




SPEAKING “ABERLEASE”

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Speaking “Aber-lease”

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Hi, and thank you for your interest in Aberlea. The following pages are my best attempt to convey what the practice is, why Aberlea exists, and what I do at my practice. I’ll go over what my practice philosophy is and how it has been molded since 2009. I’ll give you some backstory on how Aberlea came to be. At minimum, my goal is to help shed light on your pet’s potential as a member with us. Hopefully, we can be on the same page, speaking the same language...what we refer to as “Aberlease.”

What is Aberlea? Aberlea came to be out of formative experiences I’ve had as a small animal clinician, an officer in the Army Veterinary Corps, and a position within the pharmaceutical sector of veterinary medicine. Selecting from both the good and the bad along the way, my wife Lauren and I formed the vision of what a veterinary practice can and should be.

What’s in a relationship? I view the RELATIONSHIP I have with my patients and their owners as the cornerstone of the practice. That relationship affords me the opportunity to be a better advocate for my patients. The relationship makes all the difference. And while every patient under my care is unique the relationship is common ground, the starting point, and something I insist upon. Without a relationship, veterinary care is not much more than shots and chasing problems from behind which can be very hollow. Veterinarians can do better. Pets and pet owners deserve better.

How does Aberlea operate? Aberlea is a fiercely independent veterinary practice. I am the sole owner/founder and have zero outside investors. Our patients and their loving owners directly enable me to make a living and to offer a great place to work for my team. A lifelong learner, I am relentlessly in pursuit of quality veterinary care. My patients deserve it. It is my conviction that operating in the manner I do will get better results for my patients.

Why Aberlea exists: I believe at my core that the QUALITY and CONSISTENCY of the veterinarian your pet sees gives him or her the best chance at a meaningful life. I’ve seen it in the patients I care for. I’ve lived it with my own pets. Second only to God and my family, my purpose in life is dogs and cats. I’m here to share my gifts and training to make an impact on pets’ lives. QUALITY is achieved through time in your profession and never settling. CONSISTENCY happens at Aberlea by default...I am the only veterinarian in the practice...and the only one I anticipate any time soon. At Aberlea, quality and consistency mean better outcomes. That’s why Aberlea exists.

What I do: If you to ask, “Dr. Lane, what’s your style of practice?” my response would be something like this: Discernment is a skill I’ve been blessed with. Knowing you and your pet through our relationship allows me to better *discern* how to advocate for your pet. Most of my actions and recommendations are led by two convictions. 1. I get more years and a better overall quality of life with patients by taking problems “off the table” via preventing them in the first place. The steps involved are not difficult but do take work. And 2. I treat my patients as though they are mine with a veterinarian as an owner, and advocate as

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such. My patients have better quality of life, and I am fulfilled. I’m lucky to have this job. I just need to do the right thing and I’ll make an impact and a living!

Before getting started, I should warn you and make some disclaimers. I hold beliefs that many within my profession do not voice, and some do not agree with. I am comfortable with this. There are a few soap boxes on these pages. Most vets *want* to agree with me, like the corporate takeover of countless practices is net negative for pets, but many do not. Those working at traditional practices with a boss who is somewhere far off at an investment firm who’s never touched a dog and hasn’t even seen one in weeks are free to disagree. If you disagree with me, I genuinely wish you and your pet(s) the best. I write this for those who feel there’s something better out there for their loved ones.

Veterinary medicine is the greatest job anyone can have. No kidding. When it’s rolling, it does NOT feel like work. Sadly, it’s the small icky parts that can make it soul-sucking enough for many to leave the profession. Here’s the kicker though. It doesn’t have to be. I’d wager that nowhere in medicine or any other occupation that requires professional school can you dictate the degree of whether or not you enjoy what you do. That goes for human medicine, dentistry, law, accounting, finance, pharmacy, anything. We vets are blessed with a job that has lots of latitude in terms of regulation, scope of practice, and we are pretty uncommon to boot. It just takes independence and courage. I’d put my gig up against anything. I’m choosing to take a shot at ultimate fulfillment. And independence is one of the bastions of veterinary medicine I’m hoping to save with Aberlea.

