



# Newsletter

April 2020

## FROM THE PRESIDENT'S DESK

In this time of uncertainty with the coronavirus (COVID19) pandemic, I'm sure we are all feeling the stresses of practicing veterinary medicine while risking exposure to the coronavirus. I want to say thank you for all your efforts to continue to provide patient care through these challenging times. Thank you for your understanding as we incur obstacles beyond our control with the Pharmacy and Laws CE. Thank you to practice owners as you work hard to maintain business while doing your best to protect your staff and clients. Thank you to the associate veterinarians as you work long hours and risk exposure for the sake of pets in need. I commend each and everyone of you for your dedication and selflessness.

Broward County issued an executive order directing closure of "non-essential" retail and commercial businesses, however, veterinarians are considered essential businesses that can remain open. With that said, under the guidance of AVMA, we recommend low contact appointments, rescheduling elective procedures, and utilizing conservative measures for personal protective equipment. If your business can accommodate telemedicine, AVMA has resources available to assist you.

I urge you to remember wellbeing and selfcare is vital to our sustainability. Get plenty of rest, drink plenty of water, and stay positive. Laugh whenever you can. When you wake up in the morning and before you go to bed say one thing for which you are grateful.

Be safe and stay healthy,  
Stephanie Jones, DVM  
President



# Newsletter

**April 2020**

## Membership Information

Enjoy the camaraderie and top-notch continuing education offered by the BCVMA! We offer five great CE meetings per year, a newsletter, and the best Holiday Party in South Florida! Membership is \$130 yearly.

You can join or renew by visiting our website: [www.BrowardCountyVMA.com](http://www.BrowardCountyVMA.com) or e-mail [bcvma@mail.com](mailto:bcvma@mail.com) for more information. We look forward to seeing you!

## Vet Directory

Please visit our website [Veterinary Directory page](#) to view our compendium of local resources. If you'd like to add your information to this list, please email Laura at [Lcarran@gmail.com](mailto:Lcarran@gmail.com).

## 2020 State of Florida DBPR Veterinary Board Meetings

The Board of Veterinary Medicine meets throughout the year at different locations throughout the state.

Attending any of these meetings will earn you up to five CE law credits and will teach you what really transpires in Disciplinary Procedures that the Board considers. You will benefit by learning how to abide by state DBPR regulations and how to avoid being disciplined because of a violation.

Friday, June 19, 2020 at 9:00 am  
St. Petersburg, FL

Friday, September 11, 2020 at 9:00 am  
Stuart, FL

Friday, December 18, 2020 at 9:00 am  
Orlando, FL

Please contact Linda Tinsley with any questions:

[linda.tinsley@myfloridalicense.com](mailto:linda.tinsley@myfloridalicense.com)



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# 2020 Veterinary Conference Schedule

## Emerald Coast Veterinary Conference

Postponed to August 19-23, 2020  
Miramar Beach, FL

[ECVC 2020](#)

SPECIALTY + EMERGENCY / CRITICAL CARE

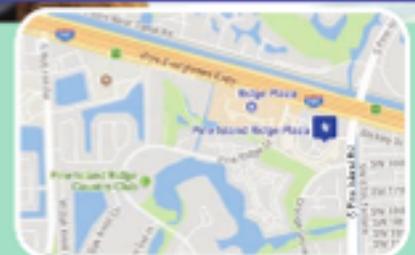


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## CORONAVIRUS DEVELOPMENTS

### **Dear Colleagues and Friends,**

As Coronavirus cases continue to rise and impact our home and our profession, I wanted to provide you with a summary of the latest developments that outline how we practice veterinary medicine.

