AAV Member Spotlight: Richard Nye, DVM

It is with great pleasure that we announce a new addition to the AAV newsletter: Member Spotlight. This special feature showcases the association’s most valuable asset—our members—by highlighting our diverse backgrounds, professional activities, experience, and geographic locations.

What was the first bird job you ever had?
My first job was with Ted Lafeber. He was an outstanding teacher of the art of practice and a wonderful mentor. I did an externship with him my senior year of vet school and he offered me a job after graduation. He was my inspiration to pursue a career that revolved around avian medicine.

Most memorable AAV experience or contribution
I think being a Charter member of AAV and presenting at the initial conference in Kalamazoo was memorable for me. I was then put in charge of the education committee with the responsibility of planning the next conference. I had that position and was on the board for 10 years, ending with my presidency (1989-90). As a partner with Dr. Susan Brown and Dr. Scott McDonald in the Midwest Bird and Exotic Animal Hospital, the first all-exotic hospital in the US, my contribution involved mentoring students and doctors in current trends in avian medicine and surgery over a period of nearly 20 years.

What is your favorite avian species and why?
I love parrotlets. They are very social, are pretty easy to train, talk in a soft voice and don’t seem to develop many medical issues during their lifetime. They have spunk and need to be continually reinforced for good behavior but that keeps me on my toes.

What was the last interesting avian medical or surgical issue you dealt with in your work?
I was presented with a 20+-year-old female Eclectus parrot that had been an egg layer and was now acting depressed and off her food. Her abdomen was a little enlarged but that was due in part to the thickened, xanthomatous tissue that covered the entire surface. There was fluid in the abdomen and a palpable mass and it was not possible to determine the source of the mass. Ultrasound suggested it was associated with the liver. The labs were unremarkable except for the AST, which was above 600. The owner chose conservative, hospice care instead of an aggressive laparotomy. The bird died several days later and a postmortem revealed a serosanguinous fluid in the abdomen, a large hepatic cyst, normal reproductive system, and a mass appearing xanthomatous dorsal to the liver. Tissues were not sent for histopathology.

Best benefits of AAV membership?
The best benefit for me has been the networking; I have developed many long-term friendships within the association, directly the result of my membership.

If you had not chosen your present career, what would you be doing?
I was a civil engineer, a professional baseball player, and a commodity trader before choosing veterinary medicine. I would probably have tried to stay in baseball as a coach or manager.

What was your favorite class or activity in veterinary school?
As a first year student I loved sneaking into the large animal clinic and being allowed to observe the surgeries. Another favorite activity was teeing off as soon as the sun came up with three or four classmates, getting 18 holes in, and showing late to anatomy class. After a few weeks of this, the instructor stopped commenting on how late we were and just asked how we were hitting ’em.