

Animal **LIFE**

VETERINARY MEDICAL TEACHING HOSPITAL



Inside

Service dogs
change lives

One snake,
two hospitals

Alert horse
breeders turn
to VMTH

Human-animal
bond stronger
than a Cat 4



"ALL THIS AND BRAINS TOO."

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— DR. JULIE LASSERE, VETERINARIAN



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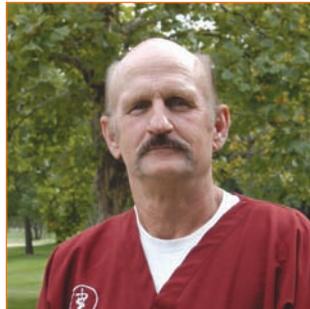


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About the Cover

Breckin Cubie and Twister, his service dog, are pictured in the library at Amanda Arnold Elementary School. Twister is a KSDS service dog. See page 6 for the complete story.

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The two words "animal" and "life" share the "L" because—just like our pets—they are a seamless part of our lives.

AnimalLIFE



VMTH client Suzy Sankpill, left, and Patrice Scott, AnimaLIFE editor, with Suzy's mare, DawnStarr, and her foal, who looks like a MediaStarr to me.

The power of a Twister and a hurricane

A few weeks after my sons Matthew, 10, and Andrew, 7, started school this fall, they told me they saw Twister at school. "Twister, the movie," I asked? "No, Mom. Twister the dog," they said in unison. That evening our dinner conversation was all about their third grade schoolmate, Breckin Cubie, and his service dog, Twister. Through Breckin's story we will explore an amazing dimension of the human-animal bond.

When Breckin's parents shared their story for this feature article, I couldn't help but imagine myself in their situation. Many stories touch me: this one hit home. After all, my sons are close to Breckin's age, they go to the same school. Life is no more complicated than being what they are—boys.

Breckin and Twister's story is yet another reason to be proud of veterinary medicine. It takes two years, hundreds of volunteers, the expertise of board-certified veterinarians and seven full-time staff members at KSDS to match one person like Breckin with a dog like Twister. Having an assistance dog is not about disability, it's about ability. It's the ability for a person to go places with confidence, to see, hear, do, feel and experience all the things many of us, quite frankly, take for granted.

The human-animal bond is central to each feature article in this edition. I invite you to open your hearts and minds to what Drs. Moore and McMurphy experienced as they treated countless animals abandoned after Hurricanes Katrina and Rita ravaged the Gulf Coast. Read a first-hand account of a copperhead bite from a left-handed dog owner. And, be there as equine specialists draw on years of experience and make life-and-death decisions for two mares heavy in foal.

We hope that through the pages of this magazine you gain an even greater appreciation for animals. In many respects, they make us better people. 🐾

All the best,

Patrice

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View



VMTH director Dr. Roger Fingland and Dr. Nels Backlund inspect the initial construction phase at MidWest Veterinary Specialty Hospital in Omaha, Neb.

achievements are the result of uncommon efforts. I would like to personally thank our clinicians and staff for their outstanding work managing the hospital's busy caseload.

Our goal is to provide the best medical care available for animal patients in the Midwest. Our clients expect it of us; we expect it of ourselves. That is why we are embarking on two major infrastructure initiatives. The first is the renovation of the emergency and critical care unit in the VMTH. Construction has begun and should be completed in early summer. Construction recently began on a satellite specialty and critical care hospital in Omaha that will allow us to better serve our clients and referring veterinarians in northern Kansas and southeast Nebraska. MidWest Veterinary Specialty Hospital (MidWestVET) is the result of a partnership between K-State and a wonderful group of private practitioners who are committed to providing all levels of medical care for their patients. MidWestVET is adjacent to the Animal Emergency Clinic of Omaha, and the complex will provide state-of-the-art care 24 hours a day, seven days a week as well as excellent clinical training opportunities for our students and house officers. Special thanks to the many veterinarians in the Omaha area who initiated this project and have continually supported the effort.

As you read this edition of "AnimalLIFE", please join me in celebrating the commitment to animals that we share. Thank you for supporting our hospital, and thank you for caring about animals. 🐾

The commitment to the wellbeing of animals

demonstrated by our clients, clinicians, staff and students is truly amazing and worthy of great celebration. Heroic deeds and amazing stories are borne from this commitment, and it is a pleasure to share some of them with you in this magazine. I invite you to read on and celebrate with us!

The College of Veterinary Medicine was well represented in Louisiana following Hurricanes Katrina and Rita. Drs. Rose McMurphy and Lisa Moore and four senior veterinary students spent two weeks in Louisiana providing medical care for hundreds of animal victims. A heartfelt thank-you goes to each of these professionals for taking action in what truly was an hour of need. I would also like to thank our referring veterinarians and clients who assisted by donating their time and resources to help animals impacted by these tragedies.

Our hospital has experienced tremendous growth in each of the last 10 years. Referrals to our specialists are at an all-time high in some areas. This growth results from our commitment to exceptional clinical education, customer service and veterinary health care. And, it is a testament to the heart of the people who work here. Uncommon



Warm Regards,

Roger B. Fingland, DVM, MS, MBA
Diplomate, ACVS
Professor and Director
Veterinary Medical Teaching Hospital



AT YOUR SERVICE

K A N S A S S P E C I A L T Y D O G S E R V I C E

Story by Patrice Scott
Photos by Dave Adams
Cubie family photo courtesy Meysenburg Photography



“ I didn't know there was a service dog organization in Kansas until I called our veterinarian, but I knew it took two to three years to get a service dog,” she says. “We had to move fast.”

”

—Carol Cubie

Bruce Cubie, a firefighter, and his wife, Carol, an emergency and critical care nurse at Mercy Hospital, are trained to deal with unforeseen events. Precious little could prepare the Manhattan couple for what was to happen at home.

A comment by their 7-year-old son's baseball coach during the summer of 2004 prompted them to visit their pediatrician. “Breckin had a peculiar run,” Bruce says. “Almost every day he would have cramps in his calf muscles.”

The pediatrician referred them to an orthopedic surgeon who concluded Breckin was a “toe walker,” Carol says. The condition was so advanced that he underwent eight weeks of physical therapy, double the norm. However, the symptoms persisted. Then, Breckin started to experience numbness in his hands and feet.

On Nov. 18, 2004, two months after celebrating his 8th birthday, a neurologist examined Breckin. “When we left,



The Cubie family



Above: Dr. Marjory Artzer, right, teaches junior year students the proper way to conduct a physical examination. The KSDS dogs are ideal because they establish a baseline for a normal, healthy animal.

it wasn't *if* there is a problem, it was determining *what* the problem is," Carol says. The doctor suspected muscular dystrophy. "I got home that night and got on the Internet," Carol says. "As I was reading I thought, 'there's my kid.'"

Breckin was diagnosed with Duchenne Muscular Dystrophy (DMD), one of nine types of the genetic, degenerative disease. Breckin had the classic symptoms: generalized weakness in his muscles and enlarged calves. Symptoms usually appear in children between the ages of 2 and 6, and DMD primarily strikes boys. The

“
We had to accept it. We had to start looking to the future for Breckin.”

”

—Bruce Cubie

disease affects all voluntary muscles, and in time, the heart and breathing muscles.

