



THE CORNER INFORMER

The Newsletter of The Southeastern Michigan Veterinary Medical Association

Volume 32 Issue 2 June 2026

OUR PRESIDENT'S ADDRESS

As summer begins, the SEMVMA Council is hard at work planning our upcoming Continuing Education seminars for Fall/Winter 2026 and 2027.

In addition to our CE programming, we are excited to be organizing several social events that support both our veterinary community and local charitable organizations. With warmer weather finally here, we are looking forward to reconnecting with colleagues, classmates, and friends throughout the season.

These events are a wonderful opportunity to strengthen our veterinary community. If you know a recent graduate entering the profession, please remind them that their first year of SEMVMA membership is free. We all remember the challenges that come with those early years in practice, and having a strong professional support network can make all the difference.

Summer Events

SEMVMA Baseball Night – July 18, 2026

Our second summer event will be a family-friendly evening at Jimmy John's Field (now UWM Field) on Saturday, July 18th. Members and their families are invited to enjoy a doubleheader

baseball game and barbeque. Gates open at 4:00 PM, with the first game beginning at 5:00 PM. Children can enjoy running the bases, meeting the team mascot, and visiting with JJ the Bat Dog.

31st Annual Golf Outing – August 19, 2026

Our third event of the summer will be the 31st Annual SEMVMA Golf Outing on Wednesday, August 19, 2026, at Tanglewood Golf Club. The event will feature a four-person scramble with a 9:00 AM shotgun start and check-in from 8:00–8:45 AM. Proceeds from the outing will

benefit Leader Dogs for the Blind. This annual favorite includes raffle prizes, great networking opportunities, and a course enjoyable for golfers of all experience levels.

As we move into the fall season, planned CE topics currently include: Dentistry, Oncology, Nutrition and Feline Medicine. We are always looking for additional topic ideas and speaker recommendations. If there is a subject you would like SEMVMA to present in the future, we would love to hear from you. Wishing you a great summer of sun and fun! – Barb Easton



Barb Easton

**Southeastern Michigan
Veterinary Medical
Association**

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9 AM–12 PM

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2026/2027 CONTINUING EDUCATION

VETERINARY PROGRAM

10/14/2026 – Dr. Deb Linder – Nutrition
11/11/2026 – Dr. Laura Garrett – Oncology
12/2/2026 – Dr. Amy Thomson – Dentistry

Sponsor: Hill's

02/2027 – TBD

03/17/2027 – Dr. Petra Cerna – Feline Medicine

Sponsor: Stokes/Epicur Pharma

Sign-in for the conference begins at 8:30 am, with the seminar beginning at 9:00 am. Continental breakfast and full lunch are included. The seminars will conclude at 5:00 pm.

TECHNICIAN PROGRAM

10/14/2026 – Dr. Deb Linder – Nutrition
11/11/2026 – Danielle DeCormier, LVT – Oncology
12/2/2026 – Dr. Amy Thomson – Dentistry

02/2027 – TBD

03/17/2027 – Dr. Petra Cerna – Feline Medicine

Sign-in and dinner for the conference begins at 5:45 pm with the seminar starting at 6:30 pm. The seminars will conclude at 8:30 pm. For each SEMVMA member in your practice, one technician or staff member can attend each of the seminars for FREE. The cost for additional staff members or for the staff of non-SEMVMA members is our regular charge of \$40.

You must RSVP to ensure a meal and proceedings. Seminars will be held at
The Management Education Center
811 West Square Lake Road, Troy, MI, (248) 879-2456

You can attend our meetings in person or virtual, your choice! Please contact Emilie at the SEMVMA Office to register (248) 651-6332
SEMVMAsecretary@gmail.com

TECHNICIAN SPOTLIGHT



Jessica Pittman – A dedicated advocate for her field, Jessica currently serves on the MAVT Board and is part of the MVMA task force for defining the scope of practice for LVTs. She is a true champion for continuing education and is deeply passionate about empowering technicians to practice to the fullest extent of their credentials.



Valerie Wade – Known for her medical excellence and robust technical skills, Valerie is a natural educator at heart. She is deeply passionate about mentoring veterinary assistants and guiding newly credentialed technicians as they advance their careers and build confidence. In her current role in clinical education at MedVet, she's helping to create standard processes and new training protocols for nursing teams.

SAVE THESE DATES!

July
18



**SEMVMA Summer Picnic – UWM
Field Utica, MI**

Gates Open 4 PM

Double-Header Mammoths vs Beavers

August
19

Annual Golf Outing
9 AM

January
8

Membership Celebration
Somerset Inn, Troy, MI

SEMVMA OUTREACH

Are you interested in hosting a Science, Technology, Engineering, and Mathematics (STEM) event or mentoring a future veterinary professional through an Online Veterinary Assistant Program?

