Animal Care Clinic Fundamentals

You will need to learn this information before we can start working on communication skills via role playing. We will review the information on your first day, but you should make every effort to learn as much as you can before starting. This is information should be on the tip of your tongue when talking to clients and answering the phone

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ACC Guiding Principles

**We are here to improve the quality of life for both**

**people and pets**

**We do this by providing small animal veterinary care**

**with a family focus**

**As a team we are unwaveringly committed to the 3 B’s:**

* **Best First: Quality** – we are known for excellent standards in medical care and our constant search for ways to improve
* **Bring It On** – our customer service battle cry! We are here to care for our clients by accommodating their needs, advocating for them, providing them with reassurance and providing red carpet service to every client, every time.
* **Barrel of Monkeys: Teamwork** – We take a collaborative approach to running our business; we function as a family who cares for and listens to one another; we are a joyful and hopeful group that has fun & is often a little nutty; we are supportive and encouraging – linking arms as we help each other grow.

**Permission To Play:** Our minimum standards of behavior – what it takes to be on our team:

* Empowerment
* Growth
* Learning
* Self Leadership
* Professionalism
* Compassion
* Honesty
* Integrity
* Respectfulness
* Courteousness
* Confidence
* Encouragement
* Fairness

Directions

We are located at 162 Cross Street in San Luis Obispo, CA 93401, behind the Food-4-Less and Trader Joe’s shopping center.

**From North County (Paso Robles, Atascadero, etc.)**- Drive South on Hwy 101- Take Exit 200 for Los Osos Valley Road- Turn left at stoplight onto Los Osos Valley Road- Drive 0.4 miles and turn left at South Higuera Street- Turn right at Tank Farm Road- Drive 0.1 miles and take first right onto Long Street- Animal Care Clinic will be on your right

**From South County (Santa Maria, Pismo Beach, etc.)**- Drive North on Hwy 101- Take Exit for Los Osos Valley Road- Turn right at stoplight onto Los Osos Valley Road- Drive 0.4 miles and turn left at South Higuera Street- Turn right at Tank Farm Road- Drive 0.1 miles and take first right onto Long Street- Animal Care Clinic will be on your right

Hours

Monday: 7:30 AM – 6:00 PMTuesday: 7:30 AM – 6:00 PMWednesday: 7:30 AM – 6:00 PM (we are closed for staff training from 8:30 AM – 10:30 AM)Thursday: 7:30 AM – 6:00 PMFriday: 7:30 AM – 6:00 PMSaturday: 9:00 AM – 3:00 PMSunday: 5:00 PM – 7:00 PM for non-medical services

Contact Information

Phone: (805) 545-8212 Fax: (805) 545-8497

Website: [www.animalcareclinicslo.com](http://www.animalcareclinicslo.com)

info@animalcareclinicslo.com animalcareclinicslo APP, Facebook

Clients of Animal Care Clinic may create a Pet Portal Account through our website and can send messages, request appointments & copy vaccine due dates, plus access our online store.

Doctor Biographies

Dr. Bonnie Markoff, DVM, ABVP

Dr. Bonnie Markoff is the owner and founder of Animal Care Clinic. She is almost a San Luis Obispo native attending elementary and high school in SLO. Dr. Markoff graduated from Cal Poly with a degree in Animal Science and then went to UC Davis for veterinary school, earning her DVM in 1988. She is a Board Certified specialist in Canine and Feline Practice, a Diplomat of the American Board of Veterinary Practitioners and is certified in Veterinary Family Practice. In 2001 she had the special honor of being named a Fellow at UC Davis in small animal abdominal ultrasonography. Dr. Markoff’s special medical interests include internal medicine, oncology, pain control, diagnostic imaging and figuring out the “tricky” cases.

Bonnie lives with her Australian Shepherd, Zeke, Catahoula cross, Teague and cat, Vince. She enjoys photography, landscaping, hiking, traveling, kayaking, singing in the church choir and playing percussion in her church band. She sits on the advisory board for the Animal Science Department at Cal Poly. Bonnie also works often on short-term missions for Christian Veterinary Mission and other faith based groups to bring veterinary care and leadership skills to people in need throughout the world. She most frequently visits Mongolia and Zambia on these trips. She is also leading Animal Care Clinic in a partnership with the University of Baja California to bring both veterinary medical and leadership training to the students in Mexico.

Dr. Jennifer Evans, DVM

Dr. Jennifer Evans joined Animal Care Clinic in July 1997. She is a Santa Barbara native who earned a degree in Biology from Cal Poly. Dr. Evans earned her DVM from UC Davis in 1997. Her special interests include pocket pets (rodents and rabbits), behavior and internal medicine. Jennifer brings a special compassion and empathy to our practice. Jennifer enjoys all outdoor activities including camping, SCUBA diving and horseback riding, along with church and family activities. She has two dogs, Ventana, a career changed Guide Dog Labrador retriever & Lexie, a Ridgeback whom she enjoys as her hiking buddies.

