



USDA announces \$1B Plan to Combat Avian Influenza

BY: SAMANTHA BARTLETT, DVM

The U.S. Secretary of Agriculture, Brooke Rollins, announced a \$1B five-pronged approach to address avian influenza to include \$500 million for biosecurity, \$400 million for financial relief for farmers and \$100 million for vaccine research, reduction in regulatory burdens, and temporary import options.

The Wildlife Biosecurity Assessments will be expended to safeguard farms from transmission from wild birds. The program will initially focus on egg-layer facilities. Wild bird transmission causes about 83% of HPAI cases. Currently, the 150 facilities that follow these protocols have had only one outbreak.

Additionally, biosecurity audits will be expanded to include all HPAI-affected farms and surrounding, non-affected farms. The audits are free. Shortcomings must be addressed to remain eligible for indemnification for future infections. USDA will share up to 75% of the costs to fix biosecurity concerns identified in the audits. In addition, USDA will deploy epidemiologists to provide advice to producers on how to reduce the risk of HPAI infection at their facilities.

Up to \$400 million will be allocated to help farmers accelerate repopulation of their flocks and to indemnify producers whose flocks must be depopulated to control the spread of HPAI. USDA is also working to reduce regulatory burdens on the chicken and egg industry to lower consumer prices. This includes strategies to expand supply in the commercial market, minimize burdens on individual farmers who harvest homegrown eggs, develop strategies to limit the extent of depopulations in HPAI outbreaks.

Finally, the USDA is focused on strategy for new generation vaccines and therapeutics to minimize depopulation of egg-laying chickens. USDA is also working to limit impacts to export trade markets from vaccination.

The USDA's February 21 Egg Markets Overview stated there were 36 confirmed outbreaks in nine states with a resulting loss of 26.8 million birds. This has resulted in egg shortages within the U.S. and an average wholesale price of more than \$8 per dozen compared to \$2.25 last fall.

The AVMA website also has up-to-date information on avian influenza and its epidemiology in the United States.



Combating Illicit Xylazine Act Reintroduced to Congress

BY: SAMANTHA BARTLETT, DVM

Xylazine is increasingly found mixed with narcotics, including fentanyl, posing a serious health and safety risk to the people who use them. AVMA has championed legislation that is being reintroduced to Congress to address the dangers of xylazine while ensuring its availability to veterinary medicine.

The Combating Illicit Xylazine Act would reclassify xylazine as a Schedule III drug, giving the U. S. Drug Enforcement Administration (DEA) more tools to address the use of illicit xylazine by the public. Scheduling the drug would keep the drug available for veterinary use and would allow the DEA to track the supply.

The bill was widely supported by the last Congress with a version passing the House. However, the motion was blocked in the Senate on a procedural point. The AVMA has continued to work with both sides of the aisle and was able to secure the support needed to reintroduce the bill to the new Congress. The bill also has the support of the DEA and the U.S. Food and Drug Administration.

In a letter submitted to record during a hearing of the Energy and Commerce Health Subcommittee,

Dr. Sandra Fae (AVMA President) said, “The Combating Illicit Xylazine Act strikes the right balance of helping address the public health threat of illicit xylazine while maintaining veterinary access to this critical animal sedative. Strongly endorsed by the AVMA, this legislation is essential to protecting our communities from the grave health and safety risks of illicit xylazine, upholding animal welfare, supporting public health, and ensuring our nation’s veterinarians are equipped with all the necessary resources to provide high-quality veterinary care.”

The DEA has already started the administrative process for the classification of xylazine as a scheduled drug. Without the statutory changes by Congress to keep xylazine available for veterinary use, the drug’s use will be limited by the DEA and supply disruptions or complete loss of the drug from the marketplace can occur.

Individuals that wish to get involved can ask members of Congress to support the Combating Illicit Xylazine Act. AVMA members can also take action through the AVMA’s Congressional Action Network.

Study Shows That Bird Flu Has Silently Spread from Animals to Some Veterinarians

BY: SAMANTHA BARTLETT, DVM

On February 13, 2025, the Centers for Disease Control and Prevention (CDC) published the results of a study entitled, “Seroprevalence of Highly Pathogenic Avian Influenza A(H5) Virus Infections Among Bovine Veterinary Practitioners.” The aim of the study was to determine the risk of infection with highly pathogenic avian influenza in veterinarians who work with cattle.

Among 150 veterinarians tested for the study, 3 bovine veterinarians were found to be unknowingly infected with H5N1. Two of those practitioners had not been exposed to animals that had a confirmed or suspected H5N1 infection. One veterinarian did not practice in a state with confirmed H5N1 infected cattle.

