



Examination Rooms DO'S & DON'TS

Veterinary healthcare teams see the majority of their patients in the examination room. But what does it take to make an examination room truly *effective*? How does the team create an experience for patients and clients so that both receive the best care in comfortable, private surroundings?

In most practices, clients and patients are first greeted by the receptionist(s) and then escorted to an examination room. What happens next?

Clients are members of their pet's healthcare team, and the relationship among all team members is based upon working in the patient's best interest. As the client and veterinary team member enter the examination room, the team member should be asking for a brief history of the reason for the visit, immediately showing that concern for the patient is paramount to strengthening the bond between the client and the veterinary team.

The Vital 5

First, every patient should be evaluated for these 5 vital signs at every practice visit:

1. Temperature
2. Pulse
3. Respiration
4. Pain
5. Nutrition

Know the Full Story

The veterinary team member should then take the patient's complete medical history, including any history from the patient's previous veterinary practices. As this information is recorded,



the patient's presenting complaint should not sidetrack the team member. The medical history should include the patient's:

- Allergies
- Current medications
- Dental health
- Environment, including where the patient lives (indoors vs outdoors), other household pets, exposure to other animals, and travel
- History of parasite control
- Nutritional history
- Previous Body Condition Score (BCS)
- Previous medical conditions (eg, GI issues, respiratory or urinary diseases, lameness, masses, trauma, surgeries)
- Typical temperament and any unusual behaviors
- Vaccination history, including where specific vaccinations were administered on the body
- Weight.

Physical Examination

Next, it is the veterinarian's turn to perform a hands-on physical examination from nose to tail:

- Visually study the patient for conditions such as lameness or poor breathing patterns

- Physically examine the patient's body, including checking his or her eyes and ears, determining a BCS, and feeling for lumps or bumps
- Auscultate the patient's heart, lungs, and abdomen.

More Opportunities

The examination room is the ideal place for veterinary technicians to educate clients, so it should be a safe environment where clients feel free to ask questions and discuss the answers. Clients with adult pets should be educated about heartworm prevention, flea and tick disease and prevention, nutrition, and dental disease prevention. Puppy and kitten owners should be educated about these same conditions, as well as vaccination schedules.

To ensure the examination room is a safe, non-threatening, non-stressful environment for the client, the patient, and the veterinary team:

Do:

- Ask the client's permission before performing the examination.
- Ensure the room is clearly marked as an examination room and flagged when occupied.
- Provide a clean, sterile environment secluded from distractions from other clients and patients.



- Consider providing such things as magazines, toys, and water bowls for clients and patients while they wait.
- Ensure that all the needed equipment is ready:
 - ✓ Clean, easy-to-reach stethoscope
 - ✓ Clock with a second hand
 - ✓ Nutritional history form
 - ✓ Otoscope and/or ophthalmoscope
 - ✓ Pain-scoring protocol sheets for each species
 - ✓ Specimen-collection containers
 - ✓ Sterile gloves
 - ✓ Sterile thermometer.
- Have on hand appropriate literature and anatomy models that will help the client understand, especially when discussing the patient's parasites, disease conditions, or nutritional recommendations.
- Document every finding and topic of discussion in the medical record (either paper or electronic).
- Provide estimates when appropriate.
- Consider whether the patient can be treated in the examination room or whether a treatment room would be more comfortable.



READ ALL ABOUT IT

- **Front Office Management for the Veterinary Team**, 2nd ed. Prendergast H—Philadelphia: Saunders, 2014.
- **Principles and Practice of Veterinary Technology**, 3rd ed. Siroids M—Philadelphia: Mosby, 2011.

- Consider creating a comfort area for stressed clients and patients.
- Ask for assistance from the healthcare team if the patient needs to be restrained to allow for a better examination.
- Know the patient's name and gender and always demonstrate affection toward him or her.

Do Not:

- Take a client into a room that has not been cleaned and/or sterilized after the previous patient, which appears unprofessional and implies that the patient is not important.
- Leave the door open, unless the client requests it. Clients may want privacy when talking about their pet and any potential problems.
- Ask closed-ended questions, because they signal that the team is trying to rush the visit. Instead, ask clear, open-ended questions such as *Do you have any questions regarding the examination so far?* that show understanding and empathy.
- Provide too much information at once. Handouts and concise discussions help with understanding, but “information overload” will make clients tune out.
- Assume the client is willing to wait a long time if you are running late. Check if he or she would prefer to leave the pet or reschedule.

The examination room is a private area where clients and patients interact with veterinary team members one-on-one. A room that is clean and quiet and an examination process that is efficient and thorough will give clients confidence that their pet is in the hands of a caring, knowledgeable veterinary practice and healthcare team.

The examination room is the ideal place for veterinary technicians to educate clients.

NexGard®
(afoxolaner) Chewables

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

Description: NEXGARD® (afoxolaner) 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 afoxolaner dosage of 1.14 mg/lb (2.5 mg/kg). Afoxolaner has the chemical composition 1-Naphthalenecarboxamide, 4-[5-[3-chloro-5-(trifluoromethyl)phenyl]-4,5-dihydro-5-(trifluoromethyl)-3-isoxazolyl]-N-[2-oxo-2-[(2,2,2-trifluoroethylamino)ethyl].

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 (*Ixodes scapularis*), American Dog tick (*Dermacentor variabilis*), and Lone Star tick (*Amblyomma americanum*) 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).

Dosing 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 afoxolaner; 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 vomiting. 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 with the first dose but not subsequent doses.

Table 1: Dogs With Adverse Reactions.

	Treatment Group			
	Afoxolaner		Oral active control	
	N ¹	% (n=415)	N ²	% (n=200)
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
Lethargy	7	1.7	4	2.0
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-VEITS or online at <http://www.fda.gov/AnimalVeterinary/SafetyHealth>.

Mode of Action:

Afoxolaner 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-aminobutyric acid (GABA), thereby blocking pre- and post-synaptic transfer of chloride ions across cell membranes. Prolonged afoxolaner-induced hyperexcitation results in uncontrolled activity of the central nervous system and death of insects and acarines. The selective toxicity of afoxolaner 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% effectiveness at eight hours. In a separate well-controlled laboratory study, NEXGARD demonstrated 100% effectiveness against adult fleas 24 hours post-infestation for 35 days, and was ≥ 93% effective at 12 hours post-infestation through Day 21, and on Day 35. On Day 28, NEXGARD was 81.1% 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-hour post-treatment (0-11 eggs and 1-17 eggs in the NEXGARD treated dogs, and 4-90 eggs and 0-118 eggs in the control dogs, at 12- and 24-hours, respectively). At subsequent evaluations post-infestation, 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 >94% effectiveness against *Demacenter variabilis* and *Ixodes scapularis*, 48 hours post-infestation, and against *Amblyomma americanum* 72 hours post-infestation, for 30 days.

Animal Safety:

In a margin of safety study, NEXGARD was administered orally 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 chemistry, or coagulation tests), gross pathology, histopathology or organ weights. Vomiting occurred throughout the study, with a similar 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, 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:

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

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