The “icky” stuff I mentioned above: Veterinary medicine needs to move (quickly) away from the “transactional” or “sales” business model. It is barreling head on straight at it though. We veterinarians are professionals, not producers, as many business development consultant types tell us we need to be. Most veterinarians these days are paid on models that promote as many patients as possible with as high an “average client transaction” or ACT as possible. This is disappointing at minimum. You and your pets deserve more than this. It creates a scenario where those pet owners who simply put their faith in the guidance of their veterinarian are subsidizing those who no-show for scheduled appointments or only seek medical care when the ship is sinking. Yes, one must monetarily justify his or her presence as a vet, but I’ll die on the hill that being a veterinarian is unique in this important way: simply place the patient’s interests in front of your own, remain current with the evolution of medicine, charge what you’re worth, and you’ll hang around...and be incredibly fulfilled.

The other icky thing: the scarcity mindset. In veterinary school, one does not encounter much about how business expenses are actually *paid for* in private practice. Combine that with a strange (and sad) common characteristic among vets, a scarcity mindset, and you’ve got the perfect recipe to make a living from transactions and selling products, not compensation for time, training, and expertise. After vet school, it is shocking to pivot from providing best medicine to selling ear flushes, heartworm pills, and other things easily attainable on Amazon and Chewy. Behind the scenes, consultants conduct “feasibility

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studies” and count “average number of veterinarians per square mile” to determine if a practice can make it. Fees are then based on demographics around the location or what others charge determined by “secret shoppers” calling the practices nearby. These are all negative things that create a mentality of scarcity. Meanwhile loving pet owners are referred to ER clinics or must endure long wait times to be seen because veterinarians are too scared to take a stand and limit their patient base for fear of losing out if someone takes their pet elsewhere. Granted, Murfreesboro is growing rapidly, but Aberlea is plopped right in the middle of several well-established practices. My neighbors seem to be doing just fine, but I do not pay much attention to what is going on outside of my house. All veterinarians are not equal. That’s ludicrous. I’m very far from perfect, but I’ll give your pet my best. It’s worked out for since 2009 for me so far. I’ll also prioritize my fees to be centered around my time and expertise, not something you buy from me (see conflict of interest statements on the following pages). The courage part comes in when I must be *that* guy who says, “I’m good at this and I care deeply, but I cannot be good for everyone! And I can’t do good work for free.” I set my fees to reflect the value Aberlea can bring to your pet and the skills and experience I provide. That is how Lauren and I arrived at fixing this whole thing for pets and their owners...the membership model.

One last thing: I never ever want you to feel *pulled* through the doors at Aberlea or *convinced* of anything. That’s not the way I believe you should feel about where your pet receives medical care. You also will not be *sold* anything. I will simply advocate for your pet as I, a science-first veterinarian, would my own dogs. Frankly, you should *want* to come to Aberlea because of the care my team and I provide, the empathy expressed when your pet is unwell, and my relentless determination to help make a difference.

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What is Membership veterinary medicine?

Aberlea operates on a MEMBERSHIP model. There are a multitude of reasons why, but the main points are as follows:

- a. Membership entails COMMITMENT from both you and me. A membership at Aberlea is achieved through one of two avenues which I lay out in the following pages. For now, just know you have two options, but choosing one is required. If I am to commit to be there for your pet, then I need commitment from you to remain in good standing with each of your pets. More on this later (p. 17).
- b. Every member patient has a yearly visit we refer to as the Preventive Care Visit (PCV). This annual visit and the price you pay for it maintain your pet’s good standing at Aberlea. There are no exceptions to this rule.
- c. Membership is the basis for our relationship. The measures taken at each patient’s PCV are the minimum actions taken for me to feel I’ve made a difference for your pet. I do not believe I am doing so with anything less. Vaccinations are good. Fecal parasite tests are good. There is SO much more to veterinary medicine though. You can read more about the PCV in the following pages. See page 8.
- d. A limited number of members are under my care. I pledge to capping the number of members at Aberlea to be able to spend time developing the relationship we have, and to be able to accommodate unplanned visits for members when ill. We solve the problem of fragmented continuity of care this way. The membership accounts for a patient’s place in the practice and we in turn provide the consistency in who your pet sees in times of need.
- e. I choose to be this way because my patients deserve it. Because quality veterinary care cannot be rushed. And because at every stop I’ve had along the way there have been pet owners looking for this kind of care for their four-legged family members. Founded in 2022, Aberlea is proving that a practice can thrive offering this model of care.
- f. My love for dogs and cats is second only to children. However, I cannot be everyone’s veterinarian. Your pet’s membership at Aberlea means he or she will be a priority, and non-members will be referred elsewhere. Most of today’s veterinary practices have found this out the hard way as faithful pet owners who have done what’s asked of them for their pets are now being turned away in the name of schedules too jam packed with urgent care of pets not seen by the practice in (sometimes many) years. I cannot stress enough that if you seek veterinary care only for “shots” or when your pet is ill, Aberlea is not the right place for you. Vaccine clinics, humane societies, and emergency rooms are a better fit. You’ll get no judgment from me. It’s simply the way it has to be.
- g. The money in veterinary medicine is in urgent care for sick animals. However, the fulfillment, improved outcomes, and peace of mind is in regular preventive care that starts with a consistent relationship. Aberlea is absolutely a for-profit entity, but more money does not mean a better life as a veterinarian. Being there

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for your patients while making a living is the sweet spot. The monetary ceiling for me as business owner is lower with the membership model. I’m comfortable with that.

This appears to be a good spot to interject with some remarks about price and the pricing strategy used at Aberlea.

While veterinarians may not get the most education on business development while in vet school, it does not take long to figure out how much it takes to turn on the lights, pay your good people well, and make a living for yourself. The revenue must come from somewhere. So why is there so much variation in cost of care in veterinary medicine (here is where I’ll give you an empathetic hug because I’m very sorry this is so whacky)? The following is a short list of why you’d pay different amounts for things at different places:

- Experience of the doctors and staff – Aberlea isn’t the minor leagues. We take much pride in how well we do what we do. Members at Aberlea receive care only from team members I have determined can provide the best.
- Time spent with each patient – Communication, empathy, real care all take time.
- Scope of service – I try to tackle complex cases and see them through without falling into the trap of referring anything that is more than a cut or a bruise due to a busy schedule. Vaccine clinics make you call a “real vet” when something is wrong.
- Subsidies from boarding, grooming, and products sold – We have no boarding or grooming services, nor do I plan to offer them. Furthermore, the prescription medications available to patients reflect my desire to make it easy to get what you need without going somewhere else while maintaining a modest profit for the practice (see conflicts of interest page). We do not sell retail items. All the commoditized items listed above serve to compress the cost of the services veterinarians and only veterinarians can provide. If your office visit/exam fee is only \$50, you are either at a high volume, low scope of service practice or a lot of revenue is coming from boarding and products.
- WHO OWNS THE PRACTICE! – Large corporations and private equity firms investing for institutions have recently purchased many, many practices. They do not advertise who they are in most instances. I do not believe this is what’s best for pets. I’ll let you connect the dots.
- Services provided – I am not a specialist but admit that I have a niche serving those who desire a higher level of care. The more willing a veterinarian is to push his or her limits to accommodate the time and training for better pet care should (and must) be compensated.
- Quality of the medicine – Cutting corners medically can be tempting. You can use less expensive, less safe drugs. You can choose not to opt for the advanced anesthesia equipment. You can treat before you diagnose. All this works to lower the bottom line and is completely legal in veterinary medicine. The minimum standard of care is not where I wish it was in veterinary medicine. I

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also acknowledge that raising the bar would make care for some people unfeasible financially. However, training to a minimum is not how we are educated, and I’d venture that the minimum is not what most vets do for their own pets. I cannot stress enough that I am not casting stones at other practices. They are free to do what they want as long as it’s legal. But that shouldn’t mean those who place trust in their veterinarian to provide a higher standard shouldn’t have a place to turn. As long as I am here, Aberlea will provide the standard of care my professors would be proud of and my pet owners trust me to give.

The remaining pages will cover the four pillars of preventive health as well as the two membership options at Aberlea. All the pillars attempt to answer one over-arching question posed at the beginning of each page.