The authors of the study stated, “These data highlight the possible benefit of national seroprevalence assessments of recent HPAI A(H5) infection among practitioners at increased risk for exposure, which might help assess occupational risk in states without confirmed HPAI A(H5) virus detections in dairy cattle.” The study is a joint effort between the CDC, American Association of Bovine Practitioners (AABP) and the Ohio Department of Health (ODH).

Data was obtained by study staff members from the CDC and ODH at the 2024 AABP conference in September. They specifically searched for attendees who had worked with cattle during the previous three months. These attendees were asked about their exposure to various species of animals, personal protective equipment they used around these animals and if they were vaccinated for seasonal influenza. Blood samples were obtained by CDC epidemiologists to test for antibodies against HPAI.

Participants were veterinarians that practiced in 46 states and Canada. More than half reported practicing in states with H5N1 positive dairy herds and 17% had worked with cattle with known or suspected H5N1 infection.

Of the three veterinarians with H5N1 antibodies detected, none had reported respiratory or flu-like symptoms nor had they been tested for influenza since January 2024. Further, none had worked with dairy cattle confirmed or suspected to have H5N1 infections although one practitioner did work with poultry confirmed to be infected with H5N1. All three stated they wore gloves or a clothing cover when providing care to cattle but none had used respiratory or eye protection.

Since this study, the outbreak has continued to expand and affect more people in the United States, mostly in those exposed to dairy cows and poultry that have been infected. The USDA recommends practicing rigorous biosecurity. USDA also has financial assistance for herd owners to help implement and maintain biosecurity practices in the face of this virus. Veterinarians and other workers who work closely with cattle and poultry should wear protective equipment to include respiratory and eye protection.



Curriculum Finalized for New Colorado Veterinary Professional Associate Position

BY: SAMANTHA BARTLETT, DVM

Colorado voters approved the creation of a new veterinary professional associate (VPA) position in November 2024. The creation of this role is to help with the future shortage of veterinarians as predicted by the US Bureau of Labor Statistics. A VPA would have more responsibilities and education than a veterinary technician but not a veterinarian. Many veterinary organizations including the Colorado Veterinary Medical Association (CVMA) spoke out against the position citing serious concerns about the education program required to support such a position.

Shari Lanning, director of the veterinary clinical care graduate program at Colorado State University, designed the curriculum for the new position. The first entry class is anticipated to be fall 2025. The curriculum is a total of 65 credits. A total of five semesters includes the first three online, a fourth intensive hands-on laboratory semester and a fifth semester for clinical internship. Overall, there would be about 416 hours of hands-on labs and 540 hours at a clinic. The curriculum includes a required credentialing exam and currently only focuses on small animal care.

The Department of Regulatory Agencies (DORA) is still determining the exact scope of the new position. Diane Matt, CEO of CVMA encourages veterinarians to post comments online about their thoughts and perspectives for regulations for this position. Lawmakers introduced a bill to put specific restrictions on what can be included in the rules for the new position by DORA. The Veterinary Workforce Requirement Bill outlines that the instances in which a veterinarian can delegate a task to a VPA include if the aspects of the practice are within the training, experience and competency of the VPA, if the practice is permitted under requirements of state and federal law and board rules; if the supervising licensed veterinarian and VPA are located at the same veterinary premises while practicing veterinary medicine; and if the licensed veterinarian or the VPA has obtained informed consent from the client.

The AVMA released a statement in response to the curriculum being finalized and continues to express concern around the creation of this position, stating the following:

“The AVMA continues to express its considerable concern around the creation of a veterinary midlevel practitioner, termed a “veterinary professional associate (VPA),” in Colorado. As authorized by Proposition 129, passed last November, these individuals would be able to practice veterinary medicine, including diagnosing, prognosing, and performing surgery, after having completed only a fraction of the education and training that a veterinarian graduating from Colorado State University’s College of Veterinary Medicine currently receives.

The master’s program that has been proposed at CSU to create this VPA is to be delivered mostly online, with three semesters of compressed lecture-only education (no hands-on learning), one in-person semester of basic clinical skills training, and a one semester internship/practicum. Such a minimal amount of hands-on clinical skills training for a graduate who will be thrust into a medical decision-making role and entrusted to perform invasive surgeries on animals, puts the health and safety of their patients at considerable risk. Furthermore, the VPA creates unacceptable liability for supervising veterinarians who will ultimately be responsible for everything that the VPA does (or doesn’t do). Colorado veterinary professionals recognize these risks. When polled, 95% of Colorado veterinarians said they did not support the creation of a VPA, and 93% said they would not employ a veterinary professional associate (VPA).”

