



# THE CORNER INFORMER

*The Newsletter of The Southeastern Michigan Veterinary Medical Association*

Volume 26 Issue 3 September 2020

## OUR PRESIDENT'S ADDRESS

As summer winds down, we hopefully have taken some time to enjoy the season and spend quality time with family and friends. At the time of the last SEMVMA newsletter publication in June, the veterinary community was emerging from a turbulent time with many rapid changes to how we all practiced as a direct result of Michigan rising into the top 3 states with cases of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), now commonly called COVID-19. Veterinary teams showed amazing resilience during a trying time, continuing to care for their patients in an ever-changing local environment. It sounds like veterinary practices across the country are extremely busy, which can be both good and, at times, overwhelming. Many of us are still providing curbside service or a hybrid of that plan in our practices along with extra cleaning and health monitoring with our teams. I doubt that many of us really anticipated how much our lives would be so dramatically changed as a result. Since that time, so many things have had to be modified, postponed or canceled. The Annual SEMVMA Golf Outing and also the Annual Holiday Party for the Southeastern Veterinary Community have officially been postponed until 2021. These are added to numerous changes to vacations, graduation parties, weddings, funeral planning, how children are educated and how we attend continuing education events. Frankly speaking, it appears that just going to the store and out to dinner have new meaning in our world these days. I truly hope that you and your families have been fortunate to remain safe throughout these changes.

Speaking of continuing education, SEMVMA has a fantastic continuing education program starting soon. You should have received 2020-21 CE brochures recently for both veterinarians and veterinary technicians. However, since the brochures were printed, the SEMVMA Council has voted to transition to a completely virtual educational series for the coming CE cycle. Many other organizations, including the AVMA and MVMA, have made that transition this year due to safety concerns with COVID-19 and travel. While we struggled with how to move forward, we feel that it is the right decision for the time at hand. The obvious drawback is that we won't be gathering as colleagues and catching up with each other over lunch during the in-person meeting format. However, the virtual seminar approach will provide the same top-quality education for everyone with opportunities to ask questions of the speakers, while remaining comfortable and safe at home. The virtual educational seminar pricing has been adjusted to reflect some savings for everyone and will hopefully make the series more accessible to colleagues who may not have been able to travel to attend in

person previously. Please be aware that attendance for the seminars will be required on the day of the program as these sessions will not be recorded for replay later. More information about the upcoming program is available on our website at [www.semvma.vet/ce-calendar.pml](http://www.semvma.vet/ce-calendar.pml) and is also included within this newsletter for your convenience.



*Tari Kern*

It is human nature to dislike change, especially when it arrives unexpectedly. However, I would invite you all to look for the positives in our current situation. In many ways, life has slowed down, enjoy it (especially if your office is super busy). We can all embrace the opportunity to focus on health, family and friendships. We can evaluate what is essential to our happiness, our lives and nurture that rather than frustration. Support local businesses. Reach out to our communities and offer help to those less fortunate. Visit museums – Michigan Science Center, the Detroit Institute of Arts, Greenfield Village, Yankee Air Museum and many more have much to teach. Explore our county, state and national parks – Kensington Metropark, Stony Creek Metropark, St. Clair Metropark, Sleeping Bear Dunes, Tahquamenon Falls, Pictured Rocks National Lakeshore, Headlands International Dark Sky Park, and many more. Go camping. Visit the beach. Check out Belle Isle, the Detroit Zoo, Howell Nature Center, Binder Park

Zoo, the botanical gardens at Michigan State University, Frederik Meijer Gardens & Sculpture Park, and the list goes on. Michigan is full of amazing treasures that are meant to be experienced. Enjoy the upcoming fall season and all that our beautiful state offers. Social distance, but maybe try it just a little away from home. It is definitely a different time compared to one year ago, but life is what we make it.

It has been over 100 years since this country has faced such a broad public health crisis. Whether you agree or disagree with the steps taken to keep the population safe and healthy, adapting to change is difficult for everyone. We are all in this together as we navigate the coming months. Moving forward, I plan to try to take each day as it comes and to be as patient, kind and open-minded as possible as we all have different experiences in this daily struggle to maintain some degree of normal in this sea of uncertainty. With so many things in flux and subject to change in 2020, please take care of yourselves and your families - know that you truly have value in so many ways. We will emerge on the other side, stronger and more resilient, for what we have learned and experienced. "Hindsight is 2020" will have new meaning for sure!

