

How to Exceed —Not Merely Meet—Client **Expectations**

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I expect ...

I expected more than this! I guess I did not know what to expect. How do you expect me to pay for this? I did not expect that at all. You did not meet my expectations.

Expectation is a loaded word. On the one hand, people are impressed and feel great satisfaction when their expectations are met or exceeded; on the other, the potential for failure and dissatisfaction looms large if expectations are not fulfilled. Expectations are defined as strong beliefs that something will happen or come to fruition; they are the beliefs outlining what someone will or should achieve.1



xpectations are based on the client's assumptions, wishes, desires, and hopes, and in veterinary medicine, demand is growing for effective management of client expectations and concerns.² Today's clients are more invested, informed, and involved,³ and their expectations are increasingly high⁴ because of their

deepening dedication to their companion animals. Meeting client expectations can lead to client satisfaction⁵ and retention,⁶ decreased complaints and malpractice concerns,7 and increased adherence to recommendations.^{8,9} To exceed client expectations, elicit the care they anticipate up-front, and manage and clarify their expectations throughout the visit.

Elicit Client Expectations

A critical starting point for meeting **STEP** or exceeding client expectations is ascertaining the client's needs, wants, and desires for the visit.10 Fully eliciting the client's agenda at the beginning of the visit includes exploring his or her reasons for the visit and his or her full range of concerns, expectations, and treatment goals. Use open-ended questions to elicit expectations.

Exceed Client Expectations

- Elicit client expectations.
- Negotiate a mutual agenda.
- Create a partnership.
- Empathize with client concerns.
- Provide simple explanations and avoid jargon.

- What brings you in today?
- What other concerns do you have?
- What else is on your mind?
- What would you like to accomplish in today's appointment?
- What are your treatment goals for Mr. Fluff?
- How can I best help you and Mr. Fluff today?



The second step is introducing the veterinary professional's agenda (ie, the items you would like to discuss in addition to those the client proposes) and asking the client's permission.

- In addition to Mr. Fluff's annual physical examination and vaccinations, I would like to talk about his weight and dental health.
- Can we add special considerations for senior cat care to our discussion topics today?

STEP

The third step is negotiating a mutual agenda using reflective listening and asking permission. This is an effective way to develop and manage realistic client expectations that includes educating

clients on what is possible and what to expect every step of the visit, procedure, or process to create reasonable expectations of care.²

- It sounds like you were hoping that we could do Mr. Fluff's dental cleaning today.
- Can we schedule a dental appointment in the coming week for Mr. Fluff to give him our undivided attention?

Support Client Expectations

Clients value a veterinarian-client relationship that revolves around partnership¹¹ and respect.⁴ Partnering with clients involves using inclusive language (eg, let us, we, together, ours, us)

and emphasizing cooperation toward a mutual goal of care.

- It is helpful to know your expectations so we can work together.
- I would like to work to keep Mr. Fluff healthy and well.

Clients expect veterinary professionals to be attentive, compassionate, respectful, and empathetic.¹² Expressing empathy allows for the interpretation and appreciation of the client's perspective by placing oneself in the client's shoes.

- I hear that you are worried about leaving Mr. Fluff for the day.
- You are concerned that Mr. Fluff will be stressed and scared in unfamiliar surroundings.

Clarify Client Expectations

Client complaints stem from poor veterinarianclient communication and inadequate information provided by veterinary professionals.¹³ Using jargon can leave clients confused or feeling left out of the conversation. Clients expect information to be delivered in a frank, up-front manner using understandable terms.⁴ Easily understood language promotes client understanding by giving appropriate and comprehensive information that allows clients to form realistic expectations from accurate data. Signposts, or transitional phrases, help guide the conversation and give clients an early idea of where the appointment is heading.

- Let us talk about what to expect on Mr. Fluff's dental day.
- Once Mr. Fluff is under anesthesia, I will conduct a full examination of his teeth and gums and take dental radiographs, as your dentist does for you. If I find anything concerning, I will call you before proceeding.

Conclusion

Fully eliciting client expectations is the vital first step, followed by partnership and empathy, so clients feel they are respected and valued members of their pet's care team. Lastly, simple explanations provide clients with a clear understanding of what to expect. (See Exceed **Client Expectations.**)

The authors of a 2014 study said it best: "Whenever client expectations are met or exceeded, the opportunity for best outcomes becomes possible, making identifying and fulfilling expectations an inherent goal of quality veterinary care."14

& BENCHMARKS

Building Trust

- The saying, It is not what you say but how you say it, is at play in building trust with clients. When the content of your message and your actual presentation align with client expectations, bonds of trust begin to form.
- Trust starts with a professional, educational website; a clean, fresh facility; team members who know their clients and patients; and the 101 little things the healthcare team does.

