheran Church and the Royal Canadian Legion. Her love of music led her to be organist and pianist for Good Shepherd Lutheran Church. She was also a choir member and Cantata Director. Nora Lee enjoyed bowling, cross-country skiing, gardening, and horseback riding. Nora Lee had a great sense of humor and her laughter

followed her everywhere.

Nora Lee leaves to cherish her memory her beloved husband, Dale; her three sons Kelly (Lonee), Kevin (Melissa) and Craig (Kathy); her mother Evelyn; her brother David (Cathy).

Funeral

Service was held on Friday, June 29, 2018 from Good Shepherd Lutheran Church in Melville with Pastor Doug Schmirler officiating. Interment arrangements by Bailey's Funeral Home, Melville.



**Nora Lee Cochrane**





canadian veterinary medical association (CVMA)  
**ONE PROFESSION. ONE STRONG VOICE.**

CVMA strives to address issues of relevance to veterinarians across the country. We're pleased to provide you with an overview of what the CVMA has recently been working on for you, our valued members in Saskatchewan.

**2018-19 CVMA EXECUTIVE COMMITTEE**

**Dr. Terri Chotowetz**  
President

**Dr. Melanie Hicks**  
President-Elect

**Dr. Enid Stiles**  
Vice-President

**Dr. Louis Kwantes**  
Executive Member

**Dr. Troye McPherson**  
Immediate Past-President Dr.

**Dr. Barry Stemshorn**  
Treasurer (ex-officio)

**Mr. Jost am Rhyn**  
CEO (ex-officio)

**2018-19 STUDENTS OF THE CVMA REPRESENTATIVES**

**Ms. Kate Rundle**  
Atlantic Veterinary College (President)

**Ms. Erica Ward**  
University of Calgary — Faculty of Veterinary Medicine

**Ms. Gillian Davies**  
Western College of Veterinary Medicine

**Ms. Florence Leduc**  
Faculté de médecine Vétérinaire

**Ms. Brittany O'Brien**  
Ontario Veterinary College

The CVMA is also pleased to welcome **Dr. Bettina Bobsein** to the Animal Welfare Committee. Her term began on January 1, 2018.

**POLICY AND ADVOCACY**

**NEW KENNEL CODE RELEASED**

This document incorporates new scientific evidence in many aspects of dog breeding and kennel management. Download the Code at [canadianveterinarians.net](http://canadianveterinarians.net) / Practice & Economics / Practice Tools.

**ADDING VOICE AND INPUT**

- CVMA co-signed a letter addressed to the Minister of Environment and Climate Change asking the government to reduce Canadians' exposure to lead. A separate letter was sent reiterating the CVMA's stance on the use of lead fishing sinkers and lead shot in Canada.
- CVMA provided input on the policy position released by the World Veterinary Association/World Aquatic Veterinary Medical Association on the Accountability for Aquatic Medicine.
- CVMA submitted a joint letter calling for updates to Canadian laws addressing shortcomings in relation to bestiality and animal fighting.

**VETERINARIANS TALK CANNABIS USE IN VETERINARY MEDICINE AT ANNUAL CONVENTION**

Veterinary professionals explored issues and challenges pertaining to the therapeutic use of cannabinoids in veterinary medicine during the third annual National Issues Forum, at the 2018 CVMA Convention in Vancouver, BC. Three panelists were featured:

- Dr. Sarah Silcox, President and Director of the Canadian Association of Veterinary Cannabinoid Medicine (CAVCM)
- Dr. Louis-Philippe de Lorimier, a veterinary medical oncologist and Veterinary Information Network (VIN) consultant
- Dr. Sharon Gwaltney-Brant, a veterinary toxicologist and VIN consultant

Questions or Suggestions? Contact your CVMA National Office: Tel: 1-800-567-2862, or email at <mailto:admin@cvma-acmv.org>. Contact your provincial Council Representative, Dr. Terri Chotowetz at <mailto:tchotowetz@gmail.com>.

SCIENCE AND KNOWLEDGE

**2018 CVMA AWARD RECIPIENTS**

Recipients were recognized during the AGM and Awards Luncheon at the CVMA Convention on July 5, 2018:

- Small Animal Practitioner Award: Dr. Matt Read (AB)
- Merck Veterinary Award: Dr. Kathleen Parker (AB)
- CVMA Humane Award: Dr. Helene Van Doninck (NS)
- CVMA Practice of the Year Award: Kannon Animal Hospital (NB)
- CVMA Life Membership: Dr. Carlton Gyles (ON)
- CVMA President's Award: Dr. Barry Stemshorn (QC)

**ANIMAL HEALTH WEEK – SEPTEMBER 30 TO OCTOBER 6, 2018: ONLINE ORDERING OPEN UNTIL AUGUST 3, 2018**

CVMA will celebrate this year's campaign under the theme, Vaccines Save Lives! Learn more at [canadianveterinarians.net](http://canadianveterinarians.net).

**NATIONAL TICK AWARENESS MONTH MATERIALS: USEFUL YEAR-ROUND**

Tick Awareness Month is over, but clinics can still benefit from community engagement tools by visiting the CVMA website at [canadianveterinarians.net/practice-economics/practice-tools-national-tick-awareness-month](http://canadianveterinarians.net/practice-economics/practice-tools-national-tick-awareness-month).

**28 SEPTEMBER IS WORLD RABIES DAY**

World Rabies Day is celebrated annually to raise awareness about rabies prevention and to highlight progress in defeating the disease. Find more information at [who.int](http://who.int).

The World Rabies Day Awards aim to highlight the work done by dedicated individuals and organizations to end rabies in their communities. Nominations are open until September 10, 2018. Find more information at [rabiesalliance.org/world-rabies-day/awards](http://rabiesalliance.org/world-rabies-day/awards).

