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EDITOR'S LETTER

The Fourth Vital Sign

Animals do not communicate as humans do; therefore, historically, it was assumed they do not experience pain as humans do. The early use of anesthesia in animals was focused more on restraint than pain relief. However, more recent evidence shows that companion animals can and do experience pain in ways similar to humans. Assessing the patient's pain and working with the veterinarian and pet owner to address this pain have come a long way in a relatively short period of time. In fact, a pain assessment is known today as the fourth vital assessment. Veterinary nurses play a key role in pain assessment and management. To this end, this issue offers 2 articles ([Case Report, p. 44](#); [Continuing Education, p. 74](#)) on managing pain in patients, with the goal being not only pain control but better quality of life. A multimodal approach offers a comprehensive strategy to address the patient's condition, improve patient function, and allow a better quality of life.

WHAT WE'RE READING

A member of our Editorial Advisory Board shares a recent open-access publication, including their key takeaways and its practical conclusion.

Introducing QUIT—the Quality and Uncertainty Indicator Triage Tool: 10 Questions to Help Veterinary Professionals More Confidently Triage Treatment Study Reports

Keay S, Rey L, Larson R, et al. *JAVMA*. 2026;264(8):1-8.
[doi:10.2460/javma.26.01.0008](https://doi.org/10.2460/javma.26.01.0008)

WHAT WAS DEVELOPED? The Evidence-Based Veterinary Medicine Association (EBVMA) developed the QUIT tool, 10 yes or no questions that help a reader identify concerns in a study and set the paper aside when those concerns accumulate.

WHAT WAS DISCUSSED?

- The 10 questions follow the sections of a research article. “Yes” answers support reading further; “no” answers signal caution or a stop.
- Flags accumulate rather than producing a score. No single flag disqualifies a study, and the reader sets their own tolerance.
- QUIT rules studies out. It does not rule them in.
- A 1-page flowchart and a fillable checklist are free on the EBVMA website.

TAKE-HOME POINTS

- Evaluating a study before it changes a protocol is patient safety work.
- Reach for QUIT when someone proposes a change based on a paper.
- The questions establish whether a study is relevant to your clinical question.
- QUIT belongs in any conversations that start with “I read a study that said...”
- The tool is an entry point into critical appraisal, not a verdict on study quality.

—Theresa Cosper-Roberts, MA, RVT, CVPM, ACVE(DE)

MORE FROM THE NAVC

Online Article Series in Partnership with Pawsibilities Vet Med

Veterinary medicine is one of the most homogeneous professions in the U.S. — most veterinary professionals are likely to be White, female, and English speaking. But this representation does not reflect the breadth of diversity of our clientele. Diversity, equity, inclusion, and belonging affect everything from interpersonal interactions to patient care, making these areas a core priority for the profession to thrive. A new 6-part series of articles in partnership with Pawsibilities Vet Med highlights essential issues in these areas, such as navigating the U.S. credentialing landscape as a foreign veterinarian and ageism in veterinary medicine.



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