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# **Raccoons Stole My Baby Jesus**

by Jennifer Doll, DVM

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# Raccoons Stole My Baby Jesus

A look at the life of a not so traditional veterinarian.

"....I loved it ....." — Temple Grandin



What happens when you are the only veterinarian willing to see the animals the other vets in Eastern Iowa won't?

# Jennifer Doll DVM

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First Edition

Names of most of the people in this book have been changed to protect the innocent.

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The entire time this was happening. Peanut appeared to feel fine. She had no idea she had a problem. I brainstormed on breaking her jaw, to allow a better view of her mouth and throat. I considered finding a vet with a fiber optic scope that was only a few millimeters in diameter. Once again, I wondered, "How far do I go?" This is a dilemma many owners face with their pets, and I'd faced many times before. We were concerned about the amount of pain she would need to endure with surgical exploration of the area. I needed to find if the blood was coming from her throat or esophagus, and why. But once I knew, then what? We also have the sad fact that money and time must be spread over several dozen cats. An MRI or CT scan was out of the question. "The need of the many outweighs the need of the few" is a frequent saying at many shelters.

In the end, we decided that we should euthanize Peanut while she still felt good, for it is a rule at Witty Kitties that no one suffers. After putting Peanut down, and crying a tremendous amount, I made myself take a look at Peanut's mouth and throat. It was a difficult task and I won't go into details. As it turned out, she had a mass in her pharynx. During earlier exams I hadn't seen many polyps and I knew they are benign; but to remove everything would have been impossible without intensive surgery to her neck and throat.

Peanut is buried under a tree near the shelter, and continues to pop into my mind when I walk past her. I like to remember how funny she looked, and how happy she always seemed with herself as she would

rub her drool-soiled face against mine in the morning. I have a favorite photo of Peanut that was taken by a wonderful volunteer and friend of ours and Witty Kitties. It is of Peanut sitting in the driveway, staring at a mouse she or another cat had caught. She looks content, though there is no way she could ever eat that mouse. Images like that, and Peanut's joyful, yet short time here keep me going. It's why I keep doing what I can to make even the tiniest moments as wonderful as possible for all the witty kitties.

### Should I Follow My Head? Or My Heart? .....Or My Gut? (The story of Sid and Rip)

This is so typical:

One day I was getting towards the end of a day of work at one of the local shelters. My mind was on my work most of the time, but kept returning to a particular cat I had met earlier in the day. I guess you could say I was even a bit obsessed at times, finding myself more distracted by him as the day wore on. This isn't unusual for me.

This cat was like thousands I'd met before. He was homeless. There was nothing new there. Mind you, I often am consciously trying to put the local unwanted pet population problem in perspective as it relates to all the human and animal suffering that goes on around the world. I remind myself how lucky I am to be who I am, where I am, in the time I am. So why couldn't I ignore this one cat and get on with my work? He was a stray cat. That wasn't my fault. Humans have inflicted domestication and homelessness on cats for so long. I am just one person.

But.... when the problem is in close proximity to me, the need to do something immediately is quite demanding. I actually was feeling I "owed" it to this cat more than most.

Why? I've seen hundreds of cats who would never find homes, who would be euthanized for lack of space and money for shelters. As a vet, I had been learning to take part in that difficult dynamic, comforted only by the knowledge that if I could help a cat die with as little mental and physical pain as possible, I would be giving him a passing that would otherwise not have been so peaceful.

What was so special about this cat? Well, when the Humane Society staff picked him up, he was extraordinarily thin and dehydrated, eyes sunken, and coat tragically unkempt.

So what? So many strays came this way. One difference was he also suffered from a severe dislocation of the left knee. From the feel of it, it had been like that long enough for the muscle and other soft tissue to not permit easy replacement. At any rate, he couldn't stand on it.