VALUE OF MEMBERSHIP

**MONERIS PAYMENT PROCESSING SOLUTIONS**

Members can take advantage of preferred rates on debit and credit card processing services. For more information or to sign up for Moneris payment processing, contact the CVMA at 1-800-567-2862 or email [admin@cvma-acmv.org](mailto:admin@cvma-acmv.org). To learn more about Moneris' advanced payment solutions, please visit [moneris.com](http://moneris.com) or call 1-877-789-5335 to speak with a Moneris representative.

**CVMA HOTEL DISCOUNT AND SUMMER GIVEAWAY**

Book your hotel before September 30 for a chance to win it for free. Visit the Member Benefits and Services section of [canadianveterinarians.net](http://canadianveterinarians.net) and click "Hotel Discounts" (member log-in required).

PRACTICE AND ECONOMICS

**CANADIAN VETERINARY OATH REVISED**

The 2018 version of the Oath was revised to recognize the role of the veterinary profession in animal welfare. View the new Oath on [canadianveterinarians.net](http://canadianveterinarians.net) / About CVMA.

**ESTABLISHING A VALID VETERINARIAN-CLIENT-PATIENT RELATIONSHIP (VCPR)**

The following resources were developed to better understand valid VCPRs.

- Cow-Calf Producer Case Study
- Treating Honey Bees and Pollinators: What Veterinary Medical Professionals Need to Know

Listen to the CVMA Veterinary Pharmaceutical Stewardship Advisory Group explain how to establish a valid VCPR at [canadianveterinarians.net/Policy & Advocacy/Veterinary Oversight of Antimicrobial Use in Canada](http://canadianveterinarians.net/Policy%20and%20Advocacy/Veterinary%20Oversight%20of%20Antimicrobial%20Use%20in%20Canada).

**2018 REPORT ON VETERINARIANS IN GOVERNMENT, INDUSTRY AND ACADEME**

The CVMA, in partnership with the OVMA and CAHI, conducted a national survey of veterinarians employed outside private practice. View the report online under Practice & Economics / Business Management.

**2017 CVMA PRACTICE OWNERS ECONOMIC SURVEY RESULTS**

Read more in the July CVJ or online at [canadianveterinarians.net](http://canadianveterinarians.net) / Practice & Economics Business Management Resources.

**GAINING GROUND ON INFLATION: ASSOCIATE VETERINARIAN COMPENSATION**

Associate veterinarians in Canada had cause to celebrate in 2017. Find out why in the article in the May 2018 issue of The Canadian Veterinary Journal or access it online from our website.

**PET FOOD MANUFACTURER'S REBATE PROGRAM**

The CVMA Web Store Program now provides an instant rebate on your clients' pet food purchases ordered through the Web Store's AutoOrder feature. Contact the MyVetStore™ support line at 1-877-788-5028 or email [info@myvetstoresupport@acumenex.com](mailto:info@myvetstoresupport@acumenex.com).

**CVMA PETCARD PROGRAM**

Offer convenient and affordable financing options for your clients and get exclusive benefits for your clinic. Visit [petcard.ca](http://petcard.ca) or call 1-888-689-9876 for more information.





I never thought THAT would happen in veterinary practice!



“YOU SAID IT!”

YOU SAID IT! is a new column for member stories. Send us your real anecdotes and they will be published here, anonymously.

Next issue's topic:

Funny (real) questions from clients

One time I had done a C-section on a cow about an hour and a half away from the clinic. Soon after, I got a call saying she had managed to rip a view of her stitches out. Fortunately, I was headed out in that direction for the weekend, so I told them that I would just stop by and stitch up the cow. So I drove the hour and a half and arrived at the farm, only to realize I had brought everything except... the suture! It's amazing how easily you can suddenly convince yourself that open wound care is really the best option!

We have one room in the clinic that is used for people visiting their hospitalized pets. So we'll often put someone there with instructions to come grab us when they're done visiting and close the door. One night when our technician went back to the clinic to finish up some work at about 6:30... she saw the light on in the visitation room, opened the door and found this poor little old woman sitting there with her sick cat! Thankfully, she hadn't even noticed that everyone had left the clinic.

A client brings a cat in with skin lesion, and I inform him that it may be Ringworm. He immediately takes off his shirt and asks me if his scratchy spot on his (hairy) back is Ringworm.

One day a client brings in his lynx kitten. Another client brings in his dog in. Immediately, client #1 becomes a tree and the kitten climbs on top of his head.

I was emptying the anal glands of a small bed dog and its owner was restraining it. Her face was right next to her dog's face. Somehow I managed squirt her in the glasses with anal gland juice.

Called out to a mature ram that couldn't get up. After the three years of wool was shorn off he got up and ran off. Most expensive shear job ever.

Got to a call in final stages in bloat of a steer-flat out and glassy eyed, no respirations noted, but noticed that heart was still beating. Passed tube, removed gas and started to come back around. As he arose - he saw me and drove me into the ground. Thankless bugger.

Bull comes in, gets his shoulders past the head gate of chute, and follows me into the storage room, door slamming both him and me inside. As he saw the window and tried to jump through it, it gave me the chance to get my carcass out. The door slams shut again, followed by a bunch of crashing about (new shipment of Ivomec had just arrived). I opened the door, he came out, looked at me and went right back in, closing the door on himself again. More crashing about occurred- opened door again, he came out again, looked at me (and I had nowhere to go so I hoped to God he wouldn't go after me), and finally went towards the right direction to get back into chute system. Only three Ivomec jugs lost their lives. We got a new head gate.