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Your pet’s membership visit (Pillar #1 of real veterinary medicine)

Is there more to veterinary care than shots and pills? My answer here is an emphatic “YES!” Traditional veterinary care says “no” especially the increasing number of practices owned by private equity and venture capital firms who are actively commoditizing my wonderful profession. It takes effort and time on my part and a little trust on your end, but I’d wager we can prove together that your pet’s life is better with real veterinary medicine.

How it works: Once yearly **when your pet is well**, we will conduct his or her membership visit together. It is a flat fee priced to reflect the value Aberlea stands for. Specifically, it covers a physical exam, any needed vaccinations, parasite screening tests, and time for us to spend discussing him/her holistically. If you want me to see them when they’re sick, I insist I see them when they’re well.

All patients have a yearly membership visit. This is a hard and fast rule that I wish I did not have to implement. We refer to as the Preventive Care Visit or “PCV.” Additionally, your pet’s next membership visit will be scheduled a year from that date before you leave. This allows me to stay accountable for my patients and to plan financially for the coming year.

Most practices have cringeworthy names for this visit like “annual” or “yearly shots.” Simply put, it means more to me than those words. The PCV is a time for us to get to know each other (or catch up in subsequent years), for me to understand the story around you and your pet including how you feel about him or her. I want to learn the dynamic with your pet around the house, things that are new or perhaps fading traits that used to be present. All of that and so much more is where real care starts. Here’s a secret, most people have very different feelings, and every single appointment is unique.

I want you to think of what you are paying for as:

1. My time and genuine interest in your pet’s well being
2. The experience in veterinary medicine I bring to the table
3. An uncompromising level of care and my best efforts to preserve the good health your pet currently has.
4. Peace of mind with my commitment to being the consistent advocate for your pet
5. The use of vaccinations and parasite screening to prevent the easily preventable things in a pet’s life
6. I cannot stress enough that we can and do talk about the items that are included during a PCV. However, getting into the weeds of “what’s included and what’s not” becomes a pitch from a salesperson to a buyer. I do not pitch or sell. It takes a little faith on your end, but most people like what we do here without going over every detail. If a la carte is your thing, we probably aren’t a fit.
7. A commitment to capping my patient base to be able to see my member patients when they are unwell. *

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* I hate asterisks, but here’s one. Membership does not mean I can handle all sick visits. It means I’ll keep an appointment schedule to accommodate sick members usually within 1-2 business days. I’d estimate I can at least triage 95% of cases in general practice. True emergencies while rare do exist and need an ER clinic. I’ll try to keep you out of emergency rooms.

Pet owners across all the stops in my journey as a veterinarian have told me similar stories. Great owners with great pets are no longer able to see the same veterinarian whom they’ve seen for years because the practice is “so busy” that appointments are unavailable for weeks when a pet is in need. Our loved ones deserve better. I am committed to alleviating this problem via the membership model.

In addition to your pet’s annual membership visit, there are other recommendations you’ll be nudged into considering. They are measures I take with my own pets, and generally believe you should too. It’s all in the name of his/her best chance of living longer with a high quality of years. They are the other pillars numbered 2, 3 and 4 described in the next pages.

My big request is that you think of the things like vaccinations and parasites tests as “free” with your membership. They are commodities, quite inexpensive, and some can be obtained for free at the humane society. Veterinary practices have for far too long anchored themselves to a commodity like an immunization. Make no mistake they are important and needed, but they are not what makes real veterinary medicine tick.

When we are done, I’m faithful that I have made a difference in your pet’s life. If you think this is a good idea and want to learn more, keep reading. We’ll now move on to the other pillars (or nudges😊) at Aberlea that answer emphatically “YES!” to the question: Is there more than the membership visit I can do to get a better life for my pet?