– Cheers! *Tari*

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Veterinary Medical  
Association**

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## 2020/2021 CE PROGRAM

### WE ARE GOING VIRTUAL

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The Southeastern Michigan Veterinary Medical Association Continuing Education program will be held virtually this year. The seminars will run live on their scheduled date. We have adjusted our pricing as follows:

CE Package – Member - \$450.00

CE Package – Non Member - \$650.00

Individual Seminar – Member - \$100

Individual Seminar – Non Member - \$175



### SEMVMA Veterinary Continuing Education Program

10/28/2020 – Dr. Richard Ford: Immunology and Vaccinations

Sponsored by Boehringer Ingelheim

11/11/2020 – Dr. Michael Schaer: ER Rounds, Internal Medicine Pearls

Sponsored by Zoetis

12/16/2020 – Dr. Kristin Kirkby: Physical Therapy & Rehabilitation

Sponsored by Elanco

02/24/2021 – Dr. Douglas DeBoer: Dermatology

Sponsored by Purina

03/24/2021 – Dr. David Williams: Ophthalmology

### SEMVMA Technician Continuing Education Program

10/28/2020 – Dr. Richard Ford: Zoonoses...how real is the threat?

11/11/2020 – Dr. Michael Schaer: Fluid Therapy

12/16/2020 – Dr. Kristin Kirkby: Physical Therapy/Rehabilitation/Orthopedics

02/24/2021 – Stacey Booms, LVT: Neonatal Care

03/24/2021 – Dr. David Williams: Eye Anatomy and Physiology

The Technician Continuing Education Program will be offered virtually as well. The seminars are FREE to clinics with member doctors. Non Member clinics can attend for a charge of \$20. Pre-registration is required

# MEMBER Spotlight



**Dr. Richard Nurse**, SEMVMA member since 1978 has retired:

It is with mixed emotions that after 43 years I retired from active practice this past June. I started working at Moore Veterinary Hospital when I was 15 years of age cleaning kennels.

I was a 3rd generation veterinarian. My grandfather graduated from the Ontario Veterinary College with his DVM degree in 1919 and practiced large animal medicine in Ontario. My dad, Howard, and his brother, Grey, both got their DVM degrees from the Ontario Veterinary College in 1950. My dad, who was married the day after graduation, worked for the Department of Agriculture in Canada for 3 years before moving to Detroit to practice small animal medicine. He became an American citizen in 1961.

I like to tell people I was made in Canada (but I was born in the good old USA!). I was the first Nurse born in this country. I started out at Michigan State University in September of 1972 and graduated 4½ years later in March of 1977. I was fortunate enough to begin my career alongside my dad for the first 10 years. He then retired and I purchased the practice from him in 1986. As of 2020, Moore Veterinary Hospital is 84 years old!

In my retirement, my wife and I will be looking forward to traveling and spending time with our daughters, one living in Hawaii and the other living in Chicago as well as our son and grand-daughter living in Denver. We have a house in the Petoskey/Harbor Springs area that we will now be staying at more frequently. Our 40th wedding anniversary July cruise to Alaska was canceled due to the pandemic. It will be rescheduled when the coast is clear! Alaska is the only state that I've not visited! I am also looking forward to playing golf until I get that elusive hole-in-one!

*Congratulations Dr. Nurse on a well deserved retirement!*

**Dr. Nicole Grube** has some great news to report in regards to her husband's kidney transplant. Her sister-in-law has been approved to be his donor. If everything goes as planned, his kidney transplant is scheduled for October 7th, 2020.

**Dr. Michelle Meyer** wants to reach out to anyone local to Utica Community Schools or anyone who wants to help a fellow veterinary husband with his run for local school board. The more likes and shares he gets the better his chance. He's super qualified and has a passion to help make things better. Thank you!

Facebook page (needs likes and shares): <https://m.facebook.com/SteveMeyerSchoolBoard/>

Website: <https://stevemeyerschoolboard.com/>.