The passing of the CARES Act (Coronavirus Aid, Relief and Economic Security Act) was approved by Congress and signed by President Trump. This stimulus package contains many provisions that will aid veterinarians. They are as follows:

- Individual rebates/tax credits. The bill provides a tax credit of \$1,200 for individual filers (\$2,400 for joint filers) plus \$500 per child. The credit is phased out for individuals with adjusted gross income over \$75,000 (\$150,000 for joint filers) and is phased out completely at \$99,000 for individuals (\$198,000 for joint filers).
- Federal student loan relief. The bill provides for six months of relief on federal student loan payments and suspends interest accrual through Sept. 30, 2020.
- Expanding unemployment benefits and paid leave
- Access to forgivable loans to be used for payroll and operating costs for small businesses.

To better understand the significance of this bill on you and your practices, please visit the [AVMA](#).

In the face of this pandemic, we have been faced with the challenge of continuing to provide care to our patients while practicing strict measures to ensure the safety and prevent the spread of the virus to our ourselves, our staff, and our clients. Many of you are practicing limited contact appointments or have elected to quarantine and close your practices altogether. Until recently, Florida did not recognize veterinary telemedicine without a valid VCPR. The State of Florida Department of Business and Professional Regulations issued an emergency order ( Order # 2020-04), temporarily allowing veterinarians to practice telemedicine during this difficult time. This order gives us an alternative method of providing care for our patients while our doors are closed. An excerpt from the bill is found below:

*Any restriction in chapter 474, Florida Statutes, or chapter 61G-18, Florida Administrative Code, which would prohibit active Florida licensed veterinarians in good standing from practicing telemedicine on their patients is suspended provided the attending veterinarian is comfortable assessing the patient remotely and feels able to exercise good clinical judgment to assist the patient.*

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# Common Procedures & Recent Advances in Minimally Invasive Surgery

Barry E. Brower, DVM

Diplomate, American College of Veterinary Surgeons- Small Animal  
*Advanced Veterinary Care Center*

Since its inception in veterinary medicine, minimally invasive surgery (MIS) has become a rapidly advancing field. Specialized equipment has become increasingly accessible and techniques are becoming more refined. Consequently, more and more of our small animal patients are able to benefit from the many advantages that MIS provides.

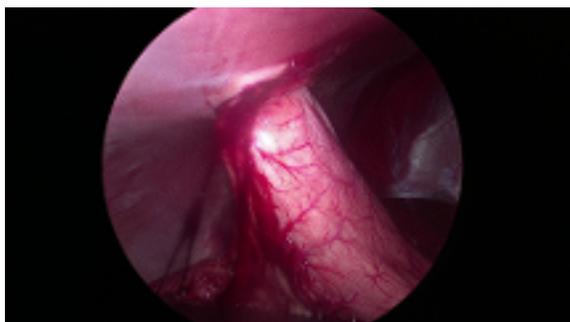
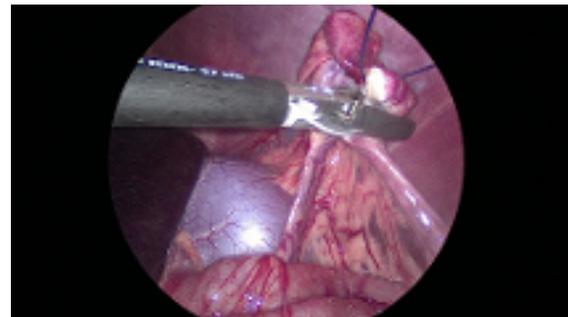
Utilizing equipment that provides superior visualization and access to the surgical site, minimally invasive surgery provides a less invasive, more precise approach to surgery. The benefits of MIS include quicker recovery times and return to function, less pain/morbidity, improved functional outcome and lower risk of incisional issues such as infection when compared to traditional or open procedures. The proven benefit of MIS is further validated by the fact that surgical residents are now required to participate in a set number of arthroscopy and laparoscopy/thoracoscopy procedures within their residency program.

Successful implementation of a MIS program requires an integrated team of doctors, nurses, and technicians trained in the specialized equipment being used. Although there is a learning curve associated with MIS, it is my experience that the implementation of new and progressive techniques is typically a motivating influence and generally leads to feelings of fulfillment for all those involved.

