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# The Great Veterinary Shortage

There are not enough humans to take care of all the animals.

By [Sarah Zhang](#)

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When Michelle Stokes noticed a necrotic wound on her cat, Jellyfish, last July, she and her husband had to call about 50 vets before finding one that could squeeze them in.

The local emergency animal hospital was so backed up that it said the wound—serious but not yet life-threatening—wasn't really an emergency. Jellyfish didn't have a regular vet, because Stokes and her husband had just moved to the Cleveland area. They pulled up Google Maps and started going down the list of offices they found. It was the same response every time: no vacancies, not taking new patients, not until August or even September.

Meanwhile, Jellyfish was getting sicker and more lethargic. "We just kept trying and trying and trying," Stokes told me. "We pretty much called every single vet's office in the greater-Cleveland area." A week in, they finally got a lucky break. They managed to speak directly to a vet at one practice, and when Stokes sent over a photo of the wound, the vet said to bring Jellyfish in for surgery. The cat's now doing just fine.

Stokes's scramble to find veterinary care is not unusual. Hospitals, clinics, and vet offices around the U.S. in the past year have been turning animals away because they are short staffed. This crisis has hit all levels of the system, from general practice to specialists, but animal emergency rooms—where the job is most stressful—have it the worst.

Veterinary staff told me of emergency hospitals closing overnight, owners being referred hundreds of miles away for an elusive open spot, and dogs with broken bones, a true emergency, waiting hours and hours to be seen. "When I have 17 patients in the hospital and there's me and a doctor for 15 hours, I can't take any more pets. Because I physically can't do it," Kristi Hulen, a vet tech in the Seattle area, told me.

The staff shortage has gotten so bad in some areas that Maureen Luschini, an emergency-care vet in central New York, put it to me bluntly: "Emergency care cannot be guaranteed for your pets right now." There are simply not enough people to take care of all the sick animals.

Veterinary medicine has dealt with staffing problems for years, but the pandemic made everything worse. After COVID hit, [demand for vet appointments went up](#)—for newly adopted pets and for older pets in whom owners observed new health issues after being at home all day. COVID precautions like curbside service also meant offices were operating less efficiently. Everything just took longer.

Meanwhile, vets and vet techs started leaving the field. "All of my friends who were at retirement age—that were in their early 60s—just retired immediately," Carrie Journey, a veterinary neurologist in the Bay

Area, told me. Staying in the job wasn't worth the risk of getting COVID. The veterinary field also skews quite female, and mothers without child care quit or switched to more flexible remote work.

Over the course of the pandemic, those who remained saw their jobs get worse. Owners stressed by lockdowns became angrier and more unruly toward veterinary staff. "In the pandemic, people forgot how to be a person," says Melena McClure, an emergency vet who lives in Austin. And overworked staff no longer had the time to really sit down and explain to distraught owners what was happening to their pet, which didn't help in these volatile situations.

"Yelled at, threatened, I've been called every horrible name that there's ever been written or spoken," Hulen said. Journey said she's fired more clients in the past year and a half than she ever had to do in the previous 20 years of her career. Receptionists bore the brunt of this bad behavior. "We've had much higher turnover than we've ever had before," says Gary Block, who runs a veterinary hospital with his wife in Rhode Island. He estimates they lost about 80 percent of their receptionists last year.

The low wages in veterinary medicine only added to the problem. "McDonald's is paying \$15, \$16" an hour, Block says. "There are still veterinary technicians, I'm sure, that are making less than that amount in Rhode Island." He and his wife have recently raised pay, but they've had to offset that by raising fees for care.

"This is a slow-moving tsunami," Liz Hughston, a vet tech and president of the National Veterinary Professionals Union, told me. "The true depths of the staffing crisis hasn't been felt up until this point because, I think, we had what a lot of people thought was an inexhaustible supply of young starry-eyed people who want to work with puppies and kittens all day." Historically, when people working in the industry burned out, new ones took their place. The turnover rate for vet techs was high even before the pandemic: 23.4 percent a year, according to a January 2020 American Animal Hospital Association survey. Many experienced vet techs end up leaving for human medicine, where many of their skills apply and the pay is better.

Veterinarians, too, are dealing with burnout, and broader risks to mental health. Their turnover rate is 16 percent, much higher than it is for doctors in human health care. Female veterinarians are also 3.5 times as likely to die by suicide as the general population, and male vets are about twice as likely, according to a 2018 CDC study. Journey, the neurology specialist, is also president of the nonprofit Not One More Vet, which operates a crisis hotline and gives out emergency grants to veterinarians who need help. In the past two years, she says, "the demand for our services went up tenfold."