*Congratulations* to **Drs. Kathleen** and **Joel Smiler** as they celebrate their 50th wedding anniversary on September 19, 2020.

WE WANT TO HEAR FROM YOU! Our goal of this section is to let members know what is occurring in our lives outside of veterinary medicine. Please notify us of your recent family additions, graduations, honors, achievements, fund raising activities, civic group associations, outdoor activities and the like. Please call us at 248-651-6332 or email us at [adminsemvma@semvma.com](mailto:adminsemvma@semvma.com)

# CORNEAL FOREIGN BODIES

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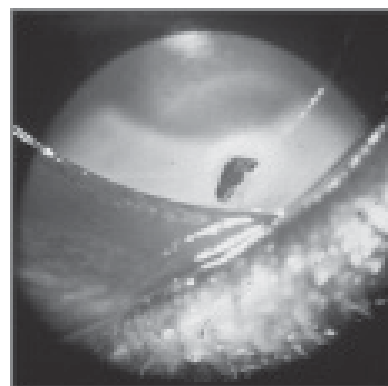
**Jen Zimmer, DVM diplomate ACVO**

Corneal foreign bodies (FB) are commonly seen in our veterinary patients. Presenting clinical signs usually include varying degrees of blepharospasm, tearing, corneal edema, conjunctivitis and uveitis. However, some superficial FBs have been reported as incidental findings. The aim of this article is to review the cornea, corneal FBs and their treatment.

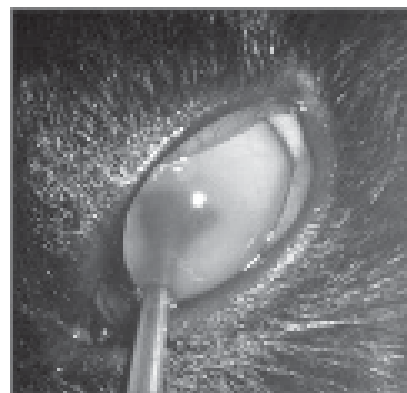
There are 3 layers of the cornea, the most exterior is the anterior epithelium, next is the stroma and the most interior is the posterior epithelium (endothelium). The average total thickness of the canine cornea is 550  $\mu\text{m}$ . Although thin, when the cornea is healthy it is an extremely strong tissue. This normally clear and dehydrated structure offers protection to the inside of the eye, such as the fragile lens that sits deeper inside the eye, and also aids in focusing images on the retina. When the cornea sustains an injury to either the epithelial or the endothelial barrier it allows fluid to accumulate in the corneal stroma. The resultant corneal edema is evident clinically as a focal or diffuse whitish-blue haze. Depending on if the epithelial or endothelial surface is damaged the corneal thickness can increase by 200-500%, respectively. In an otherwise healthy eye, the degree of corneal edema can aid in determining how severe the damage from a corneal foreign body (FB) is. Other factors that contribute to corneal edema include chronicity, intraocular inflammation or concurrent ophthalmic disease.

A superficial corneal FB is one that is adhered to the epithelium or the anterior aspect of the stroma. These can often times be removed in your office via hydropulsion, which includes using a forceful stream of eye wash from a syringe and modified needle system to flush away the foreign material (technique explained below). **A FB should not be attempted to be removed with use of a cotton tipped applicator, hemostats or other blunt instruments.** These techniques risk further damaging the cornea or pushing the FB deeper into the cornea and possibly rupturing the eye which then becomes a surgical emergency. If hydropulsion is not successful in removing a FB, the patient should be fitted with an Elizabethan collar and be referred to your local veterinary ophthalmologist on an urgent basis.

Some FBs are deeper in the cornea and/or have penetrated into the eye as seen in Figure 2. Patients with this type of injury will commonly present with severe acute ocular discomfort. These deeper foreign bodies represent an ophthalmic emergency and should only be removed while the patient is under general anesthesia with the aid of an operating microscope and micro surgical tools. This allows



*Figure 1: Superficial corneal foreign body with associated corneal edema located just lateral to the margin of the third eyelid.*



*Figure 2: Ocular foreign body penetrating the cornea, through the pupil (which is miotic in the photo) and into the lens.*



for controlled, precise and complete removal of the FB as well as repair of the corneal wound which gives the patient the best chance at maintaining a comfortable and visual eye.