So what? Cats came in frequently with similar injuries, and we shouldn't be surprised by that. Well, since this cat was unable to lie on his left side, he had been hunkering down in the horrendously cold weather for the last few weeks, lying primarily on his right side. Thanks to the super sub-zero temps of the last week, he developed frostbite to both right paws, which were swollen to the size of baseball mitts. If it were not so sad, I'd have laughed at how funny they looked when I first saw him. I mean they were huge. So what? We were seeing tons of cats with frostbite that time of year. But (and this was a big "but"), this cat was a four-paw declaw, meaning all four paws were without nails. To make it worse, his only good leg wasn't "good" either! The left foreleg, the one that wasn't frostbitten and didn't have a dislocation, had a re-growth of the nails. This happens when a tiny piece of the bone that is removed when a toe is declawed is accidentally left behind during surgery. As the new nail grows from the left-behind bone, it breaks its way through the skin. To say the least, this is painful and almost always ends in a stinky infection.

Soapbox time: I hate declawing. I used to declaw cats. For 8 years right out of school, I did the surgery because we were taught that is was a way to make cats more appealing to owners, and would help cats get or keep homes. Not once was a negative consequence mentioned in regards to the procedure. Now, after years of NOT performing declaws, I can guarantee you there are many behavioral and physical problems associated with declawing that occur in at least a third of declawed cats within 3 years of the procedure.

Declawing removes the last bone of the toe, not just the claw. When this is done, the next bone up on the toe curls downwards, leading to walking on the tip of the bone which is just under the pad and is often damaged after the procedure. Cats compensate by tilting their "wrists" back, and often develop arthritis higher up on the leg. This chronic pain can lead to cats not using the litter box. Also, cats who can't warn you

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#### not to pet them learn to bite. Even the CDC recognizes this and states declawing should not be performed on a cat in a household with an immunosuppressed person.

I can go on and on (needn't be such a bummer right now). But if you are one of the few lucky people who got away with declawing your cat and have not had to witness any of the complications, it doesn't make it OK. Oh, and give it time. Behavioral issues due to pain can manifest years after declawing.

The Humane Society checked for a microchip, and traced the cat back to his owner. His owner, who had adopted the cat from a shelter two years prior, wasted no timehaving the cat declawed on all four paws, making the cat almost defenseless. Then he allowed the cat to go outside. His owner never looked for him to bring him in from the cold and, when notified that his cat had been found, he wasn't interested in him. Even worse, the shelter was currently filled to capacity with healthy cats -- cats that would find homes without the shelter spending a tremendous amount of money it didn't have anyway. It wasn't looking good for this poor boy. Despite all of his problems, he nibbled on his food, and made himself comfortable in his box. I had no way of knowing for sure just how accustomed he was to whatever amount of pain he was in, but he did seem content with just being warm and secure.

After checking him out that morning I went back to my usual work, trying to forget his likely fate. I reminded myself of all the other cats who could be helped with less effort. Maybe he was suffering to the point where helping him wasn't really helping him. The question "Is it worth it?" is familiar to vets and pet owners alike in such cases.

I was troubled, asking myself "Should I follow my head?" This would be my logical brain that looks at only the practicality and logistics of a situation. "My heart?" My heart is all about what I want and uses the emotions that come to the surface during a situation. "My gut?" Many may say one's heart and gut are one in the same. But I disagree. I feel my gut is the intuitive part of me. I can't really explain it, but it is just what it sounds like, guttural. It tends to be the tie-breaker between decisions being pondered by my heart and head. I won't say which I listened to, but it was a vote of two-to-one. I took the majority. I gave in.

His name was Sid. Once I got Sid home, I found he was even worse off than I thought. I had tried giving him antibiotics for his infected toe and soon-to-slough skin from the frostbite. But getting pills down his throat was very difficult. I just couldn't get his jaw open wider than about 2 cm. After a few tries, I switched to liquid. Though his jaw felt normal and was symmetrical, I could only assume he had some sort of damage to the joints of his jaw. I'd missed this earlier because it didn't hinder his eating whatsoever.

Two days later Sid became even more interesting. While under anesthesia, I found he certainly didn't have the mechanical ability to open his jaw any wider. I debrided (removed) some of the tissue that was sloughing from the three paws. I decided not to cut

back on his pain meds. I still didn't address the dislocation as it had been like that for a long time. Healing from the more acute injuries and getting stronger was more important at this point.

