

Reflections on a Service Profession: "Integrity" Part 2 of 3

Last weekend as I was rummaging around in a bin of watermelons at our local market, my 4 ½ year old daughter interrupted my quest with the following mandate: "Make sure to get a good one, papa, with none of those yucky seeds!" As I renewed my search with this more refined criteria, I found myself chuckling and pausing to remember fond moments from my own childhood. One of those memories was of my sister and me sitting on the porch in two lawn chairs munching melon from the rind and spitting seeds into my grandmother's garden (and at my sister when my grandfather wasn't looking...) Alas, we now are able to engineer melons without seeds and my two daughters, at least, will be spared mutual target practice. In some cases change may well be for the better!

As summer enters full swing, in the light of new memories mixed with old, I find myself reflecting once again on all the change that has occurred in the months of 2010 and thinking also of how that has played out on the clinic floor. As a profession (and our VSC experience certainly has mirrored this) we've been compelled to find opportunity in adversity, been asked to share the anxiety and fear of these uncertain economic times, and have been moved by the immense compassion necessary to offer veterinary services to families on the verge of losing everything. At VSC we've endeavored to provide the community with a healthy dose of creativity as we continue to seek and find ways to provide advanced surgical services at the highest level possible...even in these most demanding of times. What inspires me and humbles me most is that our referring veterinary practitioners continue to send their most loyal, dedicated and highly engaged pet owners to our doorstep for our advice and technical skills. For this we remain grateful.

When I was in college I took a composition course in which we were required to define an abstract concept. One of these

abstractions was "Integrity". While we discussed this within our groups one student very movingly said: "Integrity is taking care of something as if it were your own." Another shared, "Integrity is a sincere desire in word and deed to demonstrate The Truth- and The Truth does not change". This is what we found when we examined how Integrity manifests itself in the hospital:

Veterinary Surgical Centers: Integrity

- Our Best: Your referrals will receive our utmost attention, effort and skill
- Our Word: You can rely on us to take our commitment seriously and continuously
- Our Skill: We will continue to explore creative alternatives that improve our ability to heal our injured companions
- Our Focus: In order to care for something as if it were our own we will 'be still', even on busy days, to simply listen with our whole mind

Integrity Mantra

We will do what we mean, We will mean what we say, and, We won't say it mean!

We look forward to sharing part 3 of 3 "Reflections of a Service Profession" in our Autumn Newsletter.

Sincerely,

John J. Haburjak, DVM Diplomate ACVS

Jhaburjak@vscdsurgerycenters.com (VM) 925-215-8460



CONTINUE TO EXPECT...

Direct contact with a VSC surgeon 7 days a week for consultation, case support and for scheduling referral and mobile surgery. (925-201-3400 or 510-595-4600)

Electronic case and radiographic case consultation 7 days a week. deltasurg @yahoo.com

24 hour/day surgery by a completely trained veterinary surgeon. Residents will not be performing surgery on your referrals.

Mobile veterinary surgical services by a skilled and experienced surgeon with 'low-impact' on your daily staff and procedural operations. Most surgeries (including TPLO) are performed in less than 2 hours.

SUMMARY OF SERVICE OFFERINGS

WHAT CAN VSCD OFFER YOUR FACILITY?

Board-certified surgical expertise

Receiving referrals for advanced consultation, diagnostic and surgical services

Providing surgical services at your facility with minimal impact on your daily operations and resources

Offering telephone or electronic (email) consultations

Giving on-site continuing education lectures personalized to the needs of your staff

Providing complimentary informational brochures and pamphlets for use internally and for clients

THE SURGEONS OF VSC



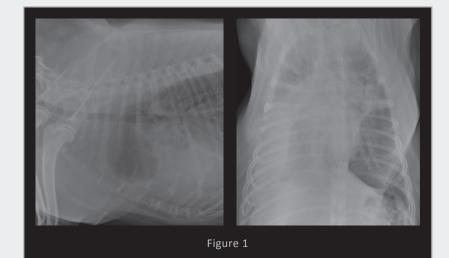
John J. Haburjak

Kimberly R. Carlson

Alastair R. Coomer

FEATURED MEDICAL CASE CHEST WALL MASS RESECTION

Lady is an 11-year-old spayed female Labrador retriever that presented to the emergency clinic for nonspecific discomfort and excessive panting. Initial stabilization and diagnosis revealed pleural effusion and a mass on the right side of the chest wall. (Figure 1) We removed the fluid from Lady's chest and she immediately became more comfortable. Unfortunately the effusion recurred three days later, and Lady was reassessed at the emergency clinic.