"That knocked us to our knees," Bruce says of his only son's diagnosis. "We had to accept it. We had to start looking to the future for Breckin," he says. Carol was reeling at how quickly their lives could change—again. "By age 12, there's a chance Breckin will be in a wheelchair," Carol says. "That's fast when they are talking about your baby."

One of the first places Carol called was a local veterinary



Above: Dr. Patricia Payne and Asheni go everywhere together including the college library.

clinic. She needed information about assistance dogs. Could a service dog help with Breckin's disability? "I didn't know there was a service dog organization in Kansas until I called a veterinarian, but I knew it took two to three years to get a service dog," she says. "We had to move fast."

Carol submitted Breckin's application to KSDS, a non-profit organization based in Washington, Kan., that trains and places assistance dogs nationwide. According to Karen Price, KSDS chief executive officer, Breckin's application was one of 50 the organization receives annually. KSDS placed 23 dogs in 2005. About one-third of the KSDS dogs are placed as guide dogs for the visually impaired. The remaining dogs are placed as service dogs for those with physical disabilities like Breckin.

Twister is a striking 3-year-old yellow Lab who goes to school with Breckin, now 9, every day at Amanda Arnold Elementary. Twister is a stabilizing force for Breckin. "She helps him get up when he falls," Bruce says. "She helps him go up and down stairs." Twister also steadies Breckin's emotions. "She calms him down when he gets nervous," Carol says. "He reaches down and pets her and rubs her ear."

“
Each person selected to receive a dog is asked to provide details about their environment and daily activities. The training staff uses that information to identify which dog will best fit the person's needs.
”

—Karen Price

Like Twister, all of the KSDS assistance dogs go through extensive training before being placed. "Each person selected to receive a dog is asked to provide details about their environment and daily activities," Karen says. "The training staff uses that information to identify which dog will best fit the person's needs. At the same time, trainers are evaluating the dogs for their strengths and skill preferences."

Carol appreciated the personalized approach. "They asked for a videotape of our house to show the stairs and layout," she says. "They also wanted details about Breckin's favorite activities, like riding his bike, so they could start training specific to Breckin's needs."

The Cubies traveled to Washington where the KSDS staff had narrowed Breckin's future partner to three dogs. After Twister and Breckin were matched, they spent two weeks training together.

From puppy to professional

Long before a pairing like Breckin and Twister's can take place, much work, effort and expertise are invested in each dog. KSDS breeds 40 Labrador Retrievers and

Golden Retriever puppies annually. The breeds are ideal because of their strength, health, aptitude, intelligence and attitude, Karen says. At 8 weeks, each puppy is placed in the home of one of 60 volunteer puppy raisers located throughout the Midwest and Florida.

Dr. Patricia A. Payne, assistant professor in diagnostic medicine and pathobiology at the College of Veterinary Medicine at K-State, is a puppy raiser. Her first KSDS dog, Maize, was a candidate for Breckin. "We teach basic obedience and socialization and expose our dog to anything and everything we can think of—traffic, elevators, statues, crowds and cars," she says.

At the Veterinary Medical Teaching Hospital, 40 KSDS dogs receive free hip evaluations and the hospital deeply discounts the dogs' eye exams.

It's in the hips

Dr. James Roush, professor and small animal surgery section head, examines the dogs for hip dysplasia, a common joint malady in retrievers. Early detection is critical because the arthritic condition can significantly shorten an assistance dog's career, which ideally spans 7 to 10 years before retirement.

KSDS complies with the Orthopedic Foundation for Animals (OFA) guidelines for hip certification. Each dog must be certified by age 2; KSDS screens them between 12 and 18 months. "It's important to screen the dogs because you don't want to train the dog and have it bond with someone who depends on it only to discover that the animal itself has a disability," Dr. Roush says.

Karen says that 70 percent of the dogs complete the two-year program. The top reason a dog is released is OFA hip score.

"When Breckin falls or needs to get up, he puts his hands over Twister's shoulders and hips and pushes up," Bruce says. "You can imagine how strong Twister's hips and body have to be to support him."

Drs. Roush and Payne say the top three reasons dogs develop hip dysplasia are genetics, activity level and nutrition. "Hip dysplasia is not just a genetic disease," Dr. Roush says. "It's also affected by the nutrition the animal gets when it's young. Pet owners should select a name brand dog food from a company that formulates diets based on sound research."

Twister will receive Hill's Science Diet dog food for life



Above: Dr. Jim Roush performs a hand examination, called Ortoloni, on a KSDS dog to determine hip laxity as senior student Kathy Bradshaw steadies the patient. "You push the femur into your hand and abduct the leg," Dr. Roush explains. "You don't want to hear or feel the head of the femur fall back into the socket."

thanks to Buddy, America's first guide dog. Buddy suffered from kidney failure and his owner, Morris Frank, needed a solution. The field of clinical nutrition was virtually nonexistent in veterinary medicine until 1939 when Morris consulted veterinarian Dr. Mark Morris about Buddy's condition. Dr. Morris believed he could manage certain diseases through proper nutrition. The specially formulated diet, which Dr. Morris made in the family kitchen, worked for Buddy. Based on this success, Dr. Morris started a pet food company, Hill's Pet Nutrition.

"Dr. Morris' commitment to Morris Frank and Buddy became the inspiration for our company mission: to enrich and lengthen the special relationships between people and their pets," says Dr. Kathy L. Gross, associate director for research at Hill's.

Hill's, headquartered in Topeka, has remained true to its mission. "Hill's provides all of the pet food free to KSDS, to our puppy raisers and to graduated dogs," Karen says. Breckin's parents are appreciative of Hill's support. "It's wonderful that they (Hill's) do that for us," Carol says. "The food is delivered right to our door. Breckin is the only one who feeds Twister."

Puppy raisers must return the dogs to KSDS for the OFA hip evaluation and to begin training. "Puppy raisers are very special people," Karen says. "They take this incredible little ball of energy and they teach it, and they love it, and they give us back this amazing well-mannered animal that will change someone's life."

Dr. Payne says that saying goodbye to Maize was difficult. But she will face that selfless act again someday with Asheni, her new KSDS black Lab puppy. "Maize will always carry my heart with her and will always be welcome back into my life. I love her dearly, but let her go gladly, with hope that she will bring freedom and joy to someone in need."