Kansas Man Pushes to Legalize Raccoon Ownership

BY: SAMANTHA BARTLETT, DVM

Stephen Kaspar, a Lenexa, Kansas resident, is pushing lawmakers to legalize the keeping of raccoons as pets. Kaspar co-wrote House Bill 2297 with Rep. Joe Seiwert currently under consideration by the Kansas House Agriculture and Natural Resources Committee.

The bill requires people wishing to keep raccoons as pets to obtain a permit from the Kansas Animal Health Commissioner. Potential owners must take a course in on raccoon care, keep their animal vaccinated for rabies and consent to annual inspections.

Concerns expressed by the Kansas Department of Health and Environment include the concern for lack of vaccines specifically designed to protect raccoons against rabies and the fact that raccoons are a significant reservoir for the rabies virus. Additionally, the bill would potentially facilitate movement of raccoons from different geographic regions into the state. Kansas is currently free from raccoon variant rabies, however, introduction of raccoons from other parts of the country could end that.

Additional concerns include the risks of other zoonotic diseases carried by raccoons and the risks to veterinarians and their staff that may not be trained to handle wildlife, yet must provide annual exams for these pets.

Kaspar states that the bill he helped introduce does not address wild raccoons, but USDA-bred raccoons and that a lot of safeguards have been suggested within the bill to minimize the risks. In addition to the educational requirements, the bill would implement several fees for potential raccoon owners including an initial application fee of \$100, an annual permit renewal at \$250 as well as fees for annual inspections, transfers of ownerships, etc. Additionally, if a permitted raccoon owner violates any of the requirements of the program, they will be charged a \$1000 fine for rehoming and care for their permitted raccoon.

MAY CE EVENT

Speaker: Philip Bosse, DVM

Topic: GI Parasitology: Utilizing the KeyScreen GI Parasite PCR Panel for Enhanced Diagnostic Screening & Improved Standards of Care

Date: Thursday May 15th, 2025

Time: Dinner/Registration: 6:30 | Presentation: 7:00

CE: 1 Hour

Location: iropo's

Fee: No fee to attend this event, but RSVP is required by May 12th. Current membership dues cover all CE..

Sponsor: Antech

Classifieds

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March 26, 2025

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Westwood Animal Hospital is seeking a full-time associate veterinarian to join our AAHA-accredited hospital.

The applicant must share our love, respect and compassion for dogs and cats, be able to accomplish assigned duties while keeping pet restraint to a minimum, and have strong but easy-going client and staff interaction skills. Contact Dr. Wayne Hunthausen at 913-362-2512 or wayneh42@aol.com.

About WESTWOOD ANIMAL HOSPITAL:

Westwood Animal Hospital is an AAHA-accredited, privately owned, full-service three doctor-practice, centrally located in the Kansas City metro area near The Country Club Plaza shopping, restaurants and museums. We opened Westwood Animal Hospital in 1985 and have thousands of clients, a great facility, location and a strong community presence. Our reputation is superior, with reviews averaging 4.5 to 5 stars. The practice is open Monday – Friday, 7:30 am to 5:00 pm, and closed on Saturdays and Sundays. Our doctors see appointments from 8:30 am to 5 pm with a 1 hour break for lunch from 1 pm to 2 pm.

Our hospital is equipped with a Bionet BM3 touch-screen monitor, full anesthesia monitoring equipment, a new IM3 dental unit, a class IV NovaPulse surgical laser, and much more. Our diagnostic equipment includes a comprehensive in-house IDEXX laboratory, SmartDR and Schick DDR digital radiography and ultrasound. Our hospital software is Covetrus Pulse. Our support staff will allow you to practice medicine at a high standard of care. In addition to medicine and surgery services, we have a medium-sized boarding kennel, a training center that offers five levels of obedience and a behavior consultation service for families with problem pets.

March 14, 2025

Animal Clinic of the Woodlands & NKC Animal Clinic are seeking a full-time veterinarian to join our growing team. We are sister hospitals – small animal only- one hospital located in North Kansas City, Missouri (NKC Animal Clinic) and one hospital located in Gladstone, Missouri (Animal Clinic of the Woodlands). NKC was built brand new in 2021 and Animal Clinic of the Woodlands will have a brand new 10,000 square foot hospital in the summer of 2025. We have in-house Idexx lab equipment, a brand-new surgical suite, ultrasound, hydrotherapy, digital radiography, digital dental radiographs, laser and much more. The schedule is 4 days per week 8am-(5 or 6pm) and rotating Saturdays (8am-noon). We highly value a work/life balance as the owner is a working mother of 3 young children. We offer a competitive salary, sign on bonus, health insurance stipend, 401K with match, CE allowance, personal/vacation time, dues, liability coverage, discounted care, mentorship and so much more. Email questions or resumes to Dr. Lillie Fitzpatrick at LLRMRB@gmail.com