Contact Pierre DePorre (pdeporre@deporrevet.com | 248-703-1796) for examples of what SEMVMA members have accomplished through local and county school programs.



MEMBERSHIP COMMITTEE REPORT

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

Dr Mackenzie Tarockoff, St George, 2024 - Center Line Veterinary Hospital, Center Line, MI

The 2026 membership committee is composed of Pierre DePorre, DVM pdeporre@deporrevet.com, and Barbra Easton, DVM easton@vet-vision.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 a member of the membership committee or the SEMVMA office and we will be happy to send them information.



Thirty-first S.E.M.V.M.A. GOLF OUTING

Who: Veterinarians, hospital staff, family members, friends of the SEMVMA, and anyone who enjoys a fun day in the sun with great people.

When: Wednesday, August 19, 2026 9:00 A.M. Shotgun Start – **Check in 8:00am – 8:45am**

Where: Tanglewood Golf Club, 22805 Country Club Drive, South Lyon, MI 48178 (248)486-3355

Format: Four-Person Scramble

Cost: \$170.00 per golfer includes 18 holes of golf with cart, box lunch and dinner banquet.

Hole-in-one contest, numerous prizes. (Raffle prize tickets will be sold at the course.)

SOFT SPIKES AND PROPER ATTIRE REQUIRED.

- ALL PROCEEDS FROM THIS EVENT WILL GO TO LEADER DOGS FOR THE BLIND -

DEADLINE FOR REGISTRATION AND PAYMENT: Wednesday, August 19, 2026

Please return completed form to Emilie at S.E.M.V.M.A., 58731 Lind Rd, Washington, MI 48094
email: semvmasecretary@gmail.com **Payment by credit card may be made by phone at 248-651-6332 - Make all checks payable to S.E.M.V.M.A.**

Direct your questions to Dave Smith at cell: 248-909-9809, e-mail: dsmith@leaderdog.org or Pierre DePorre cell: 248-703-1796, email: petpete@aol.com or Frank Carmona email: drcnhvh@gmail.com

Name: _____
Address: _____
City: _____ ZIP Code: _____
Phone Number: _____ E-mail address: _____

Sponsorship Opportunity – Hole Sponsor - \$250.00 Signage recognition at the hole

Please circle: Individual (\$170, Foursome (\$680) - If you are registering a foursome, threesome, or twosome, please list other golfers and their phone numbers below. Include yourself in the list:

1. _____ email _____
2. _____ email _____
3. _____ email _____
4. _____ email _____

If you register a foursome, you are responsible for informing all of your golfers with directions to the course, start time, etc. **TOTAL AMOUNT ENCLOSED** _____



*Join us for a night of fun,
entertainment & baseball
at UWM Field in Utica!*



Southeastern Michigan Veterinary Medical Association Summer Picnic

**DOUBLE-HEADER
MAMMOTHS VS. BEAVERS
SATURDAY, JULY 18 - 5:00 PM
GATES OPEN 4:00 PM**

Group Perks Include:

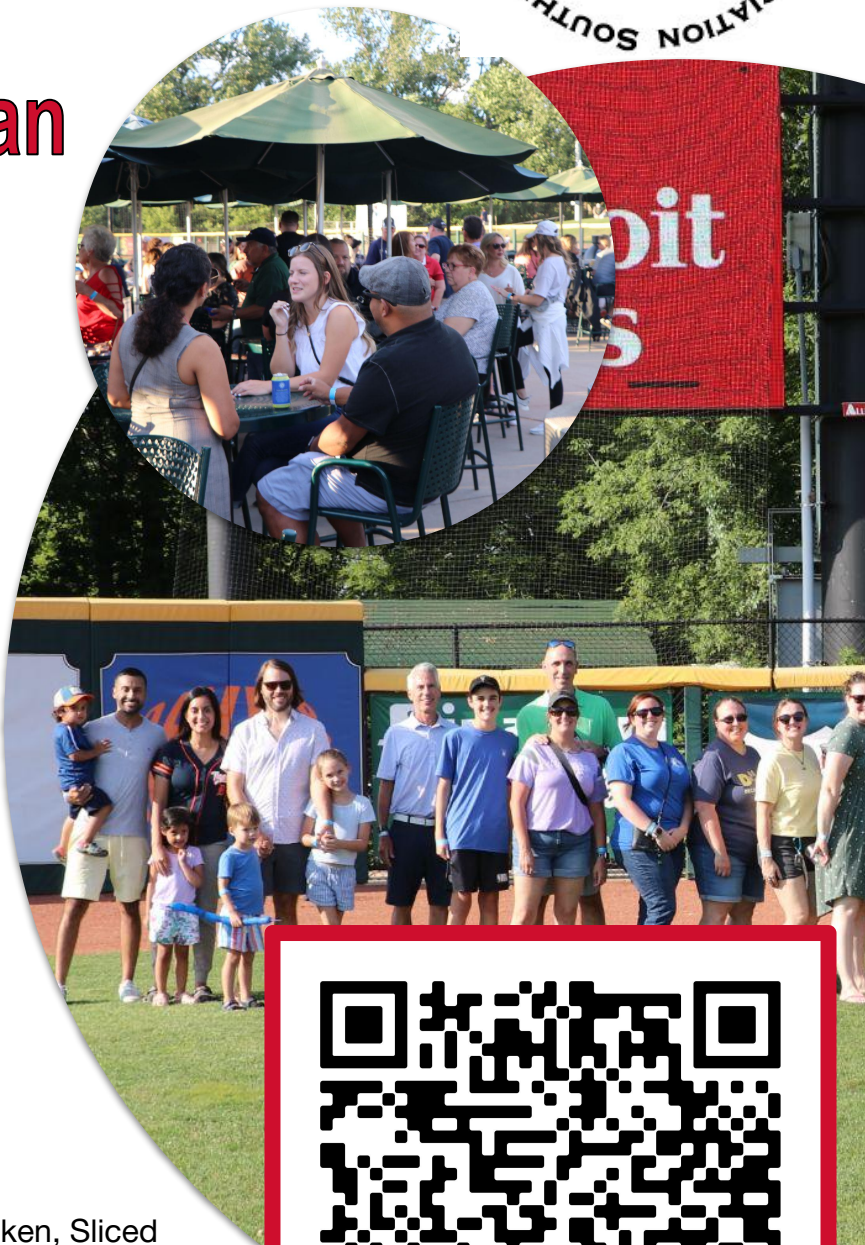
- Game seating in party patio area
- Group photo on the field
- Welcome message on the scoreboard
- Kids Run the Bases after the game
- Meet JJ the Field General, the bat dog
- Meet & Greet with a team mascot
- Free Parking

Enjoy an All American BBQ!

Premium Hot Dogs, Slow Roasted BBQ Pulled Chicken, Sliced Smoked Sausage with Peppers & Onions, Fresh Pasta Salad, Coleslaw, Baked Beans, Potato Chips, and Cookies. *Food is served starting when the gates open for 90 minutes.* Guests will receive unlimited soft drinks, lemonade, iced tea, and water.

Click or Scan QR Code To Purchase Tickets

Contact the SEMVA office for any questions at (248) 651-6332 or
SEMVAsecretary@gmail.com.





WHEN A “MAYBE BLOCKED” CAT TURNED INTO AN ENDOCRINE ZEBRA

Michelle Meyer, DVM

Every veterinarian knows the unique suspense of an end-of-day Saturday appointment before a holiday weekend. This particular case began at 1:30 PM on Easter weekend Saturday, with our clinic closing at 3:00 PM. The owner of a 23-month-old neutered male domestic shorthair called because his cat had been hiding under the bed and was not eating. Under many circumstances, this might have been a reasonable “monitor and see your regular veterinarian Monday” conversation. However, because he was a young male cat, I was unwilling to ignore the possibility of urinary obstruction. Had this been a female cat with the same history, I may very well have advised monitoring at home. But we all know that “male cat not eating and hiding” has a way of ruining weekends, so in he came.

Interestingly, when the cat arrived, he looked surprisingly normal. His exam was largely unremarkable aside from elevated third eyelids, which the owner reported were chronic and unchanged. He was a good weight, hydrated, comfortable, and his bladder was soft and small. Thoracic auscultation was normal, abdominal palpation was unrevealing, and overall he looked far more stable than many cats who present simply because they have “a weird feeling.” Radiographs were similarly unexciting. At that point, the case was beginning to feel like one of those classic feline presentations where stress, mild GI upset, or simply “cat reasons” might ultimately be blamed.

Then the bloodwork returned.

The chemistry panel revealed severe hypocalcemia. Not borderline hypocalcemia. Not “albumin is low so maybe that explains it” hypocalcemia. Profound hypocalcemia. Naturally, my first assumption was analyzer error, because surely a cat this clinically stable could not have calcium values that low. We reran the sample, fully expecting the numbers to normalize.

They did not.