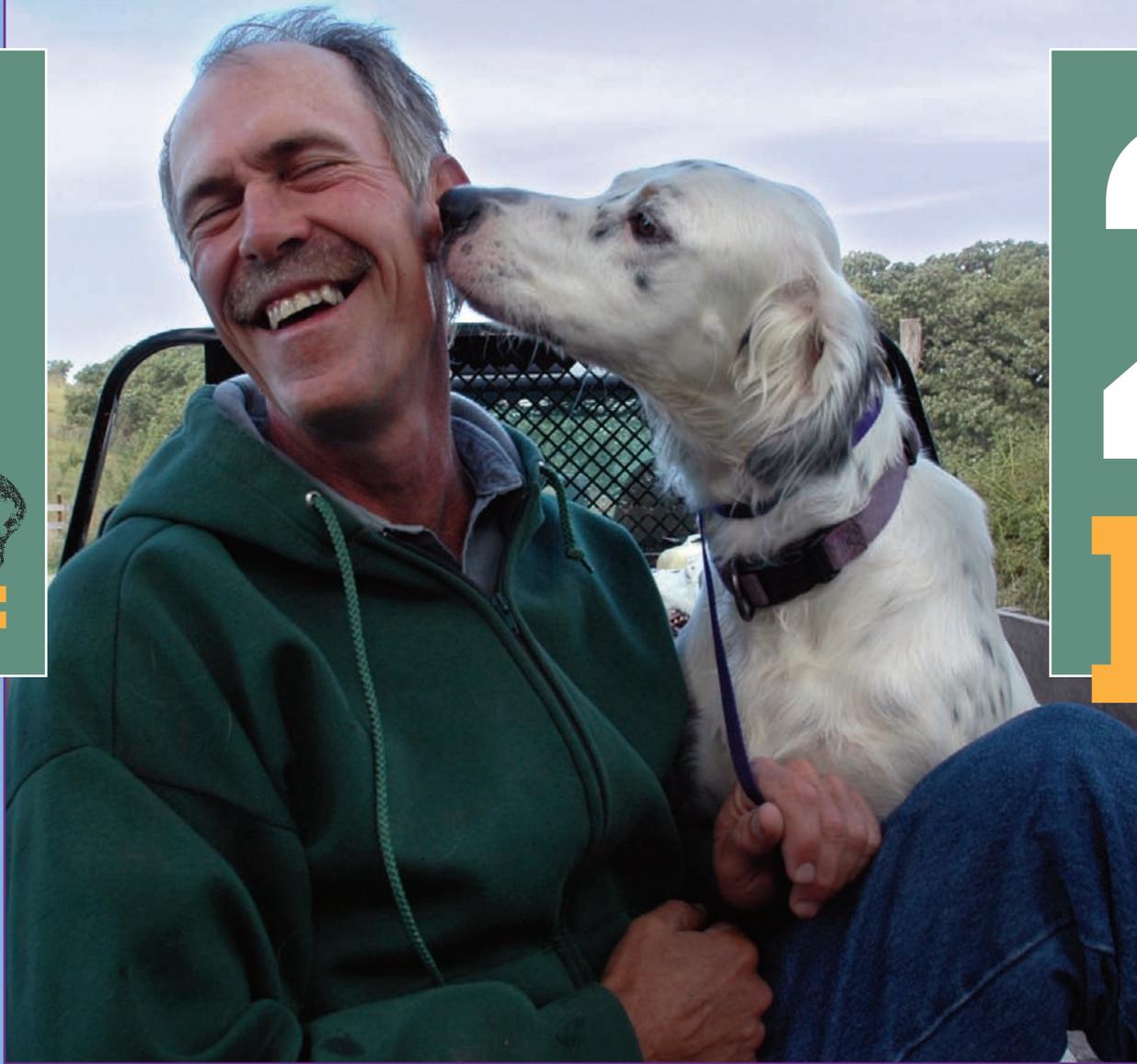
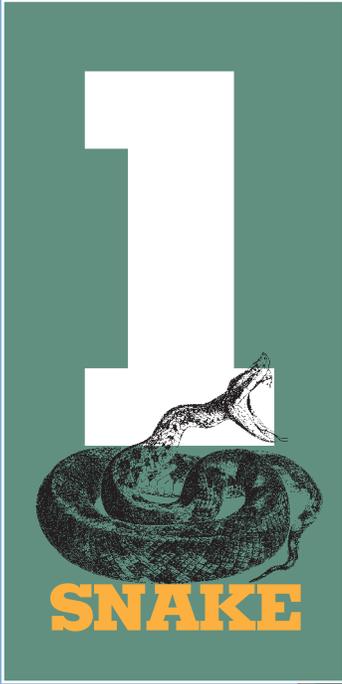
Someone like Breckin. 🐾



Editor's Note: Just before going to press, we learned that Maize, Dr. Patricia Payne's first KSDS dog, was placed with a gracious woman in Texas.

Dr. Payne and Maize were a regular fixture on the veterinary medicine campus. Along with Dr. Payne's heart, Maize took the hearts of the college's 360 faculty and staff members with her to Texas.

To learn more about assistance dogs, Dr. Payne encourages people to check out the Animals in Society section in the college library.



Above: Al Alspach and Arlow enjoy a Saturday morning on Al's land. Left: Months after being bitten by a copper-head snake, Al's left index finger remains swollen.

“He sank a fang in my index finger. Felt like a hot poker.”

Al Alspach, a conservationist and outdoorsman, bought 109 acres of farmland to reintroduce native grasses in an effort to preserve the tall grass prairie. That decision would come back to bite him, and his dog.

The land is 20 miles southwest of Manhattan on McDowell Creek Road. Playing at the farm is something Al's English Setters, Chile, 8, and Arlow, 1, do every day. There are fields to romp in and a stream to romp through. It's a sort of Disneyland for dogs. And, there are plenty of things to investigate, especially for a young pup with an inquiring nose.

Last spring, Al and his neighbor planted 1,950 shrubs for habitat. The then upcoming 4th of July holiday weekend was the perfect time to weed the shrubs. Al, co-owner of Master Landscape, knew exactly what the project would entail, except for one thing.

"It was a warm, sunny day, and Chile found the only shade in the area under a Mulberry tree," Al says. "He'd

been lying there all morning, then for some mysterious reason, he gave up the spot. Arlow took over the nest. Shortly after that, I heard him yelp."

A stream of blood shot from Arlow's left nostril. Blood dripped from the other. A snake, Al deduced. Moving quickly, Al secured both dogs in the cab of his truck and rushed back to find the snake. "I thought my dog was dying in that truck," he says. "I had to find out what kind of snake it was so I could tell the veterinarians in case he needed antivenin."

He returned to the shaded area and located the snake. "I could tell from its vertical pupil that it was a pit viper, but I couldn't tell which type," Al says. "I couldn't find a stick anywhere so I pulled a great big milk weed plant out of the ground and ripped the leaves off. I fished the snake out of its cover. It was over 2 feet long. I reached in and pinned him down. When I stood up, he sank a fang in my index finger. Felt like a hot poker."

2

“I thought my dog was dying... I had to find out what kind of snake it was so I could tell the veterinarians in case he needed antivenin.”

—Al Alspach

Story by Patrice Scott
Photos by Brennan Engle

PATIENTS

2 HOSPITALS

Al placed the snake in its temporary home, a cooler from his truck, and headed to a neighbor's house. She is a quasi expert on reptiles and could help him identify the snake. She wasn't home. A workman, Wayne Corn, was there, and Al relayed the story. About 10 minutes had passed since he was bitten. Al was not feeling well. Not surprising since the poisonous venom of a copperhead now flowed through him and Arlow.

Wayne drove the symptomatic Al and Arlow and the very confused Chile to Manhattan. “We planned to take Arlow to the veterinary hospital then take Al to the hospital,” Wayne says.

Al's arm swelled. He felt dizzy, nauseous and had dry heaves. “Just outside of town we decided that I needed to get to the hospital first,” Al says. “I felt really guilty about that because Arlow was bitten before me. He took the brunt of the venom.” Arlow's jowls swelled to nearly three times their normal size. “He just looked horrendous,” Al recalls.

Al was admitted to the Intensive Care Unit upon arriving at Mercy Hospital. Just a few minutes later and a few blocks away, Arlow was admitted to the Small Animal Intensive Care Unit at the Veterinary Medical Teaching Hospital (VMTH).

