



**VCSG**

# Veterinary Care & Specialty Group

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*24/7/365*



April 2020

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**VCSG is a proud supporter of...**

National Puppy Day at Petsense  
Signal Mountain Road-Coming soon!

**Dr. Holford Full-time!!! (see p. 5)**

**Dr. Amy Holford**  
will be seeing appointments  
for ER and IM - noon-8 p.m.  
Friday, Saturday, Sunday  
Effective immediately

**Dr. Kim Johnson**  
will be seeing Oncology appointments  
April 6, April 27

Call VCSG 423-591-0270  
for more information

**SAVE THE DATE**  
**VCSG'S ANNUAL**  
**FREE CE CONFERENCE**  
Saturday, August 22  
Our New Hospital

## RAY RUDD DVM, MS, DACVS

VCSG is happy to announce that  
Dr. Ray Rudd will be seeing  
surgical patients at VCSG.  
Call VCSG 423-591-0270  
for more information.

Dr. Rudd graduated from the  
University of Tennessee College  
of Veterinary Medicine and  
completed an internship and  
surgical residency at the Purdue  
University School of Veterinary  
Medicine. He has served as  
Chief Veterinarian for  
3D MCDS (FWD) US Army.

**SEE PAGE 6 FOR HOSPITAL CONSTRUCTION UPDATE**

**24 HOUR**

**VETERINARY**

**BROAD ST.**

**WE ARE MOVING JUNE 2020!**

**VCSG**



# Veterinary Care & Specialty Group

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## Vader's Friends of the Month



Vader Pullen

## Ask the Vet:

### Helping You Understand the Anesthetic Process

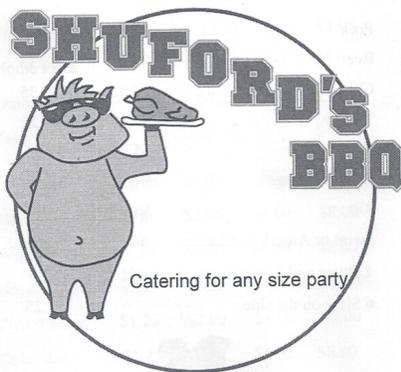
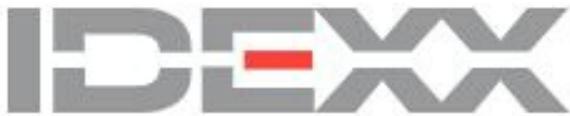
P.K. Hendrix  
DVM, PhD, Dipl ACVAA  
Veterinary Anesthesiologist



Dr. Hendrix and Dudley

Your pet is scheduled for a procedure requiring anesthesia, and you are worried because anesthesia is scary, right? Here at VCSG we understand your concerns and try our best to ensure that your pet will receive the best anesthetic care we can provide. Whether your furry family member is scheduled for diagnostic procedures such as endoscopy or a CT scan, or undergoing surgery, we are always by its side, paying attention to details!

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Before anesthetizing each pet, we want to know some things about its medical history. If it had previous sedatives or anesthesia and had issues, let us know. We are usually able to make changes that will improve the next experience. Additionally, tell us if your dog or cat is taking supplements or medications, especially heart drugs or pain medications. This knowledge can help us tailor the drugs we use to minimize adverse events.

Certain breeds are "special" regarding sedation and anesthesia. Brachycephalic (stubby-nosed) breeds such as English bulldogs, pugs, Boston terriers, French bulldogs, and Persian cats are at increased risk of upper airway blockages when they are heavily sedated or anesthetized. These animals are at special risk when recovering from anesthesia, because as they wake up, the airway tube must be removed to keep the pet from biting the tube. Unfortunately, residual sedation and their airway anatomy increase the likelihood of airway obstruction that can be life-threatening if not noticed. We watch all our patients closely during the recovery period to ensure they do not have problems such as obstruction. Additional breeds that can have special anesthetic concerns include giant breed dogs, Doberman pinschers, Boxer dogs, and Cavalier King Charles spaniels. These dogs occasionally have heart conditions that may warrant additional tests such as an ECG or cardiac ultrasound to determine the severity of disease before anesthesia. If your pet is extremely sick or has severe trauma, its risk of having anesthetic difficulties are greater than if it is relatively healthy; but the risk of death is still low. Our team of highly skilled veterinary technicians and veterinarians work together to secure the best outcome possible for your debilitated or traumatized animal.