Potential disadvantages of MIS are the high cost of equipment and potential increased cost to the client. However, it is not uncommon for pet owners to ask if a procedure can be done minimally invasively because they or a family member or friend may have experienced the benefits of MIS, and the ability to offer this service to their pets is one which enhances client satisfaction.

## Laparoscopy & Thoracoscopy

MIS may be utilized for both common procedures as well as complex surgeries that are typically performed “openly.” Routine procedures such as elective neutering (ovariohysterectomy, ovariectomy, cryptorchid orchiectomy), gastropexy, and cystotomy are now commonly performed using laparoscopy. Recently, more complex interventions have been developed such as adrenalectomy, ureteronephrectomy, and cholecystectomy.



Studies comparing open and laparoscopic ovariohysterectomy and ovariectomy found lower pain scores for 24 hours postoperatively (Devitt et al. 2005) and quicker return to function (Culp et al. 2009) in the MIS group. A positive effect of minimally invasive technique was also noted when comparing surgical site infection (SSI) rates in clean and clean-contaminated surgical procedures in dogs and cats, where MIS procedures had a 1.7% SSI rate compared to 5.5% in open procedures (Mayhew et al. 2012).

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Recent advances in laparoscopic surgery have led to refinement of some procedures and allowed the development of other more complex interventions. The introduction of barbed suture has removed the need for intracorporeal suturing and aids in tension maintenance during the processing of suturing during a gastropexy.

Studies of laparoscopic adrenalectomy in both dogs and cats have demonstrated excellent results with minimal morbidity and rare need for conversion to open laparotomy. Case selection is an important consideration for prospective MIS cases. Laparoscopy is not recommended for large adrenal tumors (generally greater than 4 to 5 cm) or for locally invasive tumors. When considering MIS for cholecystectomy, common bile duct obstruction must be ruled out as catheterization and flushing of the common bile duct is not currently possible via laparoscopy. An open approach is indicated if there is evidence of obstruction of the biliary tree or gallbladder rupture.

Thoracoscopic, or video-assisted thoracoscopic surgery (VATS) is being used more frequently, particularly for thoracoscopic exploration, pericardial window, subphrenic pericardectomy, lung lobectomy, and treatment of chylothorax. There are also smaller case reports describing minimally invasive techniques for patent ductus arteriosus ligation, cranial mediastinal mass resection, auricular mass resection, ligation of persistent right aortic arch, and tracheobronchial lymph node resection. As shown with laparoscopy, the VATS approach has been associated with lower postoperative pain scores compared to open thoracotomy.

Pericardial window or subtotal/subphrenic pericardectomy, performed using a VATS approach, can be utilized to provide effective long-term palliation of idiopathic and neoplasia-associated pericardial effusion. While subphrenic pericardectomy typically requires one-lung ventilation (OLV) and is technically more challenging, a pericardial window can be performed without OLV. It should be noted, however, that the efficacy of a VATS pericardial window, to provide long-term palliation of pericardial effusion compared to an open subphrenic pericardectomy has been questioned (Case et al. 2013).

Another increasingly common procedure using MIS technique is VATS lung lobectomy, which can be performed using either a VATS-assisted technique (where the lesion is exteriorized through a small intercostal incision and excised) or completely closed. OLV is generally required for the closed approach, and failure of OLV has been reported to be the most common reason for conversion to open thoracotomy (Mayhew et al. 2013). As with other completely closed procedures, case selection is key. In general, the larger the lesion, the closer to the hilus, and the smaller the dog are all factors which would support use of an open approach. MIS/VATS technique may also be used in the treatment of idiopathic chylothorax with subtotal pericardectomy, thoracic duct ligation +/- cisterna chyli ablation, with results comparing favorably with open thoracotomy.

As previously discussed, the field of MIS is continuing to progress. Recent trends have focused on single port techniques which may help to further decrease pain/morbidity compared to multi-port approaches. The technical challenges of single-port techniques have been somewhat mitigated by the introduction of single-port devices that allow multiple instrument passage simultaneously (such as the SILS device) as well as articulating instruments which help with triangulation.