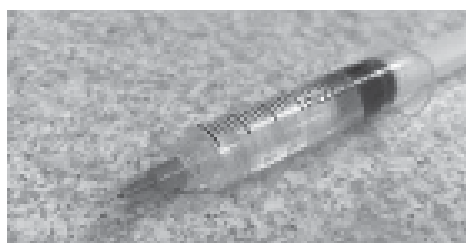
Determining the depth of a foreign body without the use of a slit lamp can be difficult. This makes it extra important to be gentle and steady when restraining a patient and opening their eyelids if there is concern for a penetrating FB. The use of a topical anesthetic such as proparacaine or tetracaine is helpful to allow a more thorough examination. Anecdotally, multiple applications of topical anesthetic spaced a few minutes apart seems to improve corneal analgesia. Sedation is required in our large animal patients and may also be indicated in painful or uncooperative small animal patients.

The photo in Figure 3 is a slit lamp photo of a full thickness corneal FB. The extent of the wound is easy to identify when viewed like this however when looking straight on at this patient, the FB appeared as a 2mm brown, raised lesion on the cornea. Without a slit lamp one needs a bright light source in a darkened room to help facilitate a thorough corneal and anterior chamber exam. If you have a dim direct ophthalmoscope, a bright cell phone light is a good substitute. Shining the light source at the eye 45-90° from your point of view and rotating around the eye looking from different angles will increase your ability to detect abnormalities.

To perform hydropulsion you will need a 6ml luer lock syringe, a 25 gauge needle, eye wash and a topical anesthetic. Some small animal patients will require sedation but most patients are cooperative enough without it. Horses however will require sedation as well as immobilizing the eyelids with an auriculopalpebral nerve block. If you have magnifying head loupes with an attached light source available, these are helpful for visualization but are not necessary. Fill the syringe with eye wash and place the needle on the syringe. Back the needle out of the cap until the you can see where the body of the needle meets the plastic hub. Then, using the cap of the needle bend the needle back and forth until the needle breaks off, discard the free needle tip. Ideally



*Figure 3: Penetrating corneal foreign body surrounded by corneal edema. Note the thin cornea at the bottom of the photo compared to the thick edematous cornea near the FB toward the top.*



*Figure 4: Syringe with modified needle and filled with eyewash ready for hydropulsion.*



*Figure 5: Photo depicting hydropulsion from Labelle et al JAVMA, Vol 244, No 4, February 15 2014*

the needle should be broken off right at the end of the hub (Figure 4). Next restrain the patient, numb the cornea and manually retract the eyelids with your fingers. With the syringe in your dominant hand at approximately a 45° angle from the surface of the cornea, aim the needle toward the edge of the FB and flush forcefully. Try to keep the tip of the needle at least 6" away from the eye to avoid accidental contact, however it needs to be close enough to produce a forceful stream of eye wash. A superficial FB will rinse off of the eye and hopefully out onto the patient's face or onto the table. If it is moved to the conjunctiva you could continue to flush it away or use a sterile cotton swab to remove it. A cotton swab is also a good tool to use to look behind the third eyelid for any additional FBs. Once the FB has been removed then do a fluorescein stain on the eye as there is usually a corneal ulcer that will need to be addressed.

Treatment after removal of a superficial FB includes a broad-spectrum topical antibiotic such as ofloxacin, Neo-Poly-Bac or Neo-Poly-Gram should be used 4 times daily until the ulcer is healed. A single dose of a mydriatic agent such as atropine should be given to help relieve discomfort from the spasm of the ciliary body. I usually give a single dose at the appointment and only prescribe it for at home use if the patient has severe uveitis with miosis. In addition, autologous or allogenic serum drops can be prescribed 4 times daily to decrease the risk of corneal melting. Serum may be overkill in patients with uncomplicated superficial ulcers however due to the risk of embedded bacteria from a contaminated FB, especially in deeper wounds it is a cheap way to decrease the risk of melting. Oral pain relief in the form of an NSAID or other drugs such as tramadol or gabapentin should be prescribed on an as needed basis. The patient should also be fitted with an Elizabethan collar. At a recheck in 7 days most of these ulcers will be healed and medications can be discontinued.