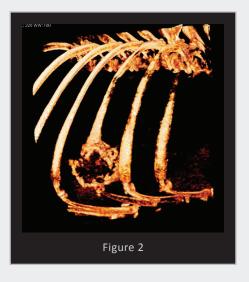
Consultation between the emergency service, the surgical service and the owner determined that the chest wall mass could be neoplastic and was likely bleeding into the chest. We performed a CT scan (Figure 2) to establish the extent of the mass' growth in the rib and the surrounding chest wall. Surgical removal of the mass with a margin of normal chest wall was performed, and the defect in the body wall was reconstructed using autogenous latissimus dorsi muscle. Lady was discharged from the hospital three days after surgery, and, by the time her sutures were removed 10 days post-operatively, she was feeling well and back to her old tricks (Figure 3; also see the video at www.vscdsurgerycenters.com).

...Featured Medical Case continued

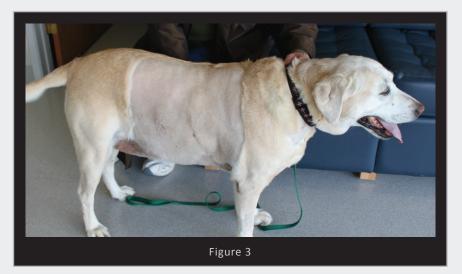
Biopsy and staging of Lady's chest wall mass revealed a completely excised, low-grade osteosarcoma of the right 7th rib with no evidence of metastasis. Lady is currently receiving follow-up chemotherapy to prevent recurrence.

Important clarifications and takehome points regarding chest wall masses:

 Osteosarcoma and chondrosarcoma are the most common primary rib tumors in dogs with approximately 60% osteosarcoma



- Rib tumors should be resected with wide margins to reduce the risk for local recurrence: local recurrence is an important negative prognostic indicator
- Prognosis for primary rib chondrosarcoma is very good with surgical excision alone (MST > 1300 days or ~3.5 years)
- Prognosis for primary rib osteosarcoma is guarded due to metastatic disease (MST = 290 days or ~9 months) and prognosis is significantly worse with elevated ALKP (MST 675 days or ~2 years if ALKP is normal)
- Chest wall reconstruction with autogenous muscle flaps is associated with a low rate of infection and other complications
- Most dogs remain in hospital for only 3-4 days post-operatively, and are comfortable and active by suture removal



For more information on this case, or on surgical oncology in general, please contact Drs. Carlson, Coomer or Haburjak.

Alastair R. Coomer, BVSc, MS, DACVS acoomer@vscdsurgerycenters.com

NOTABLE NEWS

FRANK OLIARO ACCEPTED TO GRAD SCHOOL

VSC would like to offer its heartiest congratulations to our surgery technician, Frank for his recent admission to graduate school at San Francisco State University where he will be studying Conservation Biology. Though his full-time presence will be greatly missed by the staff we unreservedly support him in what we are certain will be great contributions to his field.



NOTABLE NEWS

DID YOU KNOW?

You and your colleagues can "Go Green" and receive this newsletter (and other materials) electronically! To find this in your inbox instead of your mailbox simply email us at info@vscdsurgerycenters.com and write "email newsletter" in the subject line. You may add as many staff members as you would like to the electronic mailing by cc'ing their emails or by listing them in the content of the note.



NOTABLE NEWS



CT AVAILABLE

Affordable CT's are now readily available through Veterinary Surgical Centers. Our Dublin facility, VetCare, has recently acquired a Fidex multimodality imaging system to complement its surgery, internal medicine and emergency departments. Combining computed tomography, digital radiography and fluoroscopy, the unit is seeing steadily increasing use and has been of great benefit to us and to our patients. For more information about pricing and availability, please contact a staff surgeon at 925-556-1234 or info@vscdsurgerycenters.com.

Veterinary CT, DR/CR, and fluoroscopy imaging

ARTHROSCOPY

ARTHROSCOPIC EVALUATION OF CARTILAGE PATHOLOGY

Modified Outerbridge Scoring System

0 - Normal

ANMAGE

- Chondromalacia (assessed by use of an arthroscopic probe)
- 2 Partial thickness fibrillation
- 3 Deep fibrillation
- 4 Full thickness cartilage loss
- 5 Subchondral bone eburnation

PROFESSIONAL INTEREST ARTICLE

ARTHROSCOPY

Since the first reports of arthroscopy as a method of canine joint exploration in 1978, arthroscopy has evolved as a treatment for surgical conditions of the hip, shoulder (Figures 1 & 2), elbow, carpus and hock. In contemporary referral surgical practice, arthroscopy is not only commonplace, but has become the gold standard for the investigation and the treatment of many developmental orthopedic conditions such as fragmentation of the medial part of the coronoid process (FMCP) (Figure 3) and osteochondritis dessicans (OCD) of the elbow, and OCD of the shoulder.