Dr. Lisa Moore, a board-certified internist, treated Arlow. “His main clinical sign was swelling on the face and neck,” Dr. Moore says. “He was anxious and shied away from anything that came near his face. We put him on oxygen and placed an IV catheter to administer fluid therapy. He was also given antibiotics and a pain relieving

Al was admitted to the Intensive Care Unit upon arriving at Mercy Hospital. Just a few minutes later and a few blocks away, Arlow was admitted to the Small Animal Intensive Care Unit at the Veterinary Medical Teaching Hospital.



Arlow received personal attention in ICU. Janelle Hodgson holds a syringe to gauge the swelling. His jowls are three times the normal size.

medication.” Meanwhile, Dr. Moore called Mercy Hospital to see if they had extra antivenin.

Janelle Hodgson, senior veterinary student, was assigned to Arlow's case. “We were concerned he might have breathing difficulty because of the swelling,” she says. “He was very skittish and afraid of everything. When he saw a leash, he jumped. He thought everything was a snake,” Janelle says.

Dr. Moore researched copperhead bites and found most information was on humans. “We can use information on humans as a guide, but that does not mean dogs will respond to therapy the same way humans do,” she says. “Dogs are not small people. We were interested in the survival rates with and without antivenin and what other therapies are recommended,” she says. “Our research confirmed that Arlow was receiving the proper course of treatment.”



From left to right: Chile, Al and Arlow are reunited and having fun and enjoying a beautiful fall day at the farm. Al's land is a sort of Disneyland for dogs with rolling hills, outbuildings and a creek that meanders through his property.

Al felt relief the instant he received the first of four doses of antivenin. But several hours after his hospital admission, Al was nervous and unsettled not knowing Arlow's condition. "I knew he'd get the best care available at K-State," Al says. "A few years back, another one of my dogs was operated on at the hospital. It's the utmost of professionalism. I was just worried about him. I couldn't call because there wasn't a phone available to me in ICU. I'm single, and my dogs are my children. It was tough not knowing how he was."

Heidi Vagts, a registered nurse at Mercy Hospital, says Al's physical condition was improving, but she was concerned about his spirits. "We take a holistic approach to medicine at Mercy Hospital," Heidi says. "Al was worried about his dog, so I offered to call the veterinary hospital to check on him. Al finally relaxed when he knew that Arlow was doing well."

During that telephone conversation, Al granted Dr. Moore permission to give Arlow a costly vial of antivenin if needed. "Heck, I have more than that invested in Arlow. If he needed it, he was going to get it," Al says. Soon after their conversation, Arlow's swelling subsided, making the antivenin unnecessary.

Janelle and Arlow became friends during their time together in ICU. "He was just so sweet. He was the best behaved dog," she says. "He was off leash most of the time he was in ICU," Janelle says. "He followed me around and when I'd sit down, he put his head in my lap."

Al was released from the hospital the next day and he

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—Al Alspach

went straight to the VMTH. "When I got to the teaching hospital, they asked if I wanted to see Arlow. I only wanted to if it wouldn't hurt him. A few minutes later, he came around the corner. He just walked up and put his head on my shoulder. He looked at me like, 'Oh, daddy.' I looked at him and said, 'I know, buddy. Believe me, I know.' We have a pretty strong bond after going through something like that together."

Al says he is wiser after this incident. "I thought I needed to identify the snake because antivenin was species specific – it's not," Al says. "You don't need to know what kind of snake it is, just get to the hospital. Getting bitten was totally in vain for me," Al says.

Dr. Lisa Moore says Al did everything right for Arlow. "The most important thing is to get to a veterinarian immediately. Don't assume things will be OK even if the animal seems fine. Some problems can take 24 hours before symptoms occur. The wound also may need medical attention, which is more common with rattlesnake bites. The skin at the site of the bite can get infected, die off and may require surgery. But I would advise owners to never pick up a snake."

As Al and Arlow headed home, there was one piece of unfinished business: the snake. "We let him go, released him in a field," Al says. "This wasn't the snake's fault. It did everything within its power to avoid us. On that day, 109 acres just weren't enough." 🐍

Dr. Susan Nelson & the Pet Health Center



Story by Patrice Scott
Photo below by Dave Adams

A lifelong dream became a reality when Dr. Susan Nelson graduated from K-State after earning a Doctor of Veterinary Medicine degree in 1989. In 2003, she returned to her alma mater after spending 14 years in private practice. Only this time on campus, she was the teacher.

Dr. Nelson, clinical assistant professor, works with Drs. Marjory Artzer and Matt Reigel in the Pet Health Center, the primary care veterinary practice located within the hospital. "We're open to the public," Dr. Nelson says. "We offer continuity of care, and we are passionate about what we do."

The Pet Health Center is a thriving local practice that provides students hands-on experience and prepares them for the rigors of private practice. "The vast majority of students go into general practice," she says. "The Pet Health Center experience exposes students to the pace and variety of cases they will handle."

Primary care veterinarians provide routine health care for life. "I always like to build relationships with clients. It's nice to go through puppy or kittenhood to adulthood," she says. "We offer comprehensive senior care programs for dogs and cats as well as puppy and kitten wellness programs. We strongly believe in annual wellness exams because so many things can change in a year's time. We frequently discover minor issues that can be managed before they become major health problems."

In those instances, the Pet Health Center is uniquely equipped to provide state-of-the-art medical care. "We have the latest technology and diagnostic equipment," Dr. Nelson says. "We have specialists available for consult. Our patients have immediate access to anesthesiologists,



Dr. Susan Nelson enjoys the Pet Health Center and shaping future veterinarians.

radiologists and a pharmacist. And, we have a compassion room and full-time grief counselor to better serve our clients."

The opportunity to impact the future of veterinary medicine was one of the compelling reasons Dr. Nelson decided to join the faculty at the teaching hospital. "An academic environment challenges you to be on the cutting edge," she says. "I enjoy working with students and like the thought of molding future veterinarians." However, she quickly points out that hospital clients are the most important people in shaping students. "Our clients make an investment in us because they want great care and they value and support the teaching mission of the hospital. It's our clients who truly have an impact on future veterinarians. We can't educate students without the patients they present to our hospital."

Dr. Nelson's future was set at age 5. "Our next door neighbor, who was a veterinarian, came over," Dr. Nelson remembers. "He had to perform a C-section on a cow and asked Dad to help. He asked if any of the kids wanted to come along. From that moment on, I was hooked. I knew what I wanted to do and never really strayed from wanting to be a veterinarian. That's when I started bringing injured animals home and now my kids are doing it."

She and husband, Hank, are rearing their children Carter, 8, and Katie, 4, in a home full of animals—a dog, cat, snake, turtle, toad, beta fish, goldfish and a horse. "I'm happy to be raising kids in a home with animals. Children can learn so much from animals—responsibility, caring, love and when the time comes, loss."

When asked about hobbies, Dr. Nelson gently laughs. She vaguely recalls gardening, reading and riding horses. 🐾

Story by Patrice Scott
Photos by Brennan Engle

THREE is an important number for Dr. Mike Kobuszewski

He married his high school sweetheart, Carol, after completing his **third** year at Marymount College of Salina. He **tripled** his practice his first year out of veterinary school. He had **three** children. And, he built a spacious clinic in Topeka in **1993** that was perfect for **three** doctors. The only surprise was his future partners would also be his sons.