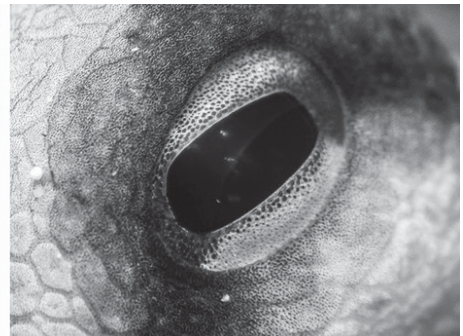
When done properly, hydropulsion does not harm the corneal surface and is highly successful. A case series of 15 dogs by Labelle et al in 2014 published in the Journal of the American Veterinary Medical Association reported 100% success and did not have any adverse effects on the patients. These patients were also healed at a mean of 6 days. I hope this article gives you some extra tools in your ophtho toolbox and allows you to provide an extra service at your clinic. If you have any questions, I would be happy to answer them. I can be reached at [ophtho@ovrs.com](mailto:ophtho@ovrs.com).

## CANCELLED DUE TO COVID



### 49th Annual Holiday Party

In recognition of the unique circumstances created by COVID-19 and concern for the safety of all, the 49th Annual Holiday Party for the Southeastern Veterinary Community will not be held this November. We look forward to planning a grand event to celebrate the 50th year in 2021



## MEMBERSHIP COMMITTEE REPORT

Please join us in welcoming the following new members to SEMVMA...

**Dr. Kim Quandt**, MSU, 2011 Oakland Veterinary Referral Services, Bloomfield Hills, MI

**Dr. Jordan Berzsenyi**, MSU, 2016 Oakland Veterinary Referral Services, Bloomfield Hills, MI

**Dr. Donna Williams**, Tuskegee Institute, 1981

**Dr. Karie Haase**, MSU, 2020 Southpointe Veterinary Hospital, Allen Park, MI

**Dr. Bradley Boike**, University of Illinois, 2017 Meadowbrook Veterinary Clinic, Novi, MI

The 2020 membership committee is composed of 3 members:

Michelle Meyer, DVM (Chair) [michellemeyerdvm@gmail.com](mailto:michellemeyerdvm@gmail.com), Tim Duncan, DVM, [Duncan@oaklandanimal.com](mailto:Duncan@oaklandanimal.com) and Tari Kern, DVM [tkerndvm@yahoo.com](mailto:tkerndvm@yahoo.com). Please feel free to contact any of us if you have any questions. If you know of a veterinarian in the area who is not a member but may be interested in joining, please contact any member of the membership committee of the SEMVMA office and we will be happy to send them information.

# SEMVMA MEMBER COVID 19 POLL

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What have you found to be the most helpful in relieving COVID related stress on either veterinary staff members or clients?



## GOOD COMMUNICATION

- Listening to the team - implementing suggestions
- Reminding people times are hard and stressful
- Acknowledging feelings and reality
- Acknowledging stress affecting everyone
- Discussing at staff meetings - allowing everyone to share their thoughts