Eventually, as he healed, I had to make a decision about the knee dislocation. As it turned out, he had a fracture at the end of his femur (thigh) bone, near the knee. The result was that the small broken piece and the rest of the knee were positioned way up in his groin. Even if I could manage to get everything back into place to fuse the knee, it would have meant more weeks of pain, metal implants, more open wounds . . . So I decided to salvage the situation and amputate the leg. In just a matter of days, his "leg" would feel fine. He hadn't been able to use it anyway, so he would get used to the change more quickly than most. Oh, I ALSO had to remove the remaining piece of bone that was growing the nail that had punctured through his skin as a result of the declawing.

So, after several more days of pain medication and injectable antibiotics, he was moving around and gaining weight and strength. While checking on him morning and night, it never ceased to amaze me when he'd show me those bright eyes he had not been able to show on the first day. The two-to-one vote between my head, heart, and gut was a success, and very soon Sid became a beloved indoor pet.

You'd think cats as bad off as Sid don't come along too often, but only four days later, at another shelter, I came across a similar, but less dramatic, "add insult to injury" situation. I named him Rip. As in "to tear" (not as in "Rest In Peace") or as in Rip Torn, the comedian. You'll see why.

Rip walked into a person's yard a few days earlier dragging a leg-hold trap on one of his front legs. (*Future soapbox: Leg-hold traps should be illegal!*) Fortunately for Rip, the folks who found him were able to remove the trap and called friends who brought him to the shelter. He wasn't extremely thin, so I assumed he had someone feeding him at some point. But after the requisite waiting period for strays, an owner never showed up.

The shelter wasn't ignoring his paw. They were giving him antibiotics, and had given him the routine vaccinations all incoming cats get. But he was going to lose all the skin on a few toes, leaving his paw essentially skinned (like those poor animals the leghold traps were meant for). He would eventually need to have them amputated. This was something the shelter may not be able to afford, especially given the overcrowded conditions. As an injured and unneutered cat, Rip wouldn't be next in line for the adoption room. No, the adoption room was also filled to capacity.

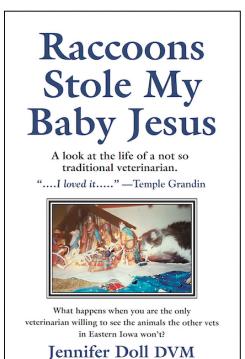
Next in line for the adoption room were a half dozen healthy, beautiful, and already neutered adult cats waiting for a spot to open as soon as an adoption was made. Also in line were other healthy and beautiful cats who still needed neutering but had no other issues. And then there were the not-so-healthy, yet fairly comfortable and easily treatable sick or hurt cats. Then

we get to where Rip sat. If Rip were a kitten, he may have the chance to "butt" in line ahead of the others, but he was about a year old. Granted, he was sweet, very tame, and cute, just not "kitten cute."

So, what happened to Rip? He ended up being a win/win situation after all. At the end of my work day, I sedated him. tested "quickly" him for feline immunodeficiency virus and feline leukemia virus, neutered him, and amputated the toes of the bad paw, all on my own time. I really did not have room at my home and Witty Kitties had its own waiting list, so I just asked that the shelter try putting him up for adoption. Though full of cats, the shelter felt he was sweet enough that he should find a home. Heck, some people actually want a handicapped pet. A mildly gimpy cat was going to sell himself. And so he did, guickly right into a home.

Time and time again I toil with problems like this. Shelter and rescue folks try to weed through who can be treated, who is most adoptable, who is suffering too much to even attempt treatment. I am always asking if it is a hero complex that makes me want to take on these odd cases. Or is it guilt, because we humans have insulted or mistreated them in so many painful ways? Is it reasonable to do the objective thing, and follow my head? "Follow logic and reason, Jenni!" But the heart says, "No! Do the 'kind' thing!"

It is at the point when my head and heart are in most disagreement that my gut comes in to break the tie. I admit I don't always listen to the majority vote, and often end up flying by the seat of my pants, hoping for the best outcome for all involved, especially the animals. Sadly, there are simply no easy answers in this constant struggle between head, heart, and gut.



You'd imagine a veterinarian living in rural lowa would lead an only semi-exciting life of small animal and farm animal work. Perhaps, at best, she could hope for a few interesting stories worthy of a place in a James Herriot book. But stereotypes be damned, as far as Jennifer Doll DVM is concerned.

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