In May, when someone calls the Indian Creek Veterinary Hospital in Topeka for Dr. Kobuszewski, one of three people may return the call. That's because both of Dr. Kobuszewski's sons, Jonathan and Joshua, are in the senior veterinary class at K-State. "Only 50 kids from Kansas are admitted to veterinary school each year and two of them are mine. I take great pride in that," he says.

Growing up in Linn, Kan., Dr. Kobuszewski enjoyed animals and the outdoors, which made veterinary medicine a likely career choice. "I enjoyed anything that put me in an environment with animals," he says.

During high school and college, Dr. Kobuszewski was involved in athletics. With his decision to apply to the College of Veterinary Medicine, he says academics became his sport. "What brought me to veterinary medicine was the desire to pursue a profession that required intense study," he says. "It was very competitive as it is today."

After earning his DVM in 1979 from K-State, Dr. Kobuszewski bought a mixed animal veterinary practice in Oskaloosa, Kan., where Carol worked as the accountant and office manager. "We started out scared," he says. "This was quite a thing to own a practice right off the bat." By the end of his first year, Dr. Kobuszewski added two veterinarians because of growth.

The practice continued to thrive until the couple sold it 12 years ago to pursue a dream. "We enjoyed owning our own clinic, but we dreamed of building a hospital," Dr. Kobuszewski says. That dream became reality when they purchased 105 acres in north Topeka and built Indian Creek Veterinary Hospital, a 4,500-square-foot animal hospital with three exam

rooms and two surgery suites. Inadvertently, Dr. Kobuszewski points out, the hospital was built to accommodate three doctors.

"I firmly believe that if you are going to make a mistake, make it on the side of having too much space instead of too little," Dr. Kobuszewski says. "I believe that we have a very modern practice; however, I am happy that we have the teaching hospital to refer patients to when needed."

Dr. Kobuszewski explains the three primary reasons he refers to the

K-State is family according to Dr. Kobuszewski, and referrals are a prescription for success for his practice...

Veterinary Medical Teaching Hospital are technology, support of veterinary medicine and communication. "The teaching hospital is a state-of-the-art teaching facility that offers CT scans, MRIs and ultrasound," Dr. Kobuszewski says. "I feel a responsibility to offer that to my clients," he says. "If I don't, I'm not doing my job."

K-State is family according to Dr. Kobuszewski, and referrals are a prescription for success for his practice, his patients and his alma mater. "As a K-Stater, I am supporting my college of veterinary medicine by supporting the hospital's caseload. Maybe I am biased because I have two sons in their clinical year of training. But, through referrals I can help my children and everyone else's child achieve their dream of becoming a veterinarian."

Communication is another reason he refers to the teaching hospital. "I consistently receive a high level of communication concerning my patients," Dr. Kobuszewski says. "The faculty and staff are doing a lot right at K-State." 🐾

And Family

When Dr. Mike Kobuszewski and wife, Carol, married and started a family, they were actually starting a family business and a family tradition.

The couple had three children, Jonathan, Joshua and Annie. They had Jonathan during Dr. Kobuszewski's sophomore year in veterinary school. While reading son Jonathan's autobiography his sophomore year in high school, his parents learned of his desire to become a veterinarian.

It was as equally unexpected from Joshua, who is 15 months younger than his brother. Joshua was a candidate for homecoming king in high school. With his arms locked with his parents, an announcer introduced Joshua and the fact he wanted to be a veterinarian. "I was shocked when I learned the boys wanted to follow in my path," Dr. Kobuszewski says. "I invited them to go on calls with me, but I never pushed. They must have seen a great deal of professional satisfaction in their Dad to choose the same career."



Left: Dr. Mike and Carol Kobuszewski. Above: Dr. Mike, Carol and daughter Annie, center, visit sons Joshua, left, and Jonathan, right, at the Veterinary Medical Teaching Hospital.

Right: Joshua, left, and Jonathan, right, check on their Dad's patient, Heidi, who was referred to the hospital. Heidi's owner is Donna Porter.



Dr. Kobuszewski admits that it was difficult juggling the demands of a growing veterinary practice and growing family. "When I'd close the clinic at 5 p.m., I knew I was going to be back in an hour or so at the most," he says. "I missed a lot of games back then."

What his children remember was that their Dad loved his profession and that he was there when his clients needed him. "Dad loves what he does, which is evident by the way he gets up every

morning," Joshua says. "His work ethic amazes me. When Dad is with clients, I see the confidence they have in him, and I hope someday to be as respected as he. I never would have made it this far without his guidance. I am proud to be his son."

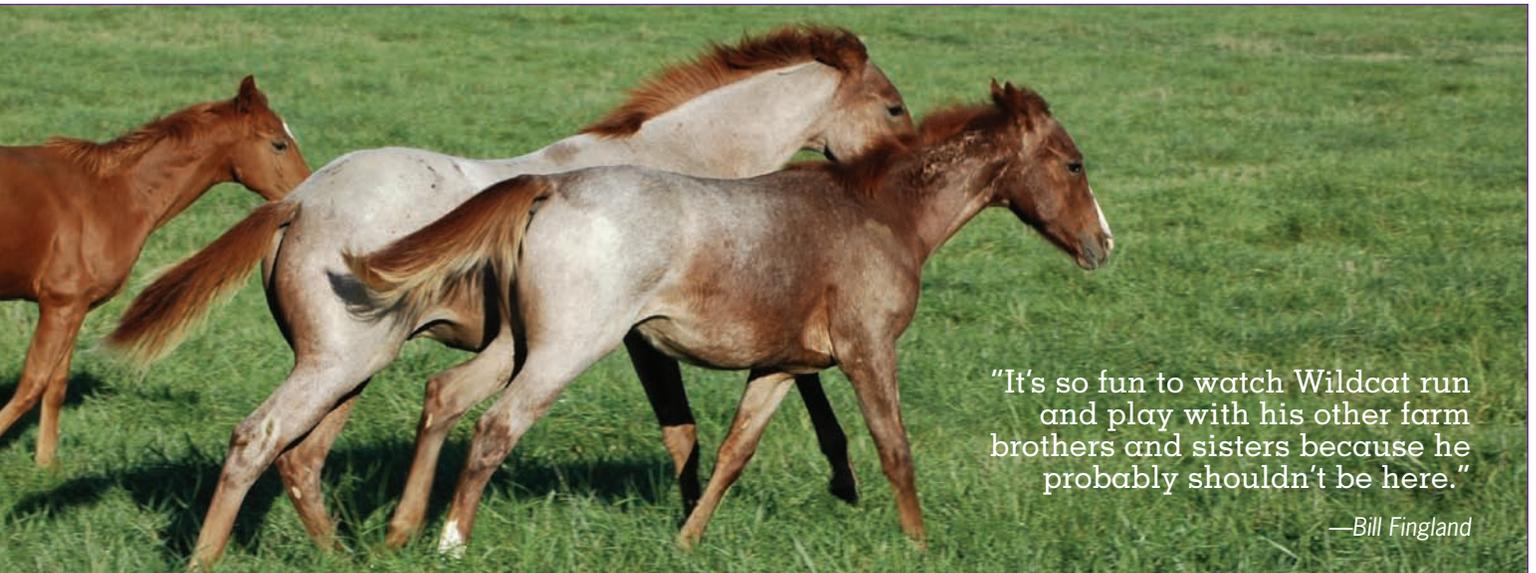
Oldest son Jonathan and father of two says his parents' actions were always in support of their family. "Right out of veterinary school, Dad bought a practice," Jonathan says. "Mom immediately became

everything from the bookkeeper to veterinary technician to keeping us little ones happy in the back while we waited for Dad. Everything my parents did was about family, and they applied those same principles to our clients and patients. Just recently Mom drove a client to the teaching hospital because the lady was a little nervous. I am proud of my parents. What they have done and who they have encouraged us to become is pretty amazing."

