



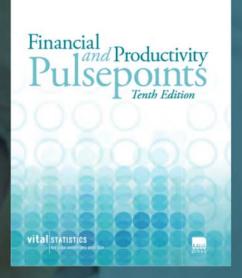
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Advocating for Pets



"Our technicians are our advocates."

-SARAH ZURMOND, CVT, CCRP

The Vital Role of Veterinary Technicians in Pain Management

by Jen Reeder

Colorado resident Amy Hempe was walking her mixed-breed dog, Sophie, one night when an unleashed dog ran out of a neighbor's yard and attacked her pooch.

"I didn't realize Sophie's pain level until the next morning—she didn't want to walk and was very quiet," Hempe recalled. "Then any pressure on her leg resulted in a whimper. It was very difficult to get her into the car to take her to the vet, but it was even harder to get out of the car."

She was incredibly relieved when a veterinary technician met her at the car and gently carried Sophie into the practice, petting the dog and helping make her comfortable once inside. The team treated Sophie for three bite wounds on the shoulder and sent her home with Rimadyl. A technician from the practice, AAHA-accredited Stapleton Veterinary Hospital in Denver, Colorado, followed up the next day to see how Sophie was doing—fortunately, much better.

"I was extremely grateful to the vet tech for helping out," Hempe said. "And here is the silver lining—once there, they found a mast cell tumor. She got it removed the next week."

Frequently Overlooked Causes of Pain Dermatologic **Hospital Procedures** Otitis, severe pruritus, burns, chronic wounds, abscess, Restraint (examination, cellulitis, clipper burns, urine obtaining blood and urine scalding, severe chin acne. samples, radiographs, and ultrasound; even gentle Ocular handling and hard surfaces can increase pain in an already Corneal disease and ulcers, painful animal). Urinary/IV glaucoma, uveitis. catheterization, bandaging, surgery, thoracocentesis, chest Dental tube placement and drainage procedures, abdominocentesis. Oral tumors, feline oral resorptive Manual extraction of stool and lesions ("neck" lesions), fractures anal sac expression (no matter how small), tooth (especially in cats). abscess, ulcers, stomatitis. Neurologic Diabetic neuropathy. Oncologic Any and all cancer. Surgical **Procedures** Ovariohysterectomy, Cardiopulmonary castration, onychectomy,* growth removal, and all Congestive heart failure (pulmonary edema and pleural effusion), pleuritis, cerebral vascular other surgical procedures. accident, thromboembolism (clot). * Regardless of method used, onychectomy causes a higher level of pain than spays and neuters. Gastrointestinal Constipation, obstipation, obstruction, megacolon; anal sac impaction; hemorrhagic gastroenteritis, pancreatitis, gastric dilatation-volvulus, foreign body. Musculoskeletal Urogenital Most often overlooked in cats. Muscular soreness, Feline lower urinary tract disease arthritis, degenerative (idiopathic cystitis, urethral joint disease, tendon obstruction, urolithiasis, urinary or ligament injury, tract infection), queening, intervertebral disc disease, whelping, acute renal failure, facet pain of spondylosis, enlarged kidneys (capsular osteodystrophy, swelling), canine urinary tract dislocations. infection, canine urolithiasis.

Source: "2015 AAHA/AAFP Pain Management Guidelines for Dogs and Cats." Journal of the American Animal Hospital Association 52.1 (2015): 67–84.

Technicians Play Many Roles

Veterinary technicians are on the front line of pain management for patients, from initial pain assessment and handling techniques to anesthesia and analgesia, post-op care, follow up, physical therapy, laser treatments, and communicating with clients. Top practices recognize that important role.

Sarah Zurmond, CVT, CCRP, staff manager at AAHA-accredited Country Hills Pet Hospital in Eden, Wisconsinthe 2018 AAHA-Accredited Practice of the Year-said veterinary technicians at the practice play the largest role in pain management, even more than veterinarians.

"Our technicians are our advocates." she said. "Doctors may do the prescribing, but our technicians are the ones who recognize pain, educate owners on what it looks like and the options that are available (with doctor approval), and give the actual treatment-whether that is a laser treatment, Meloxicam injection, or sending home treatments for owners to give. Any of our patients staying in the hospital are monitored

"We really do want to treat their pain as much as possible and get them back to normal as quickly as possible."

-TASHA MCNERNEY

closely by our technicians, who will be the first ones to recognize when we need more pain relief in a patient and alert a doctor so that we can get treatments done as soon as possible."

Zurmond herself uses the therapy laser on virtually every physical therapy patient at every visit, and the team uses it after every surgical procedure except when contraindicated, such as mass removals.

"The technicians are assessing pain scores on these patients multiple times a day in addition to when a doctor may do their exam," she said. "We discuss at every exam if a physical therapy recommendation is needed and it goes into our SOAPsanything from starting an OTC [over-the-counter] supplement to a full package of underwater treadmill/ laser therapy treatments. All our technicians are trained to do dental blocks before any dental extractions to help control pain."