Parasite Prevention (Pillar #2 of real veterinary medicine)

Is parasite prevention worth it and why should I care? My response is: Yes, keeping parasites out of your pet is a net positive in the vast majority of cases. Thankfully, it's much simpler and safer than in years past. Like everything in life, exceptions exist, but most pets can benefit. The following explains some of my feelings on the topic:

1. Aberlea only carries one parasite preventative for dogs and one for cats. For you, this makes things easier, and you can rest assured that I've investigated the medication thoroughly before recommending it. For me the two that we stock are the only two worth putting forth as what's best for your pet. Neither are perfect. None of the dozens of products are perfect. There absolutely are differences between these medications. Because of my background, I can speak to them better than most. If you have a favorite product, I'll write you a prescription for it and you may shop until your heart is content. After all, I'd rather your pet get something than nothing. Just know this. There's a reason why it's not on the shelf at Aberlea. I'll be happy to help tease out the reasons if you'd like.
2. No product marketing. I recommend and advocate only for things I do with my own pets. I have no financial commitment to any pharmaceutical product and have no intention to do so. I take great pride in there being no marketing material anywhere in the practice. There are no attempts to scare, guilt, or convince you into doing anything with your pet here. I practice what I preach. You should expect nothing less.
3. Commitment to changing when the science changes. I hope one day that we can sprinkle spring water on your pet's head like a baby's baptism to safely and effectively keep parasites out of your pet. That simply isn't real life. What is far more likely is that the parasites will adapt, and current medications will lose their effectiveness. You have my promise to keep up on the science so when changes happen in parasitology, I'll be able to change my recommendation for your pet's best interest.
4. An ounce of prevention is worth a pound of cure. Your pet will get sick someday. But there are about a half dozen common, threatening things I can remove from the list of possibilities if your pet simply receives high quality parasite prevention. Less time guessing and more time addressing.
5. One of my biggest goals is to make my living with my brain and use my training to make pets' lives better. The best way to be genuine about this is to distance myself from compensation by products and medications. Please read the conflicts of interest below.
6. **CONFLICT OF INTEREST:** Parasite preventatives subsidize some of the other revenue streams at general veterinary practices. It's not something I'm proud of, but it's the way it is. I'll do my best to minimize this how I can, but it still exists. As of this writing, pharmaceuticals make up approximately 18% of revenue at Aberlea, less than the average across the profession. It is worth mentioning, I try to keep the prices as competitive as I can with the big box stores. By purchasing your pet's

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prevention through us you are supporting a small business and contributing to a slower pace of increase in the practice’s services...if that means anything to you.

7. CONFLICT OF INTEREST: I worked for the company that is the maker of my current recommendation stocked in the practice. For better or worse I know it (and its competition) better than most. I view that positively. You are of course free to interpret it as you see fit. I’m also happy to discuss my time inside the animal pharmaceutical world if you’d like.
8. I can talk all day about these medications if that interests you. I love to share and to educate. Afterall a more informed pet owner is better for the pet. Briefly I’ll say there are clear differences among products between safety, effectiveness, cost, and ease of use. I commit to determining the most beneficial one for both dogs and cats and to knowing the science behind “why.” It is my job and the least I can do.

Blood testing (Pillar #3 of real veterinary medicine)

What value does blood testing have for my pet if he or she is well?

1. Regular blood testing provides a snapshot of things I cannot see, feel, or hear when examining your pet: It only takes a short time to learn this as a vet. It hurts my ego to say this, but I don't have all the info with my eyes, ears, and hands. Blood testing gives me information about a multitude of organs, body systems, and cells I'm unable to determine otherwise. Blood testing helps complete the picture of a well pet.
2. Know what normal is for your pet: By conducting regular blood screenings in good times, we know what your dog or cat looks like when things are alright. See next point.
3. When things inevitably go awry: Two things I know for sure at this point in my career. First, your pet is quite unlikely to outlive you meaning you'll see your loved one become ill in your lifetime. Second, the tool kit of the general practice veterinarian includes physical exam findings, x-rays, and...you guessed it, blood testing. If I have a blood panel on your pet in the relatively recent past I can advocate better. That blood panel often (not always) affords me the knowledge that your sick pet has a sort of time stamp showing me he/she had good labs prior to the current sick situation. At minimum I know things were good at some point in the not so distant past and if the situation dictates that I repeat those labs, I have a point of comparison to discern better what is happening and how fast things are moving.
4. Trends over time. Some diseases in my patients develop over time. Some do not and just seem to pop up. Experience and physiology bear out that the those more chronic conditions are worth looking out for. I stand a better chance treating or managing them the earlier I can identify concerning trends in blood results. Regular screening means catching diseases earlier. If my patient has evidence of kidney disfunction on a current blood panel, but everything was normal on last year's we can at least be at peace knowing there wasn't something to address prior. This helps me guide you and form a picture for you regarding prognosis when a problem arises. It makes a difference.