Perhaps the boys got their drive from their father, but Dr. Kobuszewski credits Carol for their character. "Carol is a person who gets along with everyone," he says of his wife. "She's very humble."

Soon there will be three veterinarians in the family. But given the example set by Dr. and Mrs. Kobuszewski, it's safe to assume there will be Dr. Kobuszewskis for, of course, a third generation. 🐾

LABOR OF LOVE



"It's so fun to watch Wildcat run and play with his other farm brothers and sisters because he probably shouldn't be here."

—Bill Fingland

Story by Patrice Scott

Bill Fingland drove through the night to get to the Veterinary Medical Teaching Hospital.

It was 4 a.m. when he backed the trailer up to the hospital's emergency equine entrance. Freckles, Bill's treasured broodmare, had made the five-hour drive. But a question loomed in the back of Bill's mind: would he bring home one horse, two or none?

Hours earlier, Bill and his wife, Patty, made a disturbing discovery at their ranch in Rogersville, Mo. Freckles, just 270 days along in her pregnancy, was lactating. She also appeared to be straining. The astute owners feared she might prematurely deliver the foal and immediately called their veterinarian. "Dr. Spragg nailed the fact that she had placentitis and was straining to urinate," Bill says. "He advised us to take Freckles to K-State."

"When I arrived at the hospital extremely early that morning, I was met by a half dozen people at the door," Bill says. Doctors examined the 10-year-old quarter horse and ordered extensive medical tests. The tests yielded information that was helpful yet troubling. "After the initial examination, we were convinced we had a problem," Bill says.

Dr. Bonnie Rush, equine section head and associate dean of career development, says the situation was critical. "We were close to losing the pregnancy at that point."

She explains that placentitis is an aggressive bacterial infection of the placenta, and it takes time for clinical evidence of the disease to appear. Because the placenta is responsible for providing oxygen and nutrients to the foal and removing waste, this can be and routinely is a deadly diagnosis for the foal. That's because the infection can compromise the integrity of the blood supply to the foal and cause the mare to prematurely deliver.

Freckles' infection didn't require just *any* antibiotic but rather the *right* antibiotic to



VMTH client Bill Fingland with Wildcat, left, and Freckles, right.

combat the infection. “We grew *E. coli* from a swab that we obtained from her cervix,” says Dr. Beth Davis, assistant professor of equine internal medicine. “We selected Ceftiofur, an antibiotic that the organism was susceptible to. We couldn’t sterilize the uterus, but we could control the bacterial counts. We also selected this antibiotic because it posed minimal negative effects to the foal.” The dilemma is effectively treating the mare to save her life while ensuring that the treatment does not compromise the foal.

When Freckles presented on Feb. 21, an ultrasound revealed that her foal was large and stressed. Dr. Davis says stress is determined by the foal’s heart rate, which is normally between 80 to 100 beats per minute. Freckles’ foal’s heart rate was 112. Six hours later, it was 84. “A persistently low heart rate in the 60s for a day or two indicates the foal may be dying,” Dr. Davis says. “An abnormally high or low heart rate indicates the foal is suffering from in utero stress. In this case, it was a result of severe infection.”

Doctors placed Freckles on Ceftiofur to control the infection. She was placed on a hormone, progesterone, to help maintain the pregnancy. Additional medications were administered to aid in maintaining the uterine blood flow and reduce the negative effects of bacterial toxin

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—Bill Fingland

release. Another crucial fact was that Freckles was, in terms of a typical pregnancy, remarkably far from her delivery date.

A normal equine pregnancy is approximately 350 days with foals maturing in the last five days. Dr. Rush says that 320 days is the “bare minimum” for a foal to survive. That meant Freckles would have to maintain her pregnancy until March 25, a staggering 50 days just for the foal to have a *chance* of surviving.

Because of all of these factors, doctors predicted that Freckles had significantly less than a 20 percent chance of delivering a live foal. “I was very concerned,” Dr. Davis says. “Freckles was thinking about having a baby the night she presented.”

Bill says he quickly realized the gravity of Freckles’ medical condition. “What we were hoping for was one thing. Realistically, we realized that if we were fortunate, we’d save the life of the mare.”

Freckles was moved to a quiet stall where she was intensely monitored. She was ultrasounded twice a day every day to detect changes with the thickness of her placenta and to monitor the foal’s heart rate.

Doctors ordered daily tests of her milk electrolyte counts,

which is an indicator of foaling. Some were simple stall-side tests; others were complex and sent to the clinical pathology lab for a complete analysis of her sodium and potassium levels. “Blood progesterone levels were monitored so we could utilize all available parameters to determine if Freckles was going to deliver the foal immediately or maintain the pregnancy for even a few more days,” Dr. Davis says.

On Feb. 28, doctors were confronted with additional complications. The foal's heart rate reached 120. Dr. Davis says the infection was the source of the foal's stress. “This foal was living in severe infection.”

Another challenge arose when doctors observed that Freckles wasn't drinking an adequate amount of water. Tests revealed that Freckles had an acute kidney problem that appeared to be associated with the pregnancy. Doctors controlled her creatine levels by giving her 10 to 20 liters of intravenous fluids for several days. She continued to receive the fluids periodically throughout the duration of her hospitalization.

“After I went home, I received phone calls from hospital faculty and students daily giving me detailed information about Freckles,” Bill says. “That made me confident in the fact that they were doing everything possible for her.”

After nearly a month and scores of daily tests, doctors received an alarming result on March 23. The foal's heart rate plummeted to 68. “We discussed our options,” Dr. Davis says of her conversations with Dr. Rush. “We anticipated this and decided if the heart rate remained



persistently low for a day, we would induce labor. However, when we ultrasounded her 12 hours later, the heart rate was 76. We were convinced the right thing to do was to maintain the pregnancy for as long as possible.”

On April 9 — 65 days after she was admitted to the hospital and 335 days into her pregnancy — Freckles delivered her foal. “I expected the foal to be down and depressed,” Dr. Davis says. “But he was able to get up and nurse. He was very vigorous. Within 20 minutes of being born, he was up. Within an hour, he was running around the stall. Since we knew that he had been exposed to significant bacterial contamination in utero, we immediately ordered tests to determine his level of infectious challenge. His numbers (on blood tests) were not good.” After a few days of intense medical therapy, the foal responded.

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—Bill Fingland

Bill and Patty named the foal Wildcat in K-State's honor. Wildcat had two surgeries following his birth. The first was to remove his umbilicus, Dr. Davis says. The second surgery was to augment the umbilical repair and to correct his left hind leg, which was crooked. Surgeons performed a procedure called a periosteal strip.