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## Arthroscopy

As with laparoscopy and thoracoscopy, arthroscopy is used for both diagnostic and therapeutic purposes with the advantages of decreased morbidity, quicker recovery, decreased complications, improved functional outcomes, shorter hospitalization time, and enhanced client satisfaction. As is the case with minimally invasive soft tissue surgery, the suggested disadvantages include the steep learning curve and cost of the equipment.

The general indications for arthroscopy include exploration of the joints for the purpose of diagnosis through observation, biopsy, and culture; removal of loose bodies; topical treatment of OA (microfracture, abrasion arthroplasty); joint debridement and lavage; and arthroscopic-assisted joint stabilization. Arthroscopy improves diagnostic sensitivity and specificity for a variety of pathologies, while allowing concurrent treatment under the same anesthetic event. This is particularly useful in veterinary medicine in which our patients require heavy sedation or general anesthesia for advanced imaging (such as CT and MRI), adding overall cost to pet owners (in addition to the apprehension of subjecting the patient to multiple anesthetic events). The most common joints in which arthroscopy is performed include the shoulder, elbow, and stifle in dogs.

The most common indication for shoulder arthroscopy is for the management of osteochondritis dissecans (OCD). Shoulder arthroscopy is a more sensitive tool for diagnosis of osteochondrosis (compared to radiography) and allows the surgeon to reach more medial lesions on the humeral head, which can be difficult to reach with an open arthrotomy. Other indications include the diagnosis and treatment of diseases of the biceps tendon and shoulder instability/collateral ligament injury.



Arthroscopy is the gold standard for diagnosis of problems within the elbow joint, allowing superior visibility of joint surfaces and concurrent treatment when indicated. Arthroscopy also allows the grading of cartilage disease and classification of medial coronoid lesions. Additionally, many dogs presenting for elbow dysplasia will have concurrent disease in the contralateral limb, which can be evaluated and treated under the same anesthetic event.

Stifle arthroscopy is performed commonly prior to stifle stabilization in dogs with cranial cruciate ligament disease (CrCLD). Other indications include specific evaluation and treatment of meniscal injury, lateral femoral condyle OCD, and septic stifle joint. Inspecting the medial meniscus is a critical component of stifle surgery, and demonstrates a significant advantage of MIS/arthroscopy compared with open arthrotomy. The reported incidence of meniscal injury in dogs treated for CrCLD varies from 33% to 77%.

# Common Procedures & Recent Advances in Minimally Invasive Surgery

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Meniscal tears may be postliminary, occurring after the initial surgical procedure, or may be latent, which are present at the initial procedure but not identified because of failure of diagnosis. The reported incidence of postoperative meniscal injury ranges from 3% to 18% (depending on the study and stabilization procedure used) with clinical manifestation usually occurring within the first 4 months after surgery. This indicates a relatively high number of latent tears, missed at the time of surgery. Arthroscopy has been accepted as a more sensitive, more specific, and less invasive modality compared to arthrotomy for the detection of meniscal tears, particularly with the use of probing to evaluate all aspects of the meniscus.



To conclude, advancements in veterinary minimally invasive surgery have continued since its inception decades ago, and are assured to continue, following trends in the human medicine field. The advantages of this modality have been well-documented and the enthusiasm for the field is reflected by the increase in availability at veterinary hospitals throughout the country as well as by client demand for these procedures. While proper case selection remains an important component to successful outcome, laparoscopy, thoracoscopy, and arthroscopy have become more commonplace and can now be offered to a larger amount of patients and ultimately improving overall outcomes.