## APPRECIATION

- Sharing letters of client gratitude
- Thank yous
- Positivity
- Food
- Bonus



## SCHEDULE MANAGEMENT

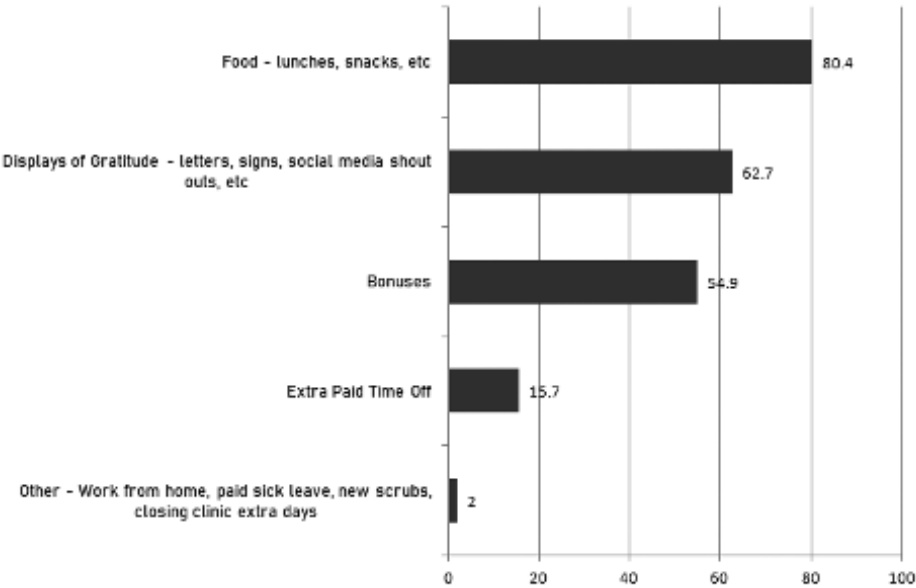
- Lengthen appointment times
- Stop seeing new clients
- Schedule fewer appointments
- Close Saturdays
- Realistic schedule/limit work ins

## OTHER

- More phone lines
- Check-in forms
- Texting software
- Alcohol
- Curbside

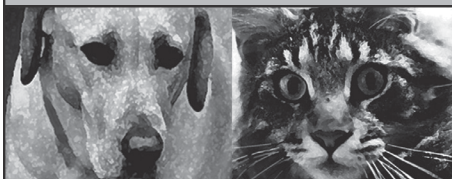


WHAT HAVE YOU OR YOUR PRACTICE BEEN DOING  
TO SUPPORT STAFF MEMBERS?



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# OPPORTUNITIES

## VETERINARIANS

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Full and part-time small animal veterinarians needed for a well-established, progressive, multi-doctor practice in Livonia, Well-equipped hospital with ultrasound, Cardell monitors, digital dental radiography, Companion laser, in-house laboratory equipment, and digital radiography. Must have great client communication skills, commitment to a teamwork approach, and practice compassionate high quality medicine. Loyal, long-term clientele and staff. LVTs utilized. Excellent benefits. Contact Jessica@dadamoveterinary.com

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Part Time Vet for Spay/Neuter: Friends of Michigan Animals Rescue is looking for a licensed vet to perform spay/neuter procedures for our TNR program and shelter animals. Other surgeries are negotiable depending on skill and comfort level. Position would be 2-3 days a week and hours are flexible. Contact 734-461-9458 or shelter1@comcast.net for more information on the position.

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## CLINICS FOR SALE

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## NEWSLETTER ADVERTISEMENT POLICY

In order to preserve the educational and informative purpose of the SEMVMA newsletter, the SEMVMA council adopts the following policy regarding advertising. Ads should be submitted to Barb at adminsemvma@semvma.com

Practices or businesses with a common owner shall be treated as one business or practice for the purpose of this policy (referred to as "Common Owner Business or Practice"). A common owner is a person or entity which owns 5% or more of an entity or practice. Shareholders or sole proprietors of an entity or practice shall be considered an owner along with the entity that holds an interest in the business or practice.

Corporate ¼ page ads are limited to one business, owner or corporation for each issue of the SEMVMA newsletter. This is in the interest of having the newsletter inform the association and not overwhelm them with ads. The SEMVMA council may modify or waive the application of this policy on a case by case basis at the discretion of the council.

Ads will run only once unless a request is submitted to the Administrative Secretary to run longer. Classified ads are \$15 for 60 words or less and \$25 for 61–100 words. Corporate ¼ page ads are \$135 per issue or \$500 for four issues. Payment is due at the time of the initial ad placement.

SEMVMA Members interested in providing Relief Veterinary Services can advertise in the newsletter at no charge. The classified ads must follow the same guidelines regarding number of words and deadline restrictions as all other classified ads. If you are a SEMVMA member interested in placing a classified ad, please contact Barb at 888-SEMVMA-5 or www.adminsemvma@semvma.com.

Newsletters are published quarterly: on March 15th, June 15th, September 15th and December 15th. All ads should be submitted to the SEMVMA office by the 15th of the month preceding publication.

The Southeastern Michigan  
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# TO:



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