Regular, *preventive* oral care (Pillar #4 of real veterinary medicine)

What things should I know about oral care in my pet? Why are they worth considering? What are the risks involved?

At one point in 2023 I read (from a reputable source that eludes me) that 80% of pets have evidence to warrant professional dental care by age three. More importantly, I’ve found this to be true in practice since 2009. We can most effectively provide this care in clinic. Yes, you can try diligently to perform some measures at home. People much smarter than I have laid out methods to do so (that they do not put forth as a replacement for professional care). Virtually no pet owners do it effectively in my experience. So, take notice that your pet may be the outlier that doesn’t “need” oral care, but the statistics are not with him/her.

It's not just about the dental cleaning! I'll try not to scream here because that doesn't work, but a thorough investigation of the entire oral cavity is certainly a worthwhile endeavor. Tumors grow under the tongue and the roof of the mouth. I've removal unimaginable things out of the gumline of patients (think human toenails, etc!). X-rays of what's going on with your pet's tooth roots will make your eyes go wide. My profession puts too much emphasis on the words “dental cleaning” when in fact we should stress the importance of the whole mouth. We do this with regular, preemptive oral care.

When the likely march forward of your pet's dental disease is ignored, returning your pet's mouth to where it was prior isn't going simply isn't feasible, at least in most general practices. And it sure isn't less expensive. It doesn't have to be this way. Preventive is the operative word here. Once dental disease progresses enough, we have a difficult if not fruitless time trying to put Humpty Dumpty back together again. Oral surgery is often needed which is again not less expensive, is more painful, and almost always is not needed if we just get a head start. A friend of mine once saw the light with a pet's oral health and exclaimed “It's either pay now, or you and your pet pay later, huh?!?!” I couldn't agree more. It's win-win-win for all then.

And that's where I arrive at my general recommendation to begin having your pet's oral care addressed with regular cleanings/exams starting at age three at the latest. We stand the best chance to get in front of problems if we start then.

But what about anesthesia required for a dental procedure? Isn't that risky? Absolutely, anesthesia is a calculated risk. I do not wish to dismiss that risk either. However, three things come into play here. 1. Your pet's risk is lessened by virtue of younger age and less existing oral disease when he/she is put under. 2. While I may not be the best at some things, you can rest assured that anesthesia and my attention to it at my practice will remain second to none. I am more involved, I

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screen my patients more thoroughly, and I place an emphasis more on diligence in anesthesia than most anyone I’d gladly wager. I never drop my shield here. Anesthesia is one of my strong suits. And 3. There’s inherent risk in NOT doing anything. That’s way less calculable. In many instances, I’d put forth that the risk of “not” worked out to be the scarier risk. Which risk do you want to take? The only way to avoid the risk of anesthesia for me is to stop conducting anesthesia, and I do not believe that’s what is in my patients’ best interest.

“Strive to maintain good preventive oral care in your patients until something in life inevitably trumps it.” Living by this quote has not let me down. At some point, your pet will likely have other priorities in his/her life that trump dental cleanings and oral care. When that time comes, we simply no longer perform the procedure. A dog with terminal cancer likely doesn’t need oral care anymore. A cat with diabetes is a riskier bet for anesthesia. I put forth that both of those examples are better equipped to take on the challenges of those diseases if they started out with good oral care. Rotten teeth and diseased gums certainly aren’t helping when a patient is up against tough odds. At least we put them in the best position to take on life if we started preemptively to keep them as healthy as we can.

Once again, I am not trying to convince you of something if you do not see value in it nor am I the only authority on how to take care of a pet. I can tell you this though: When I am seeking to learn about something I don’t know about (virtually everything besides veterinary medicine and Vols football), I look to see what those who are experts do. It tends to work out. We veterinarians generally take much better care of our own pets’ teeth than the consensus of the people we serve. We know it’s the thing to do. We generally get better results. I’d like to hope we do. My effort at Aberlea is to show you the way proactive veterinarians take care of their own pets and make that my recommendation for how your loved one would benefit the most.