Suddenly, the quiet Easter weekend appointment transformed into a full endocrine puzzle. Severe hypocalcemia in a young cat is not a diagnosis most of us routinely encounter, and primary hypoparathyroidism in cats sits firmly in the category of “things you remember studying for boards but never expect to diagnose.” Yet the pieces began to fit uncomfortably well.

I contacted internal medicine through IDEXX to discuss the case because I was increasingly concerned about hypoparathyroidism and wanted guidance on immediate stabilization. Complicating matters further, this was late Saturday on a holiday weekend. Referral to a specialty hospital and referral to a 24-hour emergency facility were both recommended and both declined due to financial limitations. To make the situation slightly more stressful, I also did not have injectable calcium gluconate available in the hospital. We discussed diagnostics and treatment options extensively while simultaneously trying to formulate a safe outpatient plan that could bridge this cat through the weekend using liquid oral calcitriol obtained from a human pharmacy along with oral calcium supplementation via Tums.

Blood samples were collected for PTH, ionized calcium, and vitamin D testing, though because of the holiday weekend, they would not leave for MSU until Monday. In the meantime, after additional consultation with internal medicine, we initiated oral calcium supplementation along with calcitriol while awaiting definitive results. Dosing calcitriol in these cases can feel less like prescribing medicine and more like carefully balancing a chemistry experiment. Too little supplementation risks recurrence of hypocalcemia, while too much creates an entirely different set of problems involving hypercalcemia and soft tissue mineralization.

Collected: 04/04/2026 15:00		Received: 04/07/2026 15:15		Verified: 04/08/2026 14:51
Procedure	Result	Result	Units	Ref Interval
Parathyroid Hormone (CLIA)	<0.50	L	pmol/L	[0.70-3.40]
Ionized Calcium (ISE)	0.65	L	mmol/L	[1.00-1.40]

Accession Number: 26-094-000343

Collected: 04/04/2026 15:00		Received: 04/07/2026 15:15		Verified: 04/08/2026 14:54
Procedure	Result	Result	Units	Ref Interval
25-Hydroxyvitamin D (CLIA)	310		nmol/L	[93-327]

Ultimately, the testing confirmed primary hypoparathyroidism.

Primary hypoparathyroidism is rare in cats and results from inadequate secretion of parathyroid hormone (PTH), which plays a critical role in calcium homeostasis. Under normal circumstances, PTH increases serum calcium through several mechanisms: mobilizing calcium from bone, increasing renal calcium reabsorption, and stimulating conversion of vitamin D to calcitriol, which in turn enhances intestinal calcium absorption. When PTH is deficient, serum calcium concentrations fall while phosphorus concentrations often increase due to reduced renal phosphorus excretion.

The resulting hypocalcemia is responsible for the clinical signs associated with the disease. In more severe or acute cases, patients may present with muscle tremors, facial rubbing, weakness, seizures, tetany, or cardiac arrhythmias. Cats, however, often seem committed to presenting endocrine disease in the vaguest manner possible. As in this case, clinical signs may be surprisingly subtle despite profound biochemical abnormalities.

Diagnosis is generally based on documentation of hypocalcemia (preferably ionized hypocalcemia) in conjunction with an inappropriately low or normal PTH concentration. Treatment centers on stabilizing calcium levels through oral calcium supplementation and calcitriol therapy, with careful long-term monitoring to avoid both recurrent hypocalcemia and iatrogenic hypercalcemia.

What made this case particularly fascinating was how subtle the clinical presentation truly was. This cat did not present seizing, tetanic, or profoundly debilitated. There were no dramatic muscle fasciculations or overt neurologic signs. Instead, his symptoms amounted to hiding under the bed, decreased appetite, and generally seeming "off." It was an excellent reminder that cats often present severe disease with an almost offensive level of subtlety. While textbooks frequently emphasize dramatic manifestations of hypocalcemia, feline patients do not always feel obligated to read the textbook before arriving for their appointments.

The cat is currently doing very well with ongoing management and monitoring. As expected, long-term regulation has required careful adjustment of oral calcium and calcitriol dosing along with serial calcium monitoring. These cases are rare enough that treatment protocols can feel somewhat individualized, and even small dose changes may significantly impact calcium homeostasis.

Cases like this are part of what makes veterinary medicine simultaneously exhausting and endlessly interesting. What initially appeared to be a routine "possible blocked cat" appointment became one of the rarer endocrine diagnoses many of us will encounter in practice. It also reinforced several important lessons: always recheck lab values that seem impossible, never underestimate feline subtlety, and perhaps most importantly, never trust a last-minute holiday weekend appointment to remain simple.



5/9/26

11:53 AM



Calcium

9.3

7.8 - 11.3 mg/dL





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