

A Tale of Two Veterinarians

Veterinarians benefit from active listening, empathetic communication skills

by Carolyn C. Shadle and John L. Meyer

What coincidences! Jane and her sister Susan adopted a dog on the same day. Both chose adult male rescue dogs. Both went home with dogs that were up to date on their shots, neutered and tested for heartworm.

Jane chose an adorable little Chihuahua about three years old that she named Pooch. Susan, who lived on the other side of town, chose a large boxer that was almost four years old and named him Buddy.

The coincidences continued. On the very same day, three months following their adoptions, both of their dogs had minor lacerations that required a quick trip to the vet.

Pooch walked over a piece of broken glass when Jane had him out for his midday walk. She didn't notice it at first, but when she got home, she saw that his paw was bleeding and he was whining, as if in pain. Fortunately, her veterinarian, Dr. Marten, and the Ark Clinic were only about two miles away, so she put Pooch in his carrier and went right to the clinic.

Buddy suffered a puncture wound, apparently from a barbed plant growing in the back of Susan's yard she hadn't even noticed was there. Buddy did, however, and came into the house limping. She'd never made contact with a veterinarian before, but since there was a small animal hospital known as Pets Plus just a block away, she always felt that she could get help when she needed it. It wasn't easy getting Buddy into the car, but Susan managed.



When Dr. Marten acknowledged Jane's annoyance because Pooch had "messed up" her day, he found her relaxed and willing to get the medical lowdown.

That was where the similarities ended. Two days later, the sisters discovered they had both had pet problems but, comparing notes, found their experiences were very different.

Susan described her day to Jane and reported that her veterinarian, Dr. Smith, had sutured Buddy's cut. She said that when the veterinarian brought Buddy back to her, her dog was donning a huge cone around his rather fat neck. She said that Dr. Smith explained that this was so Buddy would not lick his wound or scratch at the stitches.

"It looked like torture, to me," Susan said. "And Buddy..."

Before she could go on, Jane interrupted. "You won't believe this, but little Pooch got stitches, too, and a cone! You can imagine how he looked—lost in this huge cone around his little neck!" Jane added, "Actually, I thought it was kind of funny!"

"But Buddy couldn't stand the cone," Susan continued. "He was most uncooperative, struggling with his cone and trying to get it off from the minute I brought him home. He whined and fussed, so I finally took it off."

"Oh, no!" gasped Jane.

"When I woke up this morning," Susan went on, "I noticed that he had been biting the stitches, and the sore was ugly and oozing. So I called Pets Plus and they told me to soak his paw in a bath of warm water with Epsom salts for 10 to 15 minutes and then wrap it with gauze. They said that they would try to see him in the afternoon after 3:00 p.m.

"Then I had to cover his bandaged foot with a plastic bag secured with a piece of tape around the ankle in order to take him out. The whole day was a battle. He didn't want to soak his paw, and he surely didn't want me to bandage it, much less wrap it in a plastic bag to take him to the back yard! Fortunately, he didn't fight me when it was time to take him to the vet. I got there at 3:00 pm and waited until 4:30!"

"Susan, you can't remove the cone!" Jane exclaimed. "That is exactly what the handout says could happen."

"What handout?" Susan asked. "My vet hardly gave me the time of day, and certainly no handout."

"They didn't give you a handout?" Jane asked. "I got a wonderful sheet with a list of instructions for home care. The tech went over the whole thing with me and even showed me a video that described how Pooch had been sutured, which also prepared me for an unhappy dog when I got home. And it was all written on the handout, in case I forgot: 'DO NOT remove the cone. Call the vet instead and discuss the problem.'"

"The handout said that if your dog won't eat or even move while wearing the cone, it may be important to consider an alternative to the cone. And it said I could even call a 24-hour number. Then Dr. Marten called me the next morning to see how Pooch was doing. I'm so sorry you've had such bad luck."

Susan admitted, "Well, it might have gone better if I'd been a little prepared. The doctor never hinted at a problem or told me that there was any alternative. When I looked shocked at this torture thing around Buddy's neck, he just said that it was to prevent the dog from licking his wound. That sounded simple.

"But it's really been a nightmare since Buddy hurt his paw. First, I didn't get in to the vet until 4:30, after waiting for an hour and half. Then it seemed clear to me that the doctor wanted to go home. He hardly said a word. And he certainly didn't give me a handout or show me a video.

"When he saw Buddy's paw, he immediately took him to another room, calling back to me that Buddy would be all cleaned up in a jiffy. When he brought Buddy back, he explained the reason for the cone and then said for me to see the receptionist for a follow-up appointment in 10 days to remove the stitches.

"That was it. Of course, I had to pay when I checked out. That was another blow. I thought the receptionist charged me way too much. But it was clear that she was just waiting for me before she could go home. I felt trapped and didn't protest."

After a moment, Jane responded, “Gosh, my vet could not have been nicer, and I thought it was going to be an awful day. I had blocked the whole day off to study for my exam, so I was really mad at Pooch for messing up my plans. I was so angry—and worried—that I packed him up and swept him off to the vet without even calling ahead.