SOURCE: Cook B. Benchmarks 2017: A Study of Well-Managed Practices. Columbus, OH: WMPB;

TAKE ACTION

- When the client arrives, elicit his or her expectations and communicate clearly throughout the veterinary visit to exceed expectations.
- Partner with clients throughout the visit by using inclusive language and emphasizing veterinary team-client cooperation.
- Always give simple explanations so clients have a clear understanding of what to expect for their pet.

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FUN FACT: A Colorado native, Lisa lives in Fort Collins with her husband, children, dogs, chickens, and a mischievous rabbit.



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workshops nationally and internationally.

FUN FACT: Jane's grandmother was one of the ladies in the Wendy's "Where the Beef?" commercial.



CAUTION: Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian

Description:

NexGard* (afroxolaner) is available in four sizes of beef-flavored, soft chewables for oral administration to dogs and puppies according to their weight. Each chewable is formulated to provide a minimum afroxolaner dosage of 1.14 mg/lb (2.5 mg/kg). Afroxolaner has the chemical composition 1-Naphthalenecarboxamide, 4-[5-[3-chloro-5-(trifluoromethyl)-phenyl]-4, 5-dihydro-5-(trifluoromethyl)-3-isoxazolyl]-N-[2-ox-2-[(2.2,2-trifluoromethyl)]-aminolethyl.

Indications: NexGard kills adult fleas and is indicated for the treatment and prevention of flea infestations (Ctenocephalides felis), and the treatment and control of Black-legged tick (Ikodes scapularis), American Dog tick (Dermacentor variabilis), Lone Start tick (Amblyomma americanum), and Brown dog tick (Ifhipicephalus sanguineus) infestations in dogs and puppies 8 weeks of age and older, weighing 4 pounds of body weight or greater, for one month.

Dosage and Administration: NexGard is given orally once a month, at the minimum dosage of 1.14 mg/lb (2.5 mg/kg).

Dosina Schedule:

Body Weight	Afoxolaner Per Chewable (mg)	Chewables Administered	
4.0 to 10.0 lbs.	11.3	One	
10.1 to 24.0 lbs.	28.3	One	
24.1 to 60.0 lbs.	68	One	
60.1 to 121.0 lbs.	136	One	
Over 121.0 lbs.	Administer the appropriate combination of chewables		

NexGard can be administered with or without food. Care should be taken that the dog consumes the complete dose, and treated animals should be observed for a few minutes to ensure that part of the dose is not lost or refused. If it is suspected that any of the dose has been lost or if vomiting occurs within two hours of administration, redose with another full dose. If a dose is missed, administer NexGard and resume a monthly dosing schedule.

Flea Treatment and Prevention:
Treatment with NexGard may begin at any time of the year. In areas where fleas are common year-round, monthly treatment with NexGard should continue the entire year without interruption.

To minimize the likelihood of flea reinfestation, it is important to treat all animals within a household with an approved flea control product.

Tick Treatment and Control:
Treatment with NexGard may begin at any time of the year (see **Effectiveness**).

Contraindications: There are no known contraindications for the use of NexGard.

Warnings:

Not for use in humans. Keep this and all drugs out of the reach of children. In case of accidental ingestion, contact a physician immediately.

Precautions:
The safe use of NexGard in breeding, pregnant or lactating dogs has not been evaluated. Use with caution in dogs with a history of seizures (see Adverse Reactions).

Adverse Reactions:
In a well-controlled US field study, which included a total of 333 households and 615 treated dogs (415 administered afroxolaner; 200 administered active control), no serious adverse reactions were observed with NexGard.

Over the 90-day study period, all observations of potential adverse reactions were recorded. The most frequent reactions reported at an incidence of > 1% within any of the three months of observations are presented in the following table. The most frequently reported adverse reaction was ormiting. The occurrence of vomiting was generally self-limiting and of short duration and tended to decrease with subsequent doses in both groups. Five treated dogs experienced anorexia during the study, and two of those dogs experienced anorexia during the study, and two of those dogs experienced anorexia with the first dose but not subsequent doses.

Table 1: Dogs With Adverse Reactions.

an rear or or mountains.		Treatment Group				
		Afoxolaner		Oral active control		
		N¹	% (n=415)	N ²	% (n=200)	
١	Vomiting (with and without blood)	17	4.1	25	12.5	
[Dry/Flaky Skin	13	3.1	2	1.0	
[Diarrhea (with and without blood)	13	3.1	7	3.5	
I	Lethargy	7	1.7	4	2.0	
1	Anorexia	5	1.2	9	4.5	

¹Number of dogs in the afoxolaner treatment group with the identified abnormality ²Number of dogs in the control group with the identified abnormality.