Educators and Advocates

One key role of technicians is educating clients about ways to recognize pain in pets, since animals can be so good at hiding pain.

"Unfortunately, most clients believe that if the dog or cat isn't crying at home, they aren't in pain," Zurmond said. "We have to educate them on any other signs that lead up to

> vocalizing.... All patients receive a pain score at every exam, but our staff who aren't doctors need to be able

to communicate to clients what the pain score means [and] the options we may have available and also communicate that our pain score goal is always zero."

Heather Loenser, DVM, AAHA's senior veterinary officer, agreed

that veterinary technicians have a huge role in pain managementparticularly postoperatively.

"It's not that my role in surgery ends after I've completed the procedure, but my technicians become even more critical in the post-op period. I've moved on to the next patient, and I need my techs to closely watch my recovering patients and alert me to signs of post-op pain," she said. "Even when I've taken a comprehensive approach to pre-, intra- and post-op multimodal analgesia, some pets need additional management to keep them comfortable. That's where frequent pain scoring and constant communication within the team becomes critical."

Loenser noted that the 2015 AAHA/AAFP Pain Management Guidelines for Dogs and Cats are valuable for both veterinarians and technicians in developing individualized treatment for each patient. As the guidelines conclude, "Effective pain management is an essential component of companion animal medicine. It reduces disease morbidity, facilitates recovery, enhances quality of life, and solidifies the relationship among the veterinarian, client, and pet."

Tasha McNerney, BS, CVT, CVPP, VTS (Anesthesia and Analgesia), a technician at AAHA-accredited Rau Animal Hospital in Glenside, Pennsylvania, and cofounder of Veterinary Anesthesia Nerds, a Facebook group with more than 33.000 members that also hosts an annual symposium, said despite helpful resources like guidelines and scientific studies, there is still a great need for education about

pain management in the veterinary community. McNerney does a lot of relief work and practice consulting, and recently an employee at a hospital challenged her with, "Don't you want them to be in pain a little bit because then they will stay quiet in their cage?"

"At one time, in the 1960s and 1970s. we did think that because we thought it would lessen inflammation," she said. "But the fact is that improperly treating pain is actually going to

set them up for a chronic painful condition [and] make them more prone to things like neuropathic pain and wind-up phenomenon. So we really do want to treat their pain as much as possible and get them back to normal as quickly as possible."

She said another "old school" misconception is, "A spay is just a spay," when in reality, it's abdominal surgery that involves upsetting many different pain pathways and creating inflammation.

"Unless you give these patients proper analgesics, they're going to wake up painful," she asserted. "I think anyone who has had an abdominal surgery could attest to the fact that it is quite painful afterward and you do need proper analgesics."

She said reducing stress for patients before inhalant anesthesia creates a better experience for both the animal and the anesthetist. For instance, her practice frequently administers trazodone before surgery so that drop-offs are more at ease while waiting among barking dogs and meowing cats.

"If their body is full of stress catecholamines, then you're going to need more drugs to counteract those natural hormones that are flowing," she explained. "And if you have to give more drugs, then that usually means more side effects, and more side effects means more problems under anesthesia . . . especially with these older animals, we want to do everything as minimally as possible."

To boost the comfort level of older animals who may have the beginning stages of osteoarthritis, she suggested avoiding stairs whenever possible, providing comfortable bedding, and making sure older cats in particular are kept warm.

McNerney also emphasized the need for follow-up care and making sure clients understand how to give medications at home.

"Make sure, if you are sending them home with organ transmucosal buprenorphine, they know that it is not as effective if you put that medicine in the patient's food,"



Continuing education about pain management is worthwhile not only for a technician's career but for the good of the animals.

she advised. "They have to understand how to give the medication to make sure the animal is actually getting its analgesics that it went home with."

Blazing New Trails

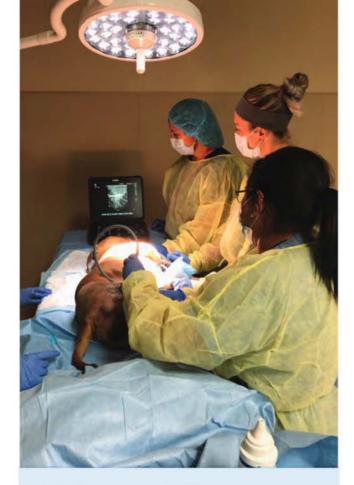
Stephen Cital, RVT, RLAT, SRA, VCCS, VTS-LAM (Research Anesthesia), surgical team and training manager at Silicon Valley Veterinary Specialists in San Jose, California, is also a cofounder of Veterinary Anesthesia Nerds. He said the site gets questions every day about pharmacology from veterinarians and technicians-particularly why some drugs work for particular patients but not for others. He urges veterinary professionals to attend conferences and participate in wet labs to stay abreast of the latest treatments, from short-term use of NSAIDs to using local blocking techniques, not just for dentals but for surgery or trauma as well.