**Bio:** Dr. Brower received his Doctor of Veterinary Medicine (DVM) from Tufts University School of Veterinary Medicine in 2011. Following graduation from Tufts, Dr. Brower completed an internship in small animal medicine and surgery at Veterinary Medical and Surgical Group in Ventura, CA (2012) followed by a surgical internship at Gulf Coast Veterinary Specialists in Houston, TX (2013). Dr. Brower completed his surgery residency at the Veterinary Medical Center of Long Island in 2016. Dr. Brower's professional interests include orthopedic reconstructive and corrective procedures (such as TPLO, TTA, and fracture repair), as well as oncologic and soft tissue reconstructive surgery. He also has a particular interest in minimally invasive surgical techniques, including arthroscopic, laparoscopic, and thoracoscopic procedures. Dr. Brower's personal hobbies include

running, hiking, sailing, and spending time with friends and family. Originally from New York City, he has been a frequent visitor to southern Florida, and is now thrilled to call Fort Lauderdale home. Last year, Dr. Brower joined the growing team at Advanced Veterinary Care Center in Davie, which is now proud to provide Minimally Invasive Surgery options.

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## FVMA Update from Dr. Marta Lista FVMA District 6 Representative

Hello Colleagues,

I hope for good health for all. As, I write this we face much uncertainty as to how our lives and livelihood will evolve in the next few days, weeks and months.

As Broward and Dade COVID19 cases continue to rise daily, we face new challenges for the safety of ourselves, family and staff in addition to the challenge of being able to provide our services to the public.

Miami-Dade was the first county to declare a lock down on all non-essential services. Veterinary practices were originally not listed as an essential service. Within hours of the announcement, the FVMA contacted the mayors office and successfully moved veterinarians to essential service providers. FVMA is working with Governor DeSantis office on a statewide essential business classification for veterinarians.

I have been fortunate for the last 5 years to see the dedication the FVMA has to our profession and what a difference that dedication makes to our everyday lives. My experience on the FVMA board has been invaluable to me personally and given me a deeper appreciation for the veterinary community. Veterinarians are amongst the most humble, thoughtful, creative and knowledgeable people. We are resilient and uniquely suited to weather this crisis. I am grateful to belong to this profession. I am resigning my position as District 5 Representative to accept the nomination of President-Elect. Im both excited and nervous to take on this position but I will do my best to serve us in the next coming years. Dr. Robert Swinger will be replacing me as South Florida District 5 Representative. Dr. Swinger's passion, experience and thoughtfulness will make him a great representative for South Florida on our FVMA board.

If you need anything or have any concerns, as always please feel free to email or call any time.

Yours in service,

Marta Lista DVM

[Listamp@yahoo.com](mailto:Listamp@yahoo.com)

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# VCA Hollywood Animal Hospital

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### Andrea Clark

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### Briana Danielson

**DVM, DACVS**

*Board Certified - Surgery*



### Anne Murphy

**DVM, DABVP**

*Board Certified - American Board of Veterinary Practitioners*



### Irene Vazquez

**DVM**

*Practice Limited to Oncology*



### Melanie Hnot

**MS, VMD, DACVD**

*Board Certified - Dermatology*



### Dewey Carpenter

**DVM, DACVIM (Cardiology)**

*Board Certified - Internal Medicine-Cardiology*



### Randi Fishkin,

**DVM, DACVIM, DACVECC**

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**DVM, DACVR**

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# Latest News From Broward County Animal Care & Adoption

## ANIMAL CARE MODIFIES SERVICES

In response to the Coronavirus pandemic, Broward County Animal Care has modified its services in order to safeguard residents and staff from exposure to the virus. Veterinary Clinics are asked to refer their clients to the Animal Care website at [www.broward.org/animal](http://www.broward.org/animal) for information about the shelter's programs and services. Questions can be directed to [animalcare@broward.org](mailto:animalcare@broward.org).