Dr. Richard Tao, DVM

Dr. Richard Tao is yet another graduate of the UC Davis veterinary program. Dr. Tao also received his B.S. in physiology from Davis. He spent one year doing an internship at the Animal Specialty Group in Los Angeles before joining Animal Care Clinic in November 2001. Rich’s special interests include surgery, orthopedics, oncology and ultrasonography/medical imaging. In his free time, Dr. Tao enjoys cycling, backpacking, and traveling. Richard is a volunteer firefighter with the Santa Margarita fire department. He and his wife have a daughter, Juliette, 3 cats and a Golden Retriever/Border Collie cross.

Dr. Marissa Greenberg, DVM

Marissa Greenberg joined our doctor team in June 2006. Marissa grew up in Whittier, CA. She then graduated from Cal Poly in San Luis Obispo with a degree in Animal Science and worked at Animal Care Clinic as a veterinary nursing team member during her undergraduate studies. She earned her DVM from Washington State University in 2006 and plans on becoming an ABVP diplomat. Marissa’s special interests include oncology, pain management/prevention, leadership and communication.

She has been a very active participant in many forms of community service, such as Relay For Life, both on the Central Coast and in Washington state. She enjoys riding, training and showing her cow horse. She also enjoys spending time with family and friends, camping, hiking, cooking and baking. Most of all Marissa loves spending time with her husband, step-son and 2 dogs.

*Dr. Allison Jones, DVM*

Dr. Jones started at ACC as an undergraduate at Cal Poly many years ago. After a year studying abroad in Spain, she came to ACC to finish her undergrad studies and then went to veterinary school at UC Davis, graduating and joining ACC as a DVM in 2011. Her professional interests include ophthalmology, internal medicine and figuring out the tricky cases.

Dr. Jones enjoys the outdoors and is an avid hikers and backpacker. She also enjoys quilting, reading, writing, and staying fit.

Basic Initials/Abbreviations

AAHA = American Animal Hospital Association: AAHA is dedicated to providing excellence in small animal medicine. Hospitals can voluntarily undergo intense evaluation on 900 standards to become accredited with AAHA. This process involves evaluating almost everything we do including: pain protocols, types of disinfectants used, quality of x-rays, types of continuing education, housing for animals, how we prepare for emergencies,. types of lab equipment we have, safety protocols and facility layout and maintenance. Hospitals accredited by AAHA must demonstrate an exceptional level of medical care and client service and they are re-evaluated every three years to make sure they are keeping up with industry updates.

CVMA = California Veterinary Medical Association: The CVMA is the largest state veterinary medical association in the nation. The CVMA is committed to serving its membership and community through innovative leadership and to improving animal and human health in an ethically and socially responsible manner.

DVM = Doctor of Veterinary Medicine: Becoming a veterinarian in the U.S. requires at least 8 years of school. After earning an undergraduate degree (or attending 4 years of undergraduate school and completing the proper coursework) a four-year graduate program is required. Veterinarians are licensed to treat all species, except humans. Most DVM’s concentrate on one or two species. Some become specialists in certain areas – this requires additional study and examination.

ABVP = American Board of Veterinary Practitioners: ABVP is a specialty board. Most veterinarians who pursue a specialty status will complete an internship plus a 2-3 year residency and then pass a set of board exams. These types of specialists are boarded in certain areas, such as cardiology, surgery, or neurology. ABVP is a species specialty board. DVM’s are all licensed to treat all species aside from people. ABVP allows for specialization within one species (or two in the cases of canine/feline). Candidates must prove 6 years of outstanding clinical practice with the requested species, submit two case reports to demonstrate their surgical and medical skills, show extensive continuing education and then they are eligible to take the board exams. ABVP is the only specialty board that requires its diplomats to recertify every 10 years.

RVT = Registered Veterinary Technician: In California there are two categories of employees who work in animal nursing: RVT’s and unlicensed assistants. We use different titles at ACC, so this can be confusing. An RVT has either completed a 2-year schooling program or worked enough hours to develop required skills, and then passing a licensing examination. RVT’s can legally induce anesthesia, suture wounds, apply casts and extract teeth (all of which is not legal for unlicensed assistants).

At ACC we refer to our assistants as veterinary nursing team members. It is illegal to call yourself a “nurse” unless you have an RN. We therefore have to use the phrase “veterinary nursing team member.” We call our RVT’s registered veterinary technicians.

You may also see veterinary technicians with the initials of CVT or LVT. Depending on the State, candidates may become registered, licensed, or certified. In California you are registered and you must pass the California state examination. Many other States, however, use the National Veterinary Technician (NVT) exam.

AKC – American Kennel Club: The American Kennel Club (or AKC) is a registry of purebred dog pedigrees in the United States. Beyond maintaining its pedigree registry, this kennel club also promotes and sanctions events for purebred dogs