In the US field study, one dog with a history of seizures experienced a seizure on the same day after receiving the first dose and on the same day after receiving the second dose of NexGard. This dog experienced a third seizure one week after receiving the third dose. The dog remained enrolled and completed the study. Another dog with a history of seizures had a seizure 19 days after the third dose of NexGard. The dog remained enrolled and completed the study. A third dog with a history of seizures received NexGard and experienced no seizures throughout the study.

To report suspected adverse events, for technical assistance or to obtain a copy of the MSDS, contact Merial at 1-888-637-4251 or www.merial.com/NexGard. For additional information about adverse drug experience reporting for animal drugs, contact FDA at 1-888-FDA-VETS or online at https://www.fda.gov/AnimalVetenrary/SafetyHealth.

Contact TAA at 1-80er-TAA-VETS of unime at https://www.uba.gu/vAmmiaryeterinary.sateryreatur. Advoclaner is a member of the isoxazoline family, shown to bind at a binding site to inhibit insect and acarine ligand-gated chloride channels, in particular those gated by the neurotransmitter gamma-aminoutyric acid (GABA), thereby blocking pre-and post-synaptic transfer of chloride ions across cell membranes. Prolonged afroxolaner-induced hyperexcitation results in uncontrolled activity of the central nervous system and death of insects and acarines. The selective toxicity of afroxolaner between insects and acarines and mammals may be inferred by the differential sensitivity of the insects and acarines (GABA receptors versus mammalian GABA receptors.

Effectiveness:
In a well-controlled laboratory study, NexGard began to kill fleas four hours after initial administration and demonstrated >99% In a Well-controlled ladurality study, vexicate degal of the lines four flouds at the finder administration and cellioristrated series effectiveness at eight hours. In a separate well-controlled laboratory study, NexGard demonstrated 100ms post-infestation for 35 days, and was ≥ 93% effective at 12 hours post-infestation for 35 days, and was ≥ 93% effective at 12 hours post-infestation from through Day 21, and on Day 35. Do Day 28, NexGard was 811% effective 12 hours post-infestation Dogs in both the treated and control groups that were infested with fleas on Day -1 generated flea eggs at 12- and 24-hours post-treatment (0-11 eggs and 1-17 eggs in the hexCard treated dogs, and 4-90 eggs and 0-118 eggs in the control dogs, at 12- and 24-hours, respectively). At subsequent evaluations post-infestion, fleas from dogs in the treated group were essentially unable to produce any eggs (0-1 eggs) while fleas from dogs in the control group continued to produce eggs (1-141 eggs).

In a 90-day US field study conducted in households with existing flea infestations of varying severity, the effectiveness of NexGard against fleas on the Day 30, 60 and 90 visits compared with baseline was 98.0%, 99.7%, and 99.9%, respectively. Collectively, the data from the three studies (two laboratory and one field) demonstrate that NexGard kills fleas before they can lay eggs, thus preventing subsequent flea infestations after the start of treatment of existing flea infestations. In well-controlled laboratory studies, NexGard demonstrated >97% effectiveness against Demacentor variability, >94% effectiveness against Lorder scapularis, and >93% effectiveness against Tubing scapularis and policy of the studies of the scapular scapularis and \$9.0% effectiveness against the scapular scapularis and \$9.0% of the scapular scapularis and \$9.0% effectiveness against the scapular scapularis and \$9.0% of the scapular scapular scapularis and \$9.0% of the scapular scapularis and \$9.0% of the scapul

30 days. At 72 hours post-miesiaturit, reasonal demandance or ally to 8 to 9-week-old Beagle puppies at 1, 3, and 5 times the maximum exposure dose (6.3 mg/kg) for three treatments every 28 days, followed by three treatments every 14 days, for a total of six treatments. Dogs in the control group were sham-dosed. There were no clinically-relevant effects related to treatment on physical examination, body weight, food consumption, clinical pathology (hematology, clinical chemistries, o reagulation tests), gross pathology, histopathology or organ weights Vomiting occurred throughout the study, with a simil incidence in the treated and control groups, including one dog in the 5x group that vomited four hours after treatment. In a well-controlled field study, NexGard was used concomitantly with other medications, such as vaccines, antheliminties. In a well-controlled field study, NexGard was used concomitantly with other medications, such as vaccines, anthelmintics, antibiotics (including topicals), steroids, NSAIDS, anesthetics, and antihistamines. No adverse reactions were observed from the concomitant use of NexGard with other medications.

Storage Information: Store at or below 30°C (86°F) with excursions permitted up to 40°C (104°F).

How Supplied:

now supplied:NexGard is available in four sizes of beef-flavored soft chewables: 11.3, 28.3, 68 or 136 mg afoxolaner. Each chewable size is available in color-coded packages of 1, 3 or 6 beef-flavored chewables.

NADA 141-406, Approved by FDA

Marketed by: Frontline Vet Labs™, a Division of Merial, Inc. Duluth, GA 30096-4640 USA

Made in Brazil.

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