Communication with Clients

Heather Prendergast, RVT, CVPM
Synergie
Las Cruces, New Mexico

Team members should be able to communicate and educate clients with clear, concise information, ultimately ensuring that patient care is a priority. How treatment plans and cost estimates are presented can determine whether a client accepts the recommendations, so team members should pay attention to their communication style. A study of the client–veterinarian bond showed that clients did not accept recommendations for their pet because they did not believe the treatment was necessary.3

Three learning styles—visual, verbal, and physical—have been identified as applicable to the veterinary setting. The visual style uses images (eg, photos, illustrations) and spatial learning; verbal uses words, both spoken and written; and physical uses the hands and a sense of touch.

Team members likely do not know how individual clients learn, so it is important to incorporate each style into the training plan using items such as manufacturers’ brochures, client education handouts, models, and videos.

Clients should always be given written, resourced information that team members verbally review with them before discharge. Team members should use models, which manufacturers may provide free of charge, and allow clients to feel and touch as team members verbally explain the service or procedure. Team members can also show clients short videos that can later be emailed, along with handouts, to the client.

Clients should hear a message 3 times to fully absorb the information. They must understand a procedure and its value or they may decline the recommended services.

Client education topics include:

- CAD description, including clinical signs
  - Food allergies
  - Environmental allergies
- Tests required for diagnosis
  - Intradermal and serum tests
- Treatment options
  - Food elimination diet trial
  - ASIT, RESPIT
- Expected short-term and long-term outcomes with treatment options
- Financial estimates
  - Cost of diagnosis
  - Cost of immediate treatment
  - Long-term cost of disease maintenance, including all progress examinations.

In addition to client education, team members must provide follow-up for CAD patients because the disease is difficult for clients to understand and frustrating when immediate resolution does not occur.

References