Cital lectures frequently at conferences about pain management and said his sessions about veterinary cannabis are always the most heavily attended; Cital is also the cofounder of the Veterinary Cannabis Academy. While it's not a topic traditionally taught in school, practices are increasingly fielding questions from clients about treating pets with marijuana and CBD. He said cannabis is a tool in the pain management toolbox for treating chronic pain and arthritis, among other conditions.

As Cital noted, it is illegal at the federal level for veterinarians to prescribe or recommend cannabis products, though they are available in many states over the counter at pet stores and even online. Regulations vary widely from state to state. For instance, Ohio's new medical marijuana law banned CBD oil in 2018, while in 2019, veterinarians in California became able to discuss cannabis as a therapeutic agent (but are still not allowed to prescribe, recommend, or administer the product in hospital).

Cital said practices should not be wary of entering conversations regarding cannabis into the medical recordand instead encourages it because it's important to know if it might interact with other drugs the patient is taking.

"Just because you put it in a medical record does not mean the veterinary medical board or DEA is going to come after you," he explained. "You have to write it appropriately. You can say 'discussed endocannabinoid support' or 'discussed cannabis with client' and make it clear that you



The PLATTER Approach to Pain Management

The PLATTER method provides individualized pain management for any patient and is devised not on a static basis but according to a continuous cycle of plan-treat-evaluate based on the patient's response. The PLATTER approach involves the following:

PLan: Every case should start with a patient-specific pain assessment and treatment plan.

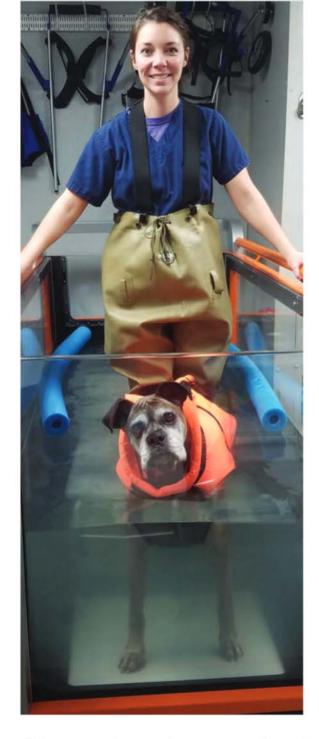
Anticipate: The patient's pain management needs should be anticipated whenever possible so that preventive analgesia can either be provided or, in the case of preexisting pain, so that it can be treated as soon as possible.

Treat T: Appropriate treatment should be provided that is commensurate with the type, severity, and duration of pain that is expected.

Evaluate: The efficacy and appropriateness of treatment should be evaluated, in many cases, using either a client questionnaire or an in-clinic scoring system.

Return: It can be argued that this is the most important step. This action takes us back to the patient where the treatment is either modified or discontinued based on an evaluation of the patient's response.

Source: "2015 AAHA/AAFP Pain Management Guidelines for Dogs and Cats." Journal of the American Animal Hospital Association 52.1 (2015): 67-84.



Mary Ellen Goldberg, BS, LVT, CVT, SRA, CCRVN, CVPP, VTS-LAM (Research Anesthesia), VTS (Physical Rehabilitation), a teacher for VetMedTeam and the Veterinary Support Personnel Network and staff member at the Canine Rehabilitation Institute in Wellington, Florida, recommends veterinary technicians pursue credentialing in order to educate themselves about pain management topics like drug interaction with the nociceptive pathway and to earn the trust of veterinarians.

"Once the veterinarian knows that you are capable of understanding and assessing pain, they may allow you to have more responsibility in

the actual treatment of what's going on," she said.

Goldberg said veterinary technicians can organize training sessions to help the entire team know how to recognize pain in patients, including receptionists and kennel assistants. That way, anyone on the team can put a sticker on the chart to flag for the veterinarian things like, "I noticed Sparky limping. I don't know if it's anything, but maybe you'd like to check into it."

Since dogs will still wag their tails and cats can purr while in pain, owners might not notice their pet is in pain. She said teams can educate owners of any species, including exotics, that if an animal doesn't want to eat, something's wrong, and pain is probably involved somehow.

Ultimately, Goldberg feels continuing education about pain management is worthwhile not only for a technician's career but for the good of the animals.

"I can't think of anybody in the veterinary profession that wants the animal to suffer or be in pain. I think that's one of the reasons why pain has been made the fourth vital sign: temperature, pulse, respiration, and now, pain." *

didn't recommend, or prescribe, or administer anything, but you had this conversation and you think the owner wants to take the initiative to start this on their own."

He mentioned that veterinary professionals who are nervous about discussing cannabis can avoid potential liability by directing clients to veterinarycannabis.org to consult with veterinary cannabis experts. They can also consult with the experts themselves.



Award-winning journalist Jen Reeder is grateful to all the veterinary professionals who have managed pain for her dogs and cats over the years.