On April 26, Freckles and Wildcat were on their way home after spending two months in the hospital. This time it was a happy five-hour drive. Today, Bill says you'd never know Wildcat had suffered such challenges so early in his life. “It's so fun to watch Wildcat run and play with his other farm brothers and sisters because he probably shouldn't be here,” Bill says.

This wasn't the first time that Bill experienced what he considered a miraculous outcome at the teaching hospital. In 2004, he had two foals with severe respiratory illness treated at K-State. He brought the foals to K-State because his brother, Dr. Roger Fingland, is on faculty at the teaching hospital. “It's a miracle they survived,” Bill says. “The attention to detail, the communication and the attention given to worried moms and dads drove us back to K-State,” Bill says. “I knew the kind of service we'd get with Freckles, and we did.”



Above: Wildcat at home in Missouri. Doctors gave him less than a 20 percent chance of surviving.

Left: Wildcat nursing shortly after his triumphant birth on April 9. Freckles was intensely monitored throughout her 65-day hospital stay. Within two weeks, Freckles and Wildcat were on their way home.

Top right: Suzy Sankpill with DawnStarr and her filly. Like Freckles, DawnStarr, an Arabian, was monitored daily throughout her hospitalization, which lasted 45 days.



Photo by Brennan Engle

A new Dawning

DawnStarr had a similar reproductive challenge as Freckles. A routine trip to the east pasture of Suzy and Alan Sankpill's ranch, Hacienda Del S-Par Arabians in Stillwell, Kan., turned out to be anything but. It was there that Liz Laabs, facility manager, noticed something alarming about broodmare DawnStarr, who was heavy with her third foal. She was dripping colostrum, the precursor to mare's milk that is rich in antibodies.

The 17-year-old Arabian was 45 days from her due date. Their veterinarian, Dr. Tom Lenz, happened to be at the ranch that day in early July, so he evaluated DawnStarr. An ultrasound examination revealed abnormalities with DawnStarr's placenta. She was placed on antibiotics and moved to a foaling stall.

Suzy has been there for every part of DawnStarr's life. "I bred her, and I delivered her," Suzy says. And Suzy would do anything to get DawnStarr through this medical crisis.

Even under their watchful eyes and being housed in a well-equipped facility, Suzy and Liz opted to take DawnStarr to the teaching hospital on July 13. Their veterinarians were 30 to 45 minutes away. If DawnStarr had a problem at the ranch, that amount of time could mean the difference between life and death. "I would rather trailer a horse that's stable and having a problem than one that's down and having a problem," Liz says.

"DawnStarr was stable and alert when she presented to the VMTH," Dr. Davis says. "We did a complete reproductive examination and began blood work. DawnStarr had a history of dystocia. She had colic surgery following her first delivery; after her second foal, she retained the placenta."

Dr. Rush recalls examining DawnStarr. "She had premature lactation and placental insufficiency," Dr. Rush says. "This was certainly an at-risk

pregnancy. We continued the antibiotics that Dr. Lenz had started and closely monitored her for clinical signs that would indicate she might start foaling."

Dr. Davis says the hospital became a temporary home for DawnStarr until she delivered. "We helped her settle in and get used to her stall," she says. "We kept the environment as quiet as possible so she could deliver on her own terms."

DawnStarr had her foal on Aug. 1. "When the foal was born, we knew it would need intervention because DawnStarr had lost all of her colostrum," Dr. Davis says. "We gave her plasma. DawnStarr and the foal did great and went home in a couple of days. DawnStarr is an exceptional broodmare."

Dr. Davis says Bill and Suzy saved the lives of their horses. "If you think there's something wrong, you're usually right," Dr. Davis says. "Nobody knows an animal like an owner."

Suzy has had several horses treated at K-State, and she holds the teaching hospital in high regard. "That place is THE BEST," Suzy says. "You have no idea what it means to us to get there, have the doors open and everyone is there ready to help."

Bill encourages equine owners to learn from his experience. "Wildcat survived because of the work done by the doctors and students at K-State," Bill says. "Don't ever hesitate to involve the teaching hospital with health issues associated with your horses. You may save a horse's life because of it."

In Freckles' case, the question he wondered on that cold February night was finally answered. He would take home two horses. 🐾

TEACHING CARE

The veterinary technicians at the Veterinary Medical Teaching Hospital (VMTH) are jacks-of-all-trades in purple scrubs. They teach students, re-stock supplies, advise clients and answer general questions from the public.

While performing all of these mission-essential tasks, they also provide the best care for the animals being treated at the hospital. Literally every one of the 50,000 animals that receive treatment through the VMTH is in some way touched by a veterinary technician.

Sharon Tucker, a large animal technician, has an easy way of simplifying her very complicated job. "I always compare my position to what a nurse is to a doctor," she says. "We provide similar services."

There are 29 veterinary technician positions at the hospital. All of the hospital's veterinary technicians graduated from a two-year program from an accredited college. The majority graduated from Colby Community College, Nebraska College of Technical Agriculture or other schools in the Midwest.

The hospital's veterinary technicians were recently honored during National Veterinary Technician Week Oct. 9-15. The VMTH observed the week with displays at the small and large animal reception desks to inform clients about the important role of veterinary technicians in the hospital.

"Our veterinary technicians are invaluable," says Dr. Susan Nelson, clinical assistant professor at the Pet Health Center, the hospital's small animal veterinary practice. "They teach the students specific skills such as drawing blood, taking cytology samples, providing general information and materials, deciphering vaccine histories and providing overall organization," Dr. Nelson says. "The technicians teach students proper handling techniques to administer medicines and to perform procedures so they don't injure themselves or the animals."

“ We help patients and clients get started on the right track so that their pet has the best chance to enjoy a long, healthy life. We advise owners about the appropriate diet, exercise, lifestyle, training and preventive health care for their new pet. ”

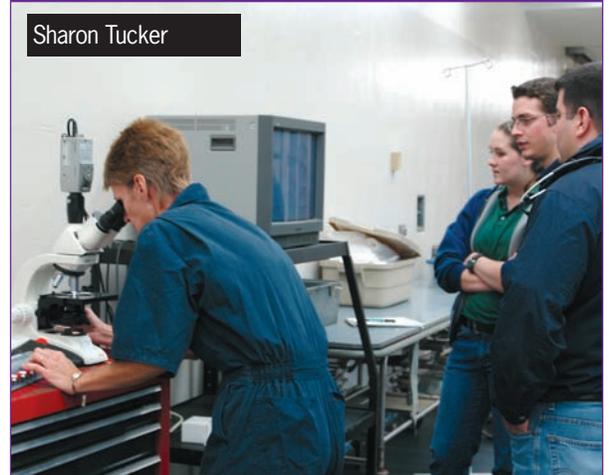
—Beth Galligan



Dr. Susan Nelson and Beth Galligan



Dana Parvin



Sharon Tucker



Eric Traul

“Our veterinary technicians are invaluable. They teach the students specific skills such as drawing blood, taking cytology samples, providing general information and materials, deciphering vaccine histories and providing overall organization.”—Dr. Susan Nelson

TOUCHING LIVES

Technicians Beth Galligan and Dana Parvin work in the Pet Health Center. They assist the three doctors in the bustling general medicine practice that provides hands-on training opportunities for senior veterinary students. “I enjoy general medicine and seeing a little of everything,” Beth says.