“Then my vet was so apologetic that I’d had to wait 30 minutes. I said, ‘Oh, that’s nothing. Little Pooch has messed up my whole day. I have a big exam tomorrow!’ He commiserated with me. I remember that he said, ‘Hey, Pooch, can’t you behave yourself when you know Jane has a busy day?’ I thought that was cute. I said, ‘I know Pooch didn’t mean to foul up my day, but in fact he did!’ Dr. Marten agreed. I felt as though I could be angry at Pooch and he would understand.

“I finally calmed down and said, ‘OK, now what?’ At that point, he explained that he was going to take Pooch into the other lab, and he explained exactly what he was going to do. He even showed me a picture of a dog’s wound being cleaned and sutured. I was comforted in knowing Pooch was in good hands. While Dr. Marten and Pooch were gone, I was given that video that I mentioned.”

“I wish I’d gone to your vet,” Susan said. “The rescue shelter gave us a list of vets to check out and set up an inoculation schedule, but I was too busy at the time and decided I would go to the vet near home when the time came. Well, the time came and I guess I didn’t choose well.”

You control the experience

Why do you suppose the two sisters had such different experiences, when both of their veterinarians had, in fact, graduated from reputable veterinary schools and both had the medical knowledge necessary to care for their dogs?

There are many reasons why clients can have different experiences. For one thing, clients themselves are all different—with different dispositions and different abilities to relate to their veterinarians.

Certainly, too, dogs are very different, with differing tolerances for discomfort. Veterinarians run into these factors every day and can’t do much about them.

What they can control, however, is their skill and ability to effectively communicate with their clients. Upon closer look, we found a major difference in the two veterinarians that largely explained the different experiences that Jane and Susan had.

After the 2002 AAHA study on compliance, Dr. Marten became highly motivated to explore the factors that affect compliance. To his surprise, that study found that while most veterinarians think clients were good at follow-through at home, the data revealed that was not the case. The study ended by recommending continuing education and conferences on the issue of compliance.

At that point, Dr. Marten and the Ark Clinic staff started using videos and a notebook of photos and illustrations to educate clients. They also provided booklets and handout sheets for clients to take home, and Dr. Marten instituted callbacks by the attending vet.

The Ark Clinic also held a number of communication workshops for the staff, mostly around two communication skills.

The first dealt with all of the information clients should have. In addition to advising the use of videos and handouts, Ark Clinic staff members were taught and practiced ways to give information in a manner that clients could understand. They learned processes called “verify and clarify” and “chunk and check.” This meant that they learned to give clients information in small installments.

They also learned to stop to check on any misunderstanding, confusion or whatever might inhibit understanding and acceptance of the information or advice before going on to give more information.

The second dealt with empathy. The clinic held workshops in which team members practiced listening for feelings like fear, dread, amazement or confusion. That sounded easy enough, but they



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learned that veterinarians and veterinarian technicians are often so focused on the medical matter that they overlook the feelings that the client may be exhibiting.

One whole workshop session dealt with nonverbal body language, since often the client's feelings are only revealed through a facial expression or a gasp.

Then the staff members learned that even if they "heard" the feelings, it was not easy to demonstrate empathy. And why should they bother, anyway? Wasn't their job to give medical treatment? They certainly aren't psychologists or counselors for their clients!

What they learned, however, was that "active listening" is a skill that enables people to demonstrate empathy and, as a result, relate to others in a powerful way. When the veterinarian or veterinarian technician could demonstrate to the client that he/she "heard" the feelings that the client was experiencing, the client often relaxed, felt understood and was more open to hear bad news, good news, advice or complicated explanations. The trainer assured them that that would lead to better compliance.

Dr. Marten practiced active listening responses in the workshops, but the real breakthrough for him came when he took the skill home and listened to his wife and son in a new way. Wow! The atmosphere seemed more relaxed. His son talked more, and he learned a lot more about what was going on inside his teenager's head. He was sold on the effectiveness of active listening skills.

Back on the job, he had to convince himself that he could take the time to comment on his clients' feelings before barreling into his medical monologue. But he eventually learned that it really saved him time in the long run. When Dr. Marten acknowledged Jane's annoyance because Pooch had "messed up" her day, he found her relaxed and willing to get the medical lowdown.

Take the time to learn to communicate

The training of Susan's veterinarian was quite different. Dr. Smith had

only recently come to Pets Plus. He was a knowledgeable veterinarian, but his previous experience had been in the pet emergency room in a large city. No one ever spoke to him about taking time to empathize. He was there to clean wounds and to do surgery and suturing. He didn't even bandage wounds because there were plenty of technicians there to assist. If anyone were to worry about communication with the client, it would be the technicians and the receptionists. The doctors were there only for their medical training and skill. Dr. Smith brought that same work style with him to the new clinic, and no one advised him to do otherwise.

What do you conclude are the communication lessons to be learned from this tale of the two veterinarians? After you think about it, see if these six lessons are on your list:

- Take the time to communicate with your clients.
- Talk about the importance of compliance.
- Provide materials to clients to aid in understanding and to take home afterwards.
- Give complicated medical information in small doses and check for comprehension.
- Actively listen for your clients' feelings.
- Acknowledge or respond to your clients' feelings. ■

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