



LAKE SHORE
VETERINARY SPECIALISTS
&
EMERGENCY HOSPITAL

207 W. Seven Hills Road
Port Washington, WI 53074
p: 262.268.7800 f: 262.268.7878

LakeshoreAnimalHospital.com

Our Mission

With a commitment to excellence, dedication to service, and respect for each life we touch, we will provide skilled and compassionate care to our colleagues, clients and their pets.



Send us your clinic's brochures for display in our reception area!

HELP US CONSERVE PAPER—
JOIN OUR E-NEWSLETTER!

Send your email address to
info@lakeshoreanimalhospital.com

© 2009 LAKE SHORE VETERINARY SPECIALISTS & EMERGENCY HOSPITAL provides specialty veterinary services and night and weekend emergency service. For patients that cannot be transferred back to the family veterinarian, 24-hour care is available.

Lakeshore News

Volume 1, Issue 1

April 2009

DR. JANICE BUBACK JOINS THE SURGERY SERVICE

Dr. Janice Buback, DVM, DACVS, MS, joined our practice in June 2008. She is skilled and board certified in all areas of surgery including soft tissue, orthopedics and neurosurgery. Dr Buback's primary interests are soft tissue surgery and pain management, with special emphasis on minimally invasive techniques including laparoscopy and thoracoscopy, and tracheal and urethral stenting. She is looking forward to bringing these services to southeast Wisconsin.

Dr. Buback completed her undergraduate and DVM degrees at Kansas State University. She then completed a one year rotating internship at the University of Missouri, Columbia. Her surgical residency and Masters of Veterinary

Science were completed at Texas A&M. Dr. Buback became board certified in 1997 and has worked as a referral surgeon in Georgia, Wisconsin, and Indiana.



Dr. Buback and her husband, Tim, also a veterinarian, have three children. The Bubacks enjoy reading, Friday pizza and movie night, soccer, camping and fishing.

Together with Dr. Jacob Odders and Dr. Brian Teunissen, Dr. Buback is available by phone or e-mail for consultations.

SPRINGTIME TOXICITIES

by Megan Tremelling, DVM

All parts of the lily plant are toxic to cats. Prognosis is poor once renal tubular necrosis has occurred, so prompt and thorough decontamination is always recommended with suspected lily exposure. If the cat has not vomited, induction of emesis can be attempted with IM xylazine. Hydrogen peroxide or opioid emetics are not recommended in cats. Activated charcoal and 48 hours of IV fluid diuresis are the most important treatments to prevent azotemia. If azotemia develops, critical care measures such as peritoneal dialysis can be pursued, and good outcomes are possible.

Dogs are frequently seen for ingestion of chocolate. A table for estimating toxic doses can be found at www.veterinarypartner.com (search term "chocolate"). In dogs, injectable apomorphine (available from compounding pharmacies) is the most reliable emetic. Activated charcoal, cathartic and fluids are indicated. Diazepam may be ineffective for control of seizures due to methylxanthine toxicity, and phenobarbital or propofol may be needed. Bradycardia may require atropine, or tachyarrhythmias may require the use of beta-blockers.





LAKESHORE

VETERINARY SPECIALISTS

&
EMERGENCY HOSPITAL

207 W. Seven Hills Road
Port Washington, WI 53074

EMERGENCY UPDATE—I was always taught, when placing a nasal oxygen line, to use the medial canthus as the landmark for positioning the line. However, the current recommendation is to use the vertical ramus as the landmark. Passing the nasal oxygen catheter to this level provides more comfortable oxygen administration (especially at high flow rates) and provides more effective oxygen for a patient that is not necessarily breathing through its nose.—Wade Tate, DVM

SURGICAL SEGMENT—Abdominal auscultation can be very useful for monitoring patients with GI abnormalities. We are all used to palpating abdomens, but we should start listening to them as well. Auscultation of the abdomen can give you a good sense of what the gut is doing. Ileus is a common complication of general anesthesia, particularly when combined with GI surgery. If there are no gut sounds postoperatively, and the patient is reluctant to eat or is regurgitating, he may benefit from a GI stimulant such as metoclopramide. This can be administered IV, SQ, PO or as a CRI. If gastric stasis and regurgitation are significant problems, the patient may benefit from a nasogastric tube which can be used to draw off excess fluid. The NG tube can also be used to initiate “trickle feeding” for enteral nutritional support. Often slow, controlled exercise can also assist in getting things moving again. The return of normal gut sounds, normal appetite, and defecation are all good signs of recovery.
—Janice Buback, DVM, DACVS, MS

WHEN MINUTES COUNT—An owner called the emergency service at 2 am reporting that her dog had eaten about 40 bouillon cubes and that his teeth were chattering. She was instructed to bring him right in. By the time the dog arrived at the clinic, his serum sodium was too high to measure (>180 mmol/l), and he was in status epilepticus. In acute salt toxicity, serum hypertonicity causes an osmotic pull of fluid out of the brain, and can shrink it rapidly enough to rupture cerebral blood vessels. With time, the brain adapts by producing idiogenic osmoles, whereupon adjusting serum osmolarity can cause severe cerebral edema. In this case, rapid fluid therapy corrected the sodium levels before intracellular osmole generation could occur. Diazepam and propofol were used to control seizures. The dog went home the following day feeling well.

TECH TIP:

Educating Owners on Physical Rehab

When discharging a dog who has had any kind of hind limb surgery, use a hands-on approach in discussing physical rehabilitation with the owner. After reviewing the discharge instructions with the owner, bring the dog in and show how to correctly perform the Range of Motion exercises. Demonstrating with the healthy leg, start with the hock, move to the stifle, and finally the hip, slowly moving each joint one by one from flexion to extension. Once you've gone over the importance of Range of Motion, watch them practice the exercises on the healthy leg—talk them through it, if need be. This process gives the owner the understanding and confidence to help their dog on a successful road to recovery.



To Everyone at Lakeshore,

I want to thank everyone again for taking such excellent care of my German Shepherd, Trooper. It was an unexpected extension of our vacation, but thanks to the excellent care she received from you guys, she was able to make the trip home and has recovered wonderfully. Thank you... Thank you... Thank you. Her regular vet was also very pleased with the level of care she received from you guys.



Melanie – Naples, FL