We love our geriatric pet friends, and we understand that older pets may have conditions requiring special attention. For example, we want to know if your older pet has eyesight or hearing loss, or mentation changes. We will make these conditions known to everyone handling your pet to try to minimize anxiety or confusion. Many geriatric animals have arthritis, heart murmurs, and dental issues that require adjustments to anesthetic plans. Many of us here at VCSG also have old pets, and we treat your geriatric pet (and all pets) as though it was our own!

So, what actually happens during the peri-anesthetic time period? Before you bring your pet to our hospital, we will usually ask you to remove all of your pet's food about six to eight hours prior to hospitalization. A full stomach increases the chance of nausea, vomiting, and regurgitation during anesthesia. Providing water is OK. Once your pet is in the hospital, we will perform a physical examination. We will then clip hair to place an IV catheter in one of its

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legs (usually a front leg). We then give an anti-nausea drug. We draw blood to check for abnormalities that could impact your pet's health. If you have recently (within the past few weeks) had blood values checked at your referring vet's hospital, you can simply bring that information instead. However, if your pet's condition has changed since its last visit, we may need additional blood tests. Your pet will receive medications before anesthesia to provide calming and to decrease pain. Once the sedatives take effect, we administer the anesthetic medication(s) to cause your pet to temporarily fall asleep. A tube is inserted into its trachea (windpipe) to allow for delivery of oxygen and the inhaled anesthetic agent that maintains sleep and prevents your pet from feeling pain or discomfort during its procedure.

During anesthesia, we will provide warm circulating air to minimize loss of body heat. We continuously monitor heart rate, respirations, blood oxygen levels, and blood pressure. Intravenous fluids are delivered at appropriate rates determined by your pet's condition and surgery. Necessary analgesic drugs are provided during the procedure if warranted. Local anesthetic techniques are frequently a part of the protocol to numb specific areas and allow reduced dosages of general anesthetics.

Following its procedure, your pet is watched closely as it awakens from anesthesia. We provide warmth, additional pain meds, and IV fluids until the dog or cat is awake enough to eat and drink. Following most diagnostic procedures, the pet is typically able to go home that day. After most surgical procedures, your pet will stay overnight to receive close monitoring, pain medications, and supportive care. If your pet was significantly debilitated before anesthesia, it may need longer hospitalization.

Hopefully, this article has taken a bit of the mystery out of what our anesthesia team does here. While anesthesia can be intimidating, we do our best to care for your pet and provide safe-as-possible anesthetic care. If you have anesthetic questions when you bring your pet in for a procedure, please ask!



Joseph, Jimi,  
and Buddy  
Hendrix

Dr. Hendrix and  
husband Mitch





## Dr. Amy Holford is FULL-TIME!!

Amy L. Holford, VMD, DACVIM-SAIM, was born in Delaware and raised in Pennsylvania. She attended veterinary school at the University of Pennsylvania, did her internship at Garden State Vet Specialists and her residency in internal medicine at the University of Tennessee. She was then part of the medicine faculty at UT.

For the past ten years, she has been one of the main clinicians that runs the Community Practice rotation at UT, allowing the fourth-year students the freedom to "be a doctor" on their own, while under supervision.

Dr. Holford particularly loves endocrinology, geriatric medicine and communication. She is a huge foodie, loves wine and bourbon and live entertainment (musicals, concerts, etc.). Travel is also one her favorite things to do. Dr. Holford has trips planned for Italy and Greece in the future.

When she is not working or going out, she is taking care of her animals on her new mini farm and fixing up her new house!

VCSG is so happy that Dr. Holford has decided to move to Chattanooga and join us on a full-time basis. She will be seeing Internal Medicine and ER patients on Friday, Saturday, and Sunday from noon until 8 p.m.





## Update on the Hospital Construction



# BerryHutton

TWO COMPANIES, ONE TEAM.

The construction remains on schedule, although there are concerns over a possible lockdown. In March, we completed the brick and approximately 80% of the windows and exterior glass. Parking lot preparations have started as we poured the dumpster pad and completed the rear retaining wall. The interior paint has started, and we have completed the masonry kennel separations. In April, our goal is to continue with the parking lot, receive permanent power and continue painting and interior finishes.