Since the building is closed, until further notice, Animal Care is asking residents to:

- Adopt or Foster a pet online. Residents who are interested in adopting or fostering a dog or cat may select a pet from the Animal Care website and apply online. Customer Service Representatives will contact applicants to complete the process and schedule a time for pet pickup.
- Purchase the pet license tag through your office. If your Clinic does not sell the tag, please direct pet owners to the County's website at [www.broward.org/animal](http://www.broward.org/animal). A copy of a recent Rabies Certificate must be faxed or e-mailed to Animal Care offices. Online purchase instructions are explained on the website.
- Delay pet surrenders. Residents are asked to delay surrendering their pet to Animal Care. Walk-in owner surrenders have been suspended. Those who wish to turn in their own pet will be by appointment only.
- Continue care of Foster Pets. Foster Parents who are caring for a foster cat or dog, are asked to continue to care for the pet until further notice. Foster care check-ups will be rescheduled to a later date. In the event of an emergency, Foster Parents should call the special phone number that was issued to them.
- Suspend the trapping of feral/community cats. Broward County Animal Care will suspend the intake of any trapped feral community cats until further notice. Only injured, sick or abused cats will be accepted. Trappers are asked not to trap any cats with the intent of bringing them to the Animal Care Adoption Center. Trapped healthy cats should be released where they were trapped.
- Limit Animal Care Calls for Assistance. Until further notice, Animal Care Officers will respond only to calls that are considered high priority/emergency situations. Such calls include law enforcement assistance, injured or sick stray dogs and cats, animal cruelty and neglect complaints, bites, and dangerous/aggressive dogs.
- Take care of lost/stray pets. Residents who have found a friendly stray or lost healthy dog or cat, are asked to care for it until Animal Care resumes normal operations. Food and pet supplies will be provided. The pet should be reported to [foundpets@broward.org](mailto:foundpets@broward.org). Residents who are willing to care for the pet, will be notified if the pet's owner is located. They will also be notified when it is appropriate to bring the pet in to the shelter. If a person finds a pet that they cannot care for, they are asked to e-mail Animal Care at [admissions@broward.org](mailto:admissions@broward.org).



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<b>Dr. Diana Drogan</b> Small animals, ER, relief	<b>954-854-9426</b>	<b>dr.diana.dvm@gmail.com</b>
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<b>Dr. Stephen Waldman</b> Small animals, PT/relief	<b>561-214-3306</b>	<b>swaldman85@comcast.net</b>
<b>Dr. Fumiko Miyamoto</b> Small animals GP/ER,	<b>352-339-2207</b>	<b>theasiandoctorllc@gmail.com www.theasiandoctorllc.com</b>
<b>Dr. Tolulope Ogunyemi</b> Small animals, relief, surgery, dentistry	<b>302-464-8387</b>	<b>reliefvet4@yahoo.com</b>
<b>Dr. Murray Deckelbaum</b>	<b>954-646-2586</b>	<b>murvet@aol.com</b>

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**Cherlene Delgado, DVM, DACVO**  
**Jessica Martinez, DVM, MS, DACVO**  
**Elizabeth Giuliano, DVM, MS, DACVO (part-time)**  
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**Editorial Guidelines:** Letters and articles are welcome. All submissions must be signed and the author's name will be published. Entries must be received 7 days prior to the publication date.

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# Classifieds & Advertising

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City College is seeking a full or part time veterinarian for its Veterinary Technology Associate program in Hollywood, FL. Qualified candidates will hold a Doctor of Veterinary Medicine degree (or equivalent) and be currently licensed to practice in Florida.

Responsibilities include overseeing animal care on site, leading the teaching clinic, and classroom instruction. Teaching experience is preferred. For details or to submit resume please contact Kim Augustin at 954-744-1777 ext. 2022 [kaugustin@citycollege.edu](mailto:kaugustin@citycollege.edu)

## Refer Your Clients to a Company That Supports the AAHA Guidelines on Canine Behavior ...

*"The guidelines strongly endorse positive behavior modification techniques, such as rewarding correct behaviors and removing rewards for unwanted behaviors. Never use aversive techniques, such as shock or prong collars, cattle prods, alpha rolls, or beating, which harm the human-animal bond, problem-solving ability, and health of the pet.*

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