While that range includes everything from routine checkups to injuries, Beth also deals with chronic health conditions and assists with diagnostic and preventive procedures. She particularly enjoys kitten and puppy examinations. “We help patients and clients get started on the right track so that their pet has the best chance to enjoy a long, healthy life,” Beth says. “We advise owners about the appropriate diet, exercise, lifestyle, training and preventive health care for their new pet.”

Beth says 90 percent of her time is spent teaching the veterinary students. That and educating pet owners are the most rewarding aspects of her job. “My favorite part is helping both students and pet owners make good decisions about the animals they own or the animals they’re treating.”

Unlike the Pet Health Center, the majority of a surgery technician’s time is spent solely with the patient. Eric Traul, a surgery technician, explains in his hospital section the doctors and senior veterinary students typically interact with the clients. His main focus is the patient.

Eric prepares the surgery site on the animal and prepares the surgery suite by gathering the necessary instruments for the operation. His responsibilities extend to the small animal recovery ward where he monitors the patient following surgery.

“The surgery technicians keep things moving smoothly throughout the surgery,” says Dr. James Roush, professor and small animal surgery section head. “Clients don’t realize how integral they are to the running of any veterinary hospital, because they make each veterinarian

more efficient, which allows us to spend more time with patients and clients.”

Surgery technicians also help the students with surgery preparation. This includes preparing for surgery, following proper sterile technique and answering questions about the patient’s procedure. Surgery technicians usually work in other areas of the hospital as well. Eric helps with exotic animal and with large animal surgery.

“It’s rewarding to see the senior students learning and getting to do parts of the surgery,” Eric said. “It’s also rewarding to see how happy the owners and students are when a patient is able to return home.”

While Eric may be preparing the surgical site on a dog, cat or iguana, Sharon, a large animal technician, may be stocking the field service units that make on-farm calls for herds. Each truck must be stocked with specific and ample supplies because the units travel across Kansas providing treatment for 33,000 animals annually.

Sharon closely tracks inventory of large animal vaccines because many are seasonal. For example, calves born in the spring must be weaned by fall so Sharon makes sure she has respiratory disease and clostridium vaccinations well stocked for fall trips. In the spring, she stocks the scour prevention vaccines for heifers.

Sharon assigns the veterinary students for each trip and conducts inventories to ensure the trucks are properly stocked. After each trip, the students report to Sharon and she reviews billing information.

Another major aspect of Sharon’s job, like Beth’s, is working with clients. She fields phone calls from clients, schedules appointments and answers questions.

For Sharon, as well as most veterinary technicians, the job is anything but routine. “There aren’t typical days,” Sharon says. “That’s why I like my job.” 🐾

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LEFT BEHIND • K - STATE RUSH



A two-week emergency and critical care rotation turned into a crash course in veterinary medicine, tragedy and triumph for four senior veterinary students.

Dr. Rose McMurphy, anesthesiology section head, and Dr. Lisa Moore, a board-certified internist, planned and organized a trip to Louisiana in the wake of Hurricane Katrina. "I was on the Internet looking for ways to help by making a donation to a reputable

organization," Dr. McMurphy says. "That's when I saw that LSU (Louisiana State University's College of Veterinary Medicine) was asking veterinarians to volunteer."

Drs. McMurphy and Moore recognized the tremendous teaching opportunities associated with spending the rotation in Louisiana to assist with rescue efforts following Hurricane Katrina. When approached, the four students on the rotation, Greg Jackson, Courtney Brown, Blake Dickerson and Kami Linnens, said "yes!"

Thousands of animals were starved physically and emotionally after being abandoned following Hurricanes Katrina and Rita. Many received the best veterinary care of their lives thanks to dozens of caring professionals, including six very special people from the teaching hospital. Each picture tells of the cumulative tragedy. Cane's story (see left) is one animal's journey that could have ended like so many others, but it didn't.

Following are a few of each student's insights as the accompanying photos tell much of the story.

Impressions:

"This experience will define my senior year and my career in veterinary medicine."
—Greg Jackson



CANE & THE VERY ABLE

The euthanasia solution was already drawn. The chow's head injuries were horrific. Senior student Kami Linnens couldn't watch him be euthanized. "Did he really have to die after he'd survived all this?," Kami asked. "This" was being locked in a flooded house for three weeks and surviving two hurricanes.

The group named him Cane, short for hurricane. Above left: A radiant Kami holds Cane after he receives initial critical care treatment at Louisiana State University. Center: Back at the VMTH, Dr. Rose McMurphy displays one of 59 heart worms hand extracted from Cane's heart. Right: A healthy Cane with Kami at home in Manhattan. "I'm just so thankful that I had the opportunity to help him," Kami says. Cane is available for adoption. If interested in providing a loving home, please call Patrice Scott, "AnimalIFE" editor, at 785.532.4046 for details.



Story by Patrice Scott

ES TO AID LOUISIANA'S ANIMALS

"We saw hundreds of cases of bloody diarrhea, eye lesions and chemical burns to the paws and elbows. So many patients were emaciated. Triage took on a whole new meaning to me."

—Courtney Brown

"The week at Lamar-Dixon was filled with emergencies. The week at LSU was nothing but critical care cases. I learned a great deal about animals and just how generous people can be."

—Blake Dickerson

"It made me so proud of the career I'd chosen. I felt like I was part of the greatest profession in the world."

—Kami Linnens

On Drs. McMurphy and Moore:

"During the entire trip they were always supportive of our experience as students, first and foremost. They functioned as teachers, mentors, friends and just other people experiencing this tragedy."

—Greg Jackson

"I will always be grateful to Dr. McMurphy and Dr. Moore because this experience changed me in ways I cannot put into words. It proved to me that I can hold it together under extreme conditions."

—Courtney Brown

"They shouldered great responsibility by taking four students into that area. Without them, the three dogs we



brought home would probably be in Louisiana somewhere or euthanized, especially Cane."

—Blake Dickerson

"Incredible! They worked so hard to make this happen, including acquiring approval for a curriculum change. When they couldn't locate hotel rooms, they rented an RV. I appreciate them."

—Kami Linnens 🐾



Editor's Note: In an effort to reunite owners with their animals, pictures were posted on petfinder.com. The animals could technically be adopted within three weeks. However, many shelters asked that the animals be fostered until Dec. 31. To date, no one has come forward to claim Gonzo, Katie or Cane.



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Animal LIFE

CANE & THE VERY ABLE



Left to right: Back on campus, Blake Dickerson walks his newly adopted pit bull, Gonzo. Drs. Lisa Moore and Rose McMurphy, walking Katie, arranged the trip to Louisiana. Greg Jackson, Courtney Brown, Kami Linnens and Cane bonded because of this experience. The group rented an RV and called it home for two weeks. "No one had to resort to the 'serenity tent,'"Greg says.

Two K-State veterinarians and four senior veterinary students walk the dogs they rescued in Louisiana following Hurricanes Katrina and Rita. While there, the group treated hundreds of animals.

The team spent one week at Lamar-Dixon, a makeshift animal shelter in Gonzales, La. Gonzo, the pit bull, was named after the city. Katie, a German Shepherd mix puppy, was named after Hurricane Katrina.

They spent a second week at Louisiana State University treating critically ill patients. Cane, the chow, was brought to LSU near death after being locked in a flooded house for three weeks.

Cane is available for adoption. If interested, call Patrice Scott at 785.532.4046.

Read more on pages 22-23.

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