I never thought that I would have to explain to a client why it's inappropriate for ME to draw HER blood for her.

I never thought that I'd have my pregnant belly rubbed by a client.



- ✓ Free Shipping\*
- ✓ ScribeRx™ PRESCRIPTION TOOL
- ✓ Trusted Partner since 1998
- ✓ Quality Compounds
- ✓ Innovative Dosage Forms
- ✓ Testing per USP Guidelines

1.866.794.7387

www.svprx.ca

\*Free shipping applies to prescription orders of \$50 or more before taxes. Summit Veterinary Pharmacy Inc. (SVP) is Canadian owned & operated. Ontario College of Pharmacists Certificate of Accreditation #38940. SVP will not compound a prescription in the same dose and dosage form as a commercially available product.



Petplan®

“love can't pay the veterinary bills — but Petplan can!”

insured patients, better outcomes

Petplan's been helping pet parents for over 40 years, so you can practice best medicine.



- ✓ illness and injury exam fees covered
- ✓ hereditary, chronic and dental conditions covered
- ✓ increases client visits and compliance

Terms and conditions apply. Policies become effective at 12:01 a.m. the day after activation. Waiting periods apply. Coverage under any pet insurance policy is expressly subject to the conditions, restrictions, limitations, exclusions and terms of the policy documentation issued by the insurer. Availability of this program is subject to each province's approval and coverage may vary by province. Petplan insurance policies are administered by Fetch Insurance Services, d/b/a Petplan, and underwritten by XL Specialty Insurance Company - Canadian Branch, which carries the rating of A+ by S&P and Allianz Global Risks US Insurance Company, a member of the Allianz Group, (rated A+ A.M. Best). Coverages may not be available in all jurisdictions. Information accurate as of July 2017. For more information, visit Petplan.com. ©2017 Fetch, Inc. 3805 West Chester Pike, Suite 240, Newtown Square, PA 19073. Tel: 1.866.467.3875. ©Fetch Inc 07/17 PPADSVMA0717

North America's best-loved pet insurance!

learn more at [gopetplan.ca](http://gopetplan.ca) or contact Petplan Veterinary Services: **1.888.983.8752** or [veterinary.services@gopetplan.com](mailto:veterinary.services@gopetplan.com)



# CLASSIFIED ADS

For complete, up-to-date listings, look for Classifieds under News & Information on the SVMA website.

## LOCUMS WANTED

### REGINA

24 HR Animal Care Centre, located in Regina Saskatchewan is looking for a locum who is dedicated to providing high-quality care in our modern, highly equipped, AAHA accredited small animal practice. By providing our veterinarians with the tools and in-house diagnostic capabilities, and a great support team, we are able to offer our patients the gold-standard in veterinary care. Our AAHA accredited hospital is fully equipped with paperless Cornerstone practice management software, CT Scanner, full in-house Idexx laboratory, 2 SurgiVet Advisors, ultrasonic dental unit, digital radiography, digital dental radiography, endoscopy, ultrasound, therapeutic K-Laser and CytoVetStat. Take a virtual tour at [www.24hracc.ca](http://www.24hracc.ca).

We can be very accommodating and will work around your schedule! Some options available include short agreements, such as 2-4 week commitments on a one time or continuing basis. Compensation is very competitive. In addition, paid travel and accommodation expenses are offered. Come and join an excellent team that cares for patients 24 hours a day with care, compassion, and professionalism. Please contact us today to get more information about our practice and the opportunity available within! We look forward to hearing from YOU!

Contact: Sarah Kessler, 24 HR Animal Care Centre, 1846 Victoria Avenue East, Regina, Saskatchewan S4N 7K3; phone: (306) 761-1449; e-mail: [24hrhr@accesscomm.ca](mailto:24hrhr@accesscomm.ca)

## VETERINARIANS REQUIRED

### EARL GREY

Earl Grey Veterinary Services is accepting applications for a full time veterinarian to join our growing mixed practice (65%small/35%large) immediately. Clinic is located in the small friendly community village of Earl Grey, about 35 minutes from Regina.

We are a progressive practice looking for someone to join our supportive and dynamic team. New graduates are welcome to apply. We offer paid CE allowance, paid association fees, group health benefits,

insurance and a clinic vehicle on top of a competitive wage, and attractive on-call incentives and employee discounts! We currently have a complete in-house lab, digital radiography, equine power float, laser therapy and ultrasonic dental equipment.

Are you an energetic team player? Do you have superior communication skills and a passion for veterinary medicine? Do you want a rewarding career in a small rural community that you can call home? You will want to manage and run your own clinic one day, why not get started and take the first step now. Call me and I can explain how to do this.

Contact Dr Debbie Hupka-Butz, Earl Grey Veterinary Services 109 Assiniboia Avenue Earl Grey, Sask. Phone 306 939 2264 Email: [egvets@sasktel.net](mailto:egvets@sasktel.net)

### ELROSE

Even though Hooves & Paws Veterinary Clinic is in rural Saskatchewan, people say we are in the middle of Everywhere! We also have the best clients and support staff on the planet. So if you are thinking of mixed practice as a career choice, we have a competitive wage package, negotiable call schedule and mentorship if needed. We even have references from former mentorship and veterinary students and locums who have worked here. We look forward to meeting you!

Call 306-378-2252 or send your resume to [elrosevetser-vices@sasktel.net](mailto:elrosevetser-vices@sasktel.net).