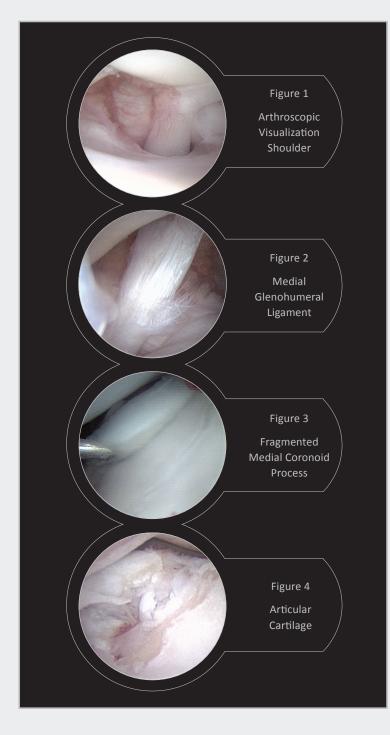
Arthroscopy has many advantages over traditional arthrotomy: significantly less tissue trauma, more complete exploration of the joint, greater precision and accuracy in diagnosis of joint pathology, and more rapid and superior short-term functional post-operative recovery.

While the merits of arthroscopy as a therapeutic modality (less trauma and morbidity than arthrotomy) are obvious, arthroscopy is also a powerful diagnostic tool, particularly in the following instances:

- A subset of dogs with elbow disease (FMCP/OCD) has clinical lameness attributable to the elbow, but do not display any radiographic evidence of elbow joint pathology. In these cases, only scintigraphy, advanced imaging (CT/MRI) and arthroscopy can accurately localize disease to and within the elbow joint. Arthroscopy provides the further benefit that treatment can often be effected concurrently with definitive diagnosis.
- 2) Neither radiography nor computed tomography can directly identify cartilage erosion (see sidebar). Arthroscopy allows the direct observation and evaluation of articular surfaces (Figure 4), and can therefore be considered the "gold standard" for clinical evaluation of cartilage lesions.
- 3) Meniscal injury occurs secondary to CrCL disease in up to 70% of cases, and is a major factor affecting quality of life and financial costs. Compared to arthroscopy, the incidence of late/subsequent/postliminary meniscal tears is approximately four times greater if an arthrotomy was performed for joint exploration at the time of surgery for CrCL injury. This alarming disparity exists because the accurate identification of medial meniscal tears is significantly greater with arthroscopy than with arthrotomy.

... Professional Interest Article continued

Arthroscopy is currently available at both the Berkeley and Dublin locations to canine patients with shoulder, elbow and stifle pathology. With the arrival of our new 1.9mm small joint arthroscope, we will soon be offering arthroscopy to our feline patients and to dogs with carpal or hock pathology. If you have any questions about arthroscopy, or would like to schedule a hospital visit to see a demonstration of our arthroscopy capabilities, please email Arthroscopy@vscdsurgerycenters.com.



NEWSROOM FEATURES

PHASE II CONSTRUCTION COMPLETE

The new patient treatment area of PETS Referral Center's construction project is now complete! Phases III and IV have commenced and will herald even more improvements and enlargement of the façade, entry and reception areas. We look forward to sharing our completed facility and increased capabilities.

RESOURCE CORNER

http://kids.cfa.org/index.html Feline education for



Feline education for youngsters brought to you by the Cat Fanciers Association

www.funpetnames.com

Tired of the same old pet names? Fun Pet Names offers thousands of names that you can browse by

origin, gender or breed. Find the perfect name for your companion!



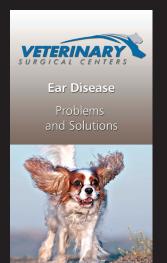
www.vasg.org

A great centralized resource for those interested in advancing veterinary anesthesia and pain management at their small animal practice. Resources include protocols for a variety of agents and techniques, suppliers for medications and agents, as well as advice about equipment purchases.



Summer 2010 Newsletter

FEATURED BROCHURE



Come. Sit. Stay

EAR DISEASE: PROBLEMS AND SOLUTIONS

This issue's featured pamphlet reviews the anatomy of the ear and the pathologies that can develop because of the ear's unique structure. It also reviews multiple surgical options available to treat chronic ear disease including lateral ear canal resection, ventral bulla osteotomy, and ear canal ablation with bulla osteotomy.

This is an excellent tool to supplement the information you already provide your clients. The brochure is also a useful mechanism for your staff to achieve greater familiarity with these procedures as well as cultivating a common language to use with each other and with your clientele.

This and other brochures can be found at and downloaded from our website at

www.vscdsurgerycenters.com. Simply access the appropriate pamphlet under the drop-down menu or click the link under "disease conditions" on the home page. For complimentary copies of any of our brochures or business cards email us any time at info@vscdsurgerycenters.com.

This issue is warmly dedicated to the memory of Cinnamon, cherished companion of our colleague Jill.

The love she was given was returned many times over and she will be long remembered.

VSCD Business Office 25-A Crescent Dr. #255 Pleasant Hill, CA 94523

Berkeley Dublin Walnut Creek

www.vscdsurgerycenters.com