Lisa Moses, a veterinarian and bioethicist at Harvard, attributes the burnout to the "constant and cumulative impact" of moral distress on the job. People who decide to become vets, vet techs, and support staff tend to do so because they love animals. But the job also comes with watching a lot of animals suffer: Some owners have to let their pets die because they cannot afford care while others might refuse euthanasia and instead subject animals to futile medical treatments.

In a 2018 survey that Moses conducted, 62 percent of vets said they sometimes or often encountered cases in which they could not "do the right thing." More than 75 percent said these cases have caused them moderate or severe distress. In understaffed hospitals and clinics, overworked vets are finding that they cannot provide their desired level of care and attention to each animal. "It's kind of self-reinforcing. The fewer people and staff there are, everyone gets more overworked," Moses told me. And the more stressed out and overworked they are, the more likely they are to quit.

Amidst this staffing crisis, animals are sometimes getting worse care. Some 24/7 emergency hospitals have had to cut their hours and turn away patients. Luschini, the emergency vet in central New York,

has had to send patients as far away as Philadelphia. Whenever one large emergency center is full, Block told me, finding another one with an open spot is like “musical chairs.” And emergency hospitals are constantly operating in an “orange” tier, where wait times may stretch past 10 hours, and staff must turn away all animals but those with immediately life-threatening injuries or illnesses.

When Emily Knobbe’s puppy, Hazelnut, was bleeding from a six-inch gash on her leg, the emergency room in Portland, Oregon, was so full that Knobbe had to sit on a nearby set of stairs waiting. It took 14 hours to get Hazelnut bandaged up. The vet said that the cut, while bad, hadn’t caused injury to the tendon or bone. But in the days afterward, Knobbe noticed that the dog wasn’t putting any weight on that limb. It took several more days to get an appointment with Hazelnut’s normal vet, who referred Knobbe to a specialist, which required another week of waiting.

Eventually she learned that Hazelnut’s Achilles tendon was 80 percent ruptured. The injury had gotten worse in the time it took to get a proper diagnosis, giving Hazelnut a 50/50 chance of losing her leg. Knobbe wonders if the busy hospital had missed the tendon damage because the vets were so overworked. Hazelnut ended up getting surgery and is now doing just fine on all four legs. For Knobbe, though, having to wait and wait was a truly awful experience. “We felt very powerless in that moment,” she told me, “just knowing she was in pain for weeks at a time and we just couldn’t get her in anywhere.”

For hospitals, understaffing means constant triage. If a pet comes in needing to be rushed to surgery, said Hulen, the Seattle-area vet tech, she has to turn her attention away from all other patients. “Things get missed. Medications get missed. Walks get missed. Feedings get missed,” she told me. “It’s not right.” Certain labor-intensive procedures are also put aside. For example, Block’s Rhode Island animal hospital is the only one in the state with a ventilator.

But using the ventilator requires the dedicated attention of a tech and a veterinarian. When things get busy, the hospital has to announce it is no longer taking ventilator cases. “These animals are literally having trouble breathing,” Block told me. “We have the equipment and the skill set to provide care, but we have to choose”: Does the vet stay with the one patient in need of a ventilator, or should they attend to five or six other ICU patients in that same amount of time?

When general practitioners are too busy, pets who can’t see them for routine or preventive care end up needing emergency care. “We’ve seen tons of parvovirus in dogs. There’s been an uptick in calicivirus virus in cats,” Luschini said, referring to infections that can be vaccinated against or treated early by any vet. Specialists are overbooked, too. Journey, the veterinary neurologist, said that a normal, fully booked day before COVID might have included one or two surgeries plus five appointments. The day before we spoke, she told me, she’d had one surgery and 12 appointments. And that wasn’t even her busiest day in the past two weeks.

The vets and vet techs I spoke with didn’t really see things getting better in the short term. Pay has gone up, though not always as much as inflation. Corporate veterinary practices have recently started offering bonuses as high as \$100,000 to vets who sign three-year contracts. But there is an underlying supply-and-demand problem. More Americans are getting pets, while the number of people going into the veterinary profession has not been keeping pace. By 2030, the U.S. will need nearly 41,000 additional veterinarians and nearly 133,000 credentialed vet techs, according to a recent Mars Veterinary Health report. Any solutions are likely years off. The current mess is not about to be fixed anytime soon.