### OGEA

The Deep South Animal Clinic is currently accepting applications for an Associate Veterinarian(s). We are located in Ogema, Saskatchewan, one hour south of Regina. We are a very well equipped large and small animal practice which has been established for over 60 years. We used to list all our in house equipment, but to make a long story short, if we don't have it, you don't need it! Both large and small animal facilities have been designed to function smoothly and allow excellent care of hospitalized cases. More than 95% of the large animal obstetrical cases are in clinic.

Your first job is really important in shaping your career! We feel our combination of up-to-date facilities, practice philosophy and enthusiastic, experienced staff makes this position an attractive place

for you to deliver high quality veterinary medicine. We will provide a competitive salary and an extensive benefits package, tailored to your needs.

Contact Dr Andy Acton at Deep South Animal Clinic, Box 387 Ogema SK S0C 1Y0 dsac@sasktel.net Phone: (306) 459-2422 Fax: (306) 459-2880

### REGINA

24 HR Animal Care Centre in Regina, SK is now accepting applications for a full-time small animal veterinarian to join our team. By providing our veterinarians with the tools and in-house diagnostic capabilities, and a great support team, we are able to offer our patients the gold-standard in veterinary care. Our AAHA accredited hospital is fully equipped with paperless Cornerstone practice management software, full in-house Idexx laboratory, 2 SurgiVet Advisors, ultrasonic dental unit, digital radiography, digital dental radiography, endoscopy, ultrasound, therapeutic K-Laser and CytoVetStat. Take a virtual tour at [www.24hracc.ca](http://www.24hracc.ca). Come and join an excellent team that cares for patients 24 hours a day with compassion, and professionalism.

Our veterinarians work 12 hour shifts, rotating between days and nights, with approximately 14-16 shifts per month. Compensation is very competitive, commensurate with experience and includes production bonuses, medical benefits and CE. Professional development is encouraged and time off to pursue personal interests is provided.

The successful candidate will also receive a signing bonus of up to \$10,000 (some conditions apply)! Candidates must have passed the NAVLE (or equivalent) and must have fluent English communication skills (written and oral). Your income is up to you! Earn a base yearly income of \$90,000 minimum plus production (which can give you the earning potential in excess of \$150,000 per year!). Preference will be given to candidates from or willing to move to Regina. Saskatchewan has a lot to offer, including the Saskatchewan Graduate Retention Program in which tax incentives are offered for up to 7 years post-graduation. We look forward to hearing from YOU!

Contact: Sarah Kessler, 24 HR Animal Care Centre, 1846 Victoria Avenue East, Regina, Saskatchewan S4N 7K3; phone: (306) 761-1449; e-mail: [24hrhr@accesscomm.ca](mailto:24hrhr@accesscomm.ca)

### REGINA

Veterinarians, new and old!...I mean experienced...;) Have we got the job for you! Sherwood Animal Clinic is looking for a full time veterinarian to join our team. We are a mixed animal practice, working mostly with dogs, cats and horses...and the occasional bovine or small ruminant critter. We have a fantastic client base and lots of services to offer them including but not limited to: portable digital x-ray, dental x-ray, high speed dental unit, endoscope, tonovet, in-house lab, ultrasound, power float, IRAP/PRP, fresh and frozen equine AI and a shared vehicle for out of clinic appointments. We approach many of our cases as a team which we feel is a huge perk especially if this is your first mixed animal job. We also offer benefits, annual license fees, paid CE and... a free t-shirt upon signing!!! Whaaaaat?! Call 306-525-3763 or email [sacadmin@sasktel.net](mailto:sacadmin@sasktel.net) for more information.

### REGINA

We are a six veterinarian small animal practice looking for a full or part time veterinarian to join our team. Our paperless clinic is well equipped with digital radiography, digital dental radiography, therapeutic and surgical lasers, in clinic lab, ultrasonography and Tonovet. We strive to provide the best in patient care and client service in a great work environment. Compensation is very competitive and no after hour on call is required. Please send your resume to Dr Denita Shtuka at [vicvetclinics@gmail.com](mailto:vicvetclinics@gmail.com).

### REGINA

The Animal Clinic of Regina is looking for an outgoing and motivated small animal veterinarian to join our team. Our unique 66 year-old walk-in practice located in the heart of this beautiful, growing city is fully equipped with digital radiography, ultrasound, laparoscopy, orthopedic equipment and paperless Avimark software. Our focus is exceptional patient and client care in a comfortable and accommodating environment. We encourage our veterinarians

to pursue their special interests with paid CE opportunities and strive to provide a supportive setting for developing skills. We have remarkable technologists and support staff and pride ourselves on our open style of management that inspires professional excellence, respectful engagement and team collaboration. Benefits include group medical coverage, valuable staff discounts as well as no emergency or on call hours. We offer a competitive salary and encourage new graduates and experienced vets alike to apply.

Email your resume to [animalclinicofregina@sasktel.net](mailto:animalclinicofregina@sasktel.net) or mail it to: Attention Dr Lesley Sawa, Animal Clinic of Regina, 1800 Garnet Street, Regina, SK, S4T 2Z2.

### SASKATOON

Applications are invited from qualified individuals for two 12 month term Special Lecturers in Emergency & Urgent Care with the Department of Small Animal Clinical Sciences.

Dr Cindy Shmon, University of Saskatchewan [cindy.shmon@usask.ca](mailto:cindy.shmon@usask.ca)

### SASKATOON

Cumberland Veterinary Clinic is looking for a dynamic Veterinarian to join our team on full time basis. We are a two vet practice with an established clientele having been a part of the community for over 20 years. Our personal approach to client care is second to none. We offer a wide range of services, including preventive medicine, surgery, internal medicine, veterinary dentistry, weight management programs, emergency care, nutritional consultations, diagnostic services, and much more. We pride ourselves in providing an amazing client experience, as well as the greatest in pet care. The right candidate will enjoy a dedicated, professional and experienced support team with a great clientele and a fully equipped facility. Competitive compensation, benefits, CE and unmatched discounts among others. Please send your resume to [tamara@vetstrategy.com](mailto:tamara@vetstrategy.com). Clinic website: <http://cumberlandvetclinic.com>.

### SASKATOON

The Department of Veterinary Pathology at the Western College of Veterinary Medicine invites applications from academically qualified veterinarians

and final-year veterinary students for a three-year MSc with residency in anatomic or clinical pathology. Applications open on September 15, 2018 and the deadline for receipt of all application for diagnostic training programs is October 15, 2018. Application files must be complete by the deadline for consideration. The complete list of application documents is available by contacting the Department Program Coordinator.

Individuals wishing to apply should contact: Dr Elemir Simko, Graduate Chair, Department of Veterinary Pathology Telephone: (306) 966-7308 Fax: (306) 966-7439 Email: [elemir.simko@usask.ca](mailto:elemir.simko@usask.ca) OR: [angela.turner@usask.ca](mailto:angela.turner@usask.ca) (Program Coordinator)

### SASKATOON

The Department of Small Animal Clinical Sciences at the Western College of Veterinary Medicine is seeking a veterinarian to join a multidisciplinary Oncology team, consisting of 2 board certified medical oncologists, 2 medical oncology residents, a board certified radiation oncologist, a radiation therapist, and veterinary technologists. This 12 month term position is available July 1, 2018 and the start date is negotiable. Contact Dr Cindy Shmon at 306-966-7099.

### SASKATOON

Part time Opportunity! VCA Canada All West Animal Hospital, is hiring a part time (20 hours per week) Veterinarian to join their awesome team! Located in the beautiful city of Saskatoon, we are a primary care companion animal hospital that offer a full range of services. We boast a great reputation among clients and our energetic, friendly support staff make for a great working environment. VCA Canada offers career growth opportunities, CE opportunities with access to exclusive VCA conferences, CE allowance, networking and knowledge exchange with other veterinarians, continued investments in new technologies, advanced diagnostics, and modern facilities. Additionally, we offer competitive wages, pet and veterinary discounts and more! Join Us Caring for Life's Greatest Companions! Please forward your resume to: Donna. [Mcbeth@vca.com](mailto:Mcbeth@vca.com)

### SWIFT CURRENT

South West Animal Health Centre in Swift Current, SK is looking for a large animal veterinarian with a strong interest in dairy. We are a progressive and expanding 8 veterinarian practice. We consist of separate large and small animal clinics. Our large animal clinic is fully equipped with hydraulic tip table, calving suite, bovine ultrasound and more! Wage negotiable and commensurate with experience. Annual CE allowance, licensing fees paid, comprehensive health and dental coverage and more. Come see what our team has to offer! Come live and work "Where Life Makes Sense"! Send Resumes to Dr Glen Griffin [gtg799@mail.usask.ca](mailto:gtg799@mail.usask.ca)

### SASKATOON

Woodridge Veterinary Clinic is accepting applications for a part time veterinarian to join

our team. We are a busy small animal practice located in South-east Saskatoon in Lake-wood Suburban Centre, near the fast-growing neighbourhood of Rosewood. We currently have two full time technicians and two part time veterinarians.

We offer compassionate care to our clients and patients centred around pets being family members. We are looking for a veterinarian who shares these attributes. We have in-house digital radiography, in-house bloodwork, and offer house calls. On call until 11pm is divided equally between veterinarians. Salary will be based on experience. Mentorship is available. Please contact Anique or Jenny @ 306-244-1010 or [info@woodridgevet.ca](mailto:info@woodridgevet.ca)

### SWIFT CURRENT

Associate Pet Hospital in Swift Current, SK is looking for a small animal veterinarian to practice in our new 5000 sq ft small animal facility. We are a progressive and expanding practice which consists of separate large and small animal clinics. Our small animal clinic is equipped with in house diagnostics, dental xray, endoscope, ultrasound and more! Mixed compensation package with guaranteed base salary plus commission, potential for a six figure income, annual CE allowance, licensing fees paid, comprehensive health and dental coverage and more. Come live and work "Where Life Makes Sense"! Come see what our team has to offer! Send resumes to Dr Glen Griffin [gtg799@mail.usask.ca](mailto:gtg799@mail.usask.ca) or Dr Sarah Allin [sarahallin01@hotmail.com](mailto:sarahallin01@hotmail.com).

### SWIFT CURRENT

South West Animal Health Centre in Swift Current, SK is looking for a large animal veterinarian with a strong interest in dairy. We are a progressive and expanding 8 veterinarian practice. We consist of separate large and small animal clinics. Our large animal clinic is fully equipped with hydraulic tip table, calving suite, bovine ultrasound and more! Wage negotiable and commensurate with experience. Annual CE allowance, licensing fees paid, comprehensive health and dental coverage and more. Come see what our team has to offer! Come live and work "Where Life Makes Sense"! Send Resumes to Dr Glen Griffin [gtg799@mail.usask.ca](mailto:gtg799@mail.usask.ca)

OR Dr Sarah Allin [sarahallin01@hotmail.com](mailto:sarahallin01@hotmail.com)

### WARMAN / ROSTHERN

Norsask Veterinary Group is seeking a full-time veterinarian to work in our mixed practice. The successful candidate will possess the skills and abilities to work with all domestic animal species. The ability to function successfully in a team environment with multiple other veterinarians and support staff is essential. New graduates would find this practice supportive to developing your career as a veterinarian. We are a multi-veterinarian mixed animal practice operating from two well-equipped clinics in Warman and Rosthern. We strive to maintain a well recognized high level of customer service. We value a team approach to practicing quality veterinary medicine in a friendly atmosphere while maintaining a healthy work-life balance for all team members. We offer a competitive compensation package, group benefits plan, practice vehicle, continuing education allowance, and the advantage of living and working close to all the amenities of Saskatoon. Check us out online at [www.norsaskvetgroup.com](http://www.norsaskvetgroup.com). If you would like to discuss the possibilities of this position further, please contact Dr John Ayres at 306-232-7898 or email [jayres@norsaskvetgroup.com](mailto:jayres@norsaskvetgroup.com).

Alberta Associate Pet Hospital in Swift Current, SK is looking for a small animal veterinarian to practice in our new 5000 sq ft small animal facility. We are a progressive and expanding practice which consists of separate large and small animal clinics. Our small animal clinic is equipped with in house diagnostics, dental xray, endoscope, ultrasound and more! Mixed compensation package with guaranteed base salary plus commission, potential for a six figure income, annual CE allowance, licensing fees paid, comprehensive health and dental coverage and more. Come live and work "Where Life Makes Sense"! Come see what our team has to offer! Send resumes to Dr Glen Griffin [gtg799@mail.usask.ca](mailto:gtg799@mail.usask.ca) or Dr Sarah Allin [sarahallin01@hotmail.com](mailto:sarahallin01@hotmail.com).

### ALBERTA

ERSKINEMaverick Large Animal Veterinary Service is growing and needs additional veterinarians with an interest in cow-calf and feedlot medicine, and/or equine practice. Our caseload in Erskine is primarily bovine, with equine keeping us busy in summertime. Our sister practice, Momentum Equine Veterinary Specialists is home to two DACVS equine vets who see patients at Maverick every other week. This provides great support for equine lameness cases and offers an excellent opportunity to learn. Our workplace is non-toxic (zero staff turnover to date), we are well equipped, and we have excellent support staff. This position requires ONLY THREE WEEKS PER YEAR OF AFTER HOURS CALL. Base salary starts at \$82500 plus benefits, vacation, CE and dues for new graduates. Compensation and vacation for applicants with more experience will be

arranged to our mutual benefit. Partnership is encouraged once settled in, but certainly not required. Visit [www.maverick-largeanimal.com](http://www.maverick-largeanimal.com) to see some super old pictures of our practice or make a confidential call to Dr. Ben Schultz at 403-741-8678 or email [drbenschultz@hotmail.com](mailto:drbenschultz@hotmail.com)

### OYEN

Veterinarian needed for mixed animal practice in Oyen, AB. Busy 3 Vet practice with 50% cattle and 50% companion animal. Oyen is located exactly half way between Calgary and Saskatoon, so super easy access to both! We would rather talk to you in person about what we have to offer than try to coax you with a catchy details in an ad. So if you are passionate about rural practice, please contact Oyen Vet Services at 403-664-3849 for further application information.

## TECHNOLOGISTS REQUIRED

### MOOSE JAW

Busy mixed animal practice seeking a licenced RVT/AHT to join our team of 8 veterinarians and 5 RVTs. Duties will be primarily in-clinic focusing on anesthesia, lab work, radiology, and dentals. However, there are seasonal opportunities to go out on farm. The successful candidate will be outgoing, hard-working and confident. We offer paid association fees, CE allowance and health benefits.

If you are interested in joining our team please forward your resume to the attention of Dr Danni at E-mail: [myvet@mjanimalclinic.com](mailto:myvet@mjanimalclinic.com), Fax: (306) 693-2798 or snail mail: Moose Jaw Animal Clinic, Box 820, Moose Jaw SK S6H 4P5!

### SASKATOON

Warman Vet Services Saskatoon location is currently seeking a full-time RVT to join our team of food animal veterinarians and support staff. Warman Veterinary Services is a unique clinic in that all work is ambulatory. The hours of operation are Monday to Friday, 8:00am – 5:00pm. There may be opportunity for some on-farm site visits.

Warman Veterinary Services prides itself on being a work environment that is fast paced but fun. And employees are valued and treated like second family. Opportunity exists for individuals looking for increased

responsibility. Strong organizational skills and work ethic are assets. Experience in the food animal industry is valuable but not a requirement. If this sounds like something you are interested in, please contact Sandy Koskie, office manager at [skoskie@warmanvetservices.ca](mailto:skoskie@warmanvetservices.ca)

### SASKATOON

Corman Park Vet Services is seeking a full-time RVT to join our busy mixed animal practice that is located 10km west of Saskatoon on Highway 14. We are seeking a tech who will be confident, has great people skills and the ability to work independently as well as a supportive team member. Experience is an asset but new grads are welcome and encouraged to apply. Wages are based on experience and benefits are available after 3 months of full-time employment. Please submit resume to Dorrie at [dorrie.cpv@gmail.com](mailto:dorrie.cpv@gmail.com).

## OFFICE STAFF NEEDED

### SASKATOON

Progressive, fast-paced two doctor practice located in Saskatoon is seeking a highly motivated, team-oriented Veterinary Office Assistant to join our team. Applicants should have completed the VOA course or equivalent. Office experience is considered an asset but new graduates are also welcome to apply. This is a full-time weekday position that may include the occasional Saturday shift.

We are looking for an enthusiastic and customer service oriented individual that works well in a team setting. Duties include but are not limited to: answering phone calls, scheduling appointments, taking payment, product ordering, occasionally assisting with patient handling in the treatment area and providing excellent customer service as the face of the front of the clinic. If you are interested in a friendly work environment with great co-workers and great clientele, please submit your resume to Acadia Veterinary Clinic, #4-3421 8th Street East Saskatoon, SK S7H 0W5 P: (306) 477-1222 F: (306) 477-1223

### SASKATOON

Our progressive, small animal hospital located Saskatoon is looking for a full time receptionist to join our team! We strive to provide a higher than normal level of pet care along with exceptional customer service. An



# CLASSIFIED ADS

ideal candidate for our practice will exude confidence and dedication to the position while having the organizational and receptionist skills required for a busy practice. Some of the duties include keeping the reception and 3 exams, clean and stocked, answering the phone, handling transactions, booking appointments, some inventory ordering and arranging FedEx shipments. If you are interested in working in a busy practice with a fun loving, pet loving group of people, please send your cover letter and resume to the attention of Marlee at [acadiavetclinic@sasktel.net](mailto:acadiavetclinic@sasktel.net)

### PRACTICE FOR SALE

#### PRINCE ALBERT

I graduated in 1959 in St. Hyacinth. I built the clinic in 1974. The time has come to make plans for retire-

ment. I wish very much that this ad will find a veterinarian enthusiastic to take over. If interested get in touch and come and see. Contact Dr Bernard Chapuis, Marquis Road Veterinary Hospital for Companion Pets, Prince Albert SK. Tel: (306)764-3461 Fax: (306)764-3462 [marquisvet@sasktel.net](mailto:marquisvet@sasktel.net)

### SUPPORT NEEDED

#### NORTHERN OUTREACH-SUPPLY SUPPORT NEEDED

TEAM NORTH is a voluntary group of veterinarians, technologists and students that travel to remote areas of northern Saskatchewan to examine, vaccinate, de-worm and spay or neuter pets at no cost to the owner. Dogs running at large and in groups create a serious health and safety issue in these remote areas with no access to veterinary services.

There is currently NO FUNDING in place to support this program and the group relies on donations. The following WISH LIST has been developed; any help you can offer would be greatly appreciated! Permanent equipment: clippers, autoclave, endotracheal tube, pulse oximeters, Rubbermaid bins, Mayo stands, scissors, tables, scales, cat bag/tank, otoscopes, kennels, surgical gowns, anesthetic masks.

Consumables: caps and masks, needles, paper towels, Isoflurane, suture-PDS/catgut, Propofol, surgical and exam gloves, tape, alcohol, catheters, Hibitane, disposable drapes, disposable surgical gowns, peel packs, gauze, Ziplock bags.

Please contact Dr Lesley Sawa at 306.525.5244 if you have items to donate. Thank you!

## KEEP INFORMED

Keep informed of the decisions council is making and actions being taken on your behalf. The minutes from council meetings are posted on the Members' Side of the SVMA website [www.svma.sk.ca](http://www.svma.sk.ca).

Council welcomes comments and suggestions from all members. Email your comments or questions to a councillor (addresses are on the website's Contact Us page) or to the office and they will be passed on to council.

## HAVE YOU TRIED IT?

Sharing SaskVets posts with your clients on your practice website or Facebook page has proven financial returns: informational and promotional posts travel furthest and return the greatest financial benefit to your practice when you retweet, 'LIKE' and share them. **Try it for yourself!**



WESTERN DRUG DISTRIBUTION CENTER LIMITED

30

Years of Providing Service to Professionals

**Karen Laventure, RVT**  
Client Services Representative  
(Saskatchewan/Manitoba)

*"Your Success is Our Business"*

Cell: (306) 221-7681  
Fax: (800) 329-9332  
Toll Free: 1-877-329-9332 ext. 1126  
Email: [klaventure@wddc.com](mailto:klaventure@wddc.com)  
Website: [www.wddc.com](http://www.wddc.com)

17611 - 109A Avenue  
Edmonton, Alberta  
T5S 2W4



## MEMBERSHIP CHANGES

### VETERINARIANS

#### SOCIAL TO GENERAL

ATKINS, Gordon Jun 12

#### T-GENERAL

ABEYWICKRAMA, Dhawala Apr 23  
ANDREWS, Charles (Greg) Jul 1  
BARNES, Ian Apr 30  
CREELMAN, Cody Jun 7  
DEWALT, Jordyn Jul 11  
HENDERSON, Kirsten May 14  
HENDERSON, Traci Apr 30  
JELINSKI, Michael Jul 1  
JOHNSON ESCOBEDO, Cary May 1  
KLEIN, Terren May 15  
LEGUILLETTE, Renaud Jun 4  
MOOI, Aaron May 14  
LABRECQUE, Alexina Jun 11  
ROLLACK, Chloe Jun 11  
RUSSNAK, Jillian Jun 11  
SPROAT, Allison Jun 11  
VAN DEN HEUVEL, Connie Jun 18

#### T-SHORT TERM TO T-GENERAL

HUSSEIN, Hayam Jun 8

#### LIFE NON-PRACTISING TO SHORT TERM

KLEMMER, Alan D. 30 day, May 16  
KUCHARSKI, Henry G. 30 day, May 28

#### T-SHORT TERM

BARTON, Grady 30 day, Mar 25  
GRANONE, Tiffany 30 day, Jul 16

HAWKES, Kimberley 30 day, May 4  
HOFMEISTER, Erik 30 day, Sep 17  
HUSSEIN, Hayam 30 day, May 11  
MYRNA, Kathern 30 day, Dec 10  
PELCHAT, Jennifer Aug 12-19

#### T-LIMITED GENERAL

TRACH, Leuraunt May 25

#### T-EDUCATIONAL

BOISCLAIR, Charles Jul 15  
CIWKO, Erin Jul 1  
DERRE, Maxime Jul 1  
DUCKETT, Margaret Jul 1  
HANAK, Eryn Jul 1  
HORNSEY, Samuel Jul 1  
IZYDORCZYK, Veronica Jul 1  
KOO, Siu To Jul 1  
LAVALLEE, Genevieve Jul 1  
LEGG-ST PIERRE Jul 15  
MARCHENA-PINA, Luis Jul 1  
MCKENZIE, Joscelyn Jul 1  
PACHECO, Jarrett Jul 3  
STEVENS, Robin Jul 2  
WALKER, Meagan Jul 1

#### RESIGNED

CHYLKOVA, Tereza Apr 14  
DILLON, Chelsea Jun 10  
GORDON, Stefan Jun 29  
HARTMANN, Rebekah Jun 22  
HEINRIKSSON, Andrea Jun 29  
PIERCE, Karra Jul 1  
REECE, Jonjo Jul 3

#### DECEASED

SCHMEISER, Douglas A. Apr 28

### VETERINARY TECHNOLOGISTS

#### ACTIVE

Bauer, Laura April 27  
Gerrard, Deanna May 7  
Kratchmer, Jenna May 7  
Priester, Majade June 1  
Goucher, Kathleen July 10

#### PROVISIONAL ACTIVE

Herter, Keanna May 10  
Sukenik, Jessica July 3  
Fisher, April July 3  
Aspen Stack July 9  
Sorokoski, Kendra July 11  
Diamond, Katrina July 11  
Penner, Jessica July 12  
Chanin, Katara July 16

#### SHORT-TERM ACTIVE

Van Beelen, Emily May 29 (30 day)  
McGimpsey, Shawna June 12 (90 day)

#### RESIGNED

Fisher, Naysa June 22  
Cochrane, Nora June 23  
(deceased)  
Toole, Kelsey July 3

Join us for a **35<sup>th</sup>**  
*Anniversary*

WDDC cordially invites our  
industry partners to participate  
in our Open House & Banquet

#### Winnipeg Facility

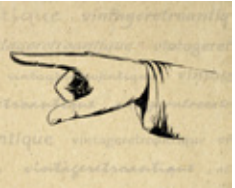
Saturday,  
September 22, 2018  
1600 Inkster Blvd.  
Winnipeg MB

#### Edmonton Facility

Saturday,  
September 29, 2018  
17611 109A Ave  
Edmonton AB

**WDDC**  
WESTERN DRUG DISTRIBUTION CENTER LIMITED  
"Your success is our business."

**MOVING?**  
**CHANGING EMPLOYERS?**  
**CLOSING A PRACTICE?**  
**CHANGING YOUR**  
**CONTACT INFORMATION?**



You must let the SVMA office know.  
Call (306) 955-7862, fax (306) 975-0623 or  
email [svma@svma.sk.ca](mailto:svma@svma.sk.ca).

**LOOKING**  
for a veterinarian?

An RVT?

A VOA?

A locum?

How about volunteers?

Check out the  
**CLASSIFIEDS** page  
on the SVMA website  
[www.svma.sk.ca](http://www.svma.sk.ca),  
where members  
can post ads of  
up to 200 words for  
three months, free!





# 2018 SVMA CONFERENCE AGM & TRADE EXPO SEPTEMBER 6-9, 2018

**REGISTER NOW**

for Saskatchewan's best  
veterinary CE and networking  
opportunity of the year!!

**Join us as we celebrate our 110th Anniversary with:**

- Saskatchewan's best veterinary CE value with a total of 36 hours RACE-approved CE
- 110th Anniversary Awards Banquet, Cocktails & Connections Reception, Prairie Lily Boat Cruise and WCVN Class of '78 40 Year Reunion
- SVMA Annual General Meeting and Members' Forum Lunch
- Latest products and services from veterinary industry partners in the Trade Expo
- Lots of leading edge discussion and networking opportunities
- A beautiful new waterfront location at the Sheraton Cavalier Saskatoon *(and free parking)*

**Visit [www.svma.sk.ca](http://www.svma.sk.ca)**

for 2018 speakers, registration fees, program and event details and special hotel conference rates.

**ONLINE REGISTRATION IS OPEN!  
EARLYBIRD DISCOUNTS IN EFFECT  
UNTIL AUGUST 24.**

SEE YOU IN SASKATOON!



## 2018 SPEAKERS AND TOPICS

### PLENARY

**MS TINA VARUGHESE**

'50 Shades of Beige'  
Cross-Cultural Communication

**DR JUDY CURRIE**

VCPR Case Discussion

### COMPANION ANIMAL

**DR ERIN SIMMONDS**

Cannabis Toxicity; The DKA Pet

**DR MARGARET DOYLE**

Forensic Pathology (3 hrs)

**DR VINCENT DEFALQUE**

Dermatology (3hrs)

**DR ANDREW MACKIN**

Hematology (4hrs)

**DR JORDAN WOODSWORTH/**

**MS ERIN WASSON**

Challenging Conversations  
with Pet Owners

### LARGE ANIMAL

**DR ELEMIR SIMKO**

Honeybee Health and  
Diseases (2 hrs)

**DR VIRGINIA FAJT**

Pharmacology, AMR and  
Decision-Making Scenarios (3hrs)

**DR CASSANDRA TUCKER**

Cattle Branding, Animal Welfare  
and Market-Driven Change

**DR JULIA MONTGOMERY**

Rhabdomyolysis

**MS ERIN WASSON**

Challenging Conversations  
with Rural Clients

### WET LABS

**DR ROMANY PINTO**

Rehabilitation of Cranial  
Cruciate Ligament Rupture

**DR KATE ROBINSON**

Equine Dentistry in  
Ambulatory Practice