Please see the disclaimer and Conflict of interest below.

Disclaimer: I absolutely believe (and follow my own recommendations) that oral care is what’s best for most of my patients. It, however, is not what motivates me to get out of bed in the morning. Like all vets, I have my strengths, weaknesses, and varying interests. Dentistry is not one of my strongest suits. BUT I’m getting better, and I’m committed to doing so. I don’t get out over my skis with procedures I am not comfortable with, and I have committed my time and money to high quality continuing education...because your animal is worth it, and it makes a difference in the long run.

Conflict of interest: Procedures are a significant revenue generator (or at least should be) in veterinary practices. By agreeing to have your pet undergo regular oral care, Aberlea makes more revenue. However, if all members’ owners took me up on my recommendations to allow regular oral care procedures, I could NOT serve

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everyone. You can view this as an out for you to decline the recommendation or just know that I recommend proactively addressing oral care because it's in most of my patients' best interest...nothing more.

My charge to you. Let's get together to keep dentistry boring!!! I sweat less, your pet hurts less, and your check book will thank you!

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The negative stuff I wish I didn’t have to say:

Most of the things in this document are passions of mine and pillars of overall good for your pets. Because of the actions of some, there are rules I’ve had to put in place I wish I didn’t have to. Some people haven’t held up their end of the bargain, and I cannot let that go for my team, the practice’s financial health, and the member pet owners who have done their part. Philosophically, I don’t like rules and find myself hoping everyone will do the right thing. But life doesn’t work out that way so here are the rules at Aberlea:

1. All members have their annual membership visit scheduled before leaving the current year’s appointment. We can make accommodations to reschedule when the time nears if you need to change, but we schedule to maintain order and remain accountable to our members. Otherwise, it’s just an urgent care clinic, something Aberlea is NOT.
2. Our no-show policy is absolute. We will begin reaching out to confirm all appointments made (membership or sick visit) at least five days before you are scheduled to come. If you do not communicate with us and do not show for an appointment, your place within the practice will be terminated and offered to another person. My philosophy is simple here. I would never fail to communicate and not attend an appointment set aside for me with anyone else. I expect the same from every pet owner. By committing to you, I have told someone else “no.” By no-showing, anticipated revenue does not make its way to the practice, I lose out on a relationship with another person willing to do the right thing, and I’ve paid my team to be here for you. No business can operate like this. Communication is key here. Life happens. If you need to reschedule, let us know. We understand. We have a limited number of appointments, and they are sacred. If they cannot be the same to you, please let me know so I can give your spot to someone else.
3. An appointment made for a new problem-based visit does not serve as your pet’s membership visit. I am happy to address your pet’s current issue. We will get a plan together for the problem. At a later date, we will return to your pet’s membership visit. The membership visit is holistic, focusing on all of your pet, not zooming in on something specific like an ear infection.

Speaking “Aber-lease”

Here is the simplest way I can convey the two membership options:

1. The Veterinary Life Planning (VLP) program: Billed monthly and intended to be for the life of your pet, I give your pet the EXACT SAME care that my dogs get. The program is my passion project and the best plan I can put forth to try to get the most years we can for your loved one. Again, I don’t believe in pitching, but these actions include pillars 1, 3, 4, as well as more in-depth screening tests/exams just like my own dogs to truly make your pet like mine. Parasite prevention (Pillar 2) is not included for reasons of conflict of interest. Still a pillar, but the program is a relationship and a process, not a product. There is no contract. Just honor. If you know, you know.
2. Alternatively, you may take it a la carte and schedule your PCV/membership visit only. You’ll still be nudged toward the other pillars each year when you check in.

If you read this, I cannot convey ample enough gratitude to you. Even if it doesn’t work out between us, I can appreciate that this wasn’t a short story to take in. I hope at minimum my passion for the animals I serve is conveyed on these pages.

With respect,

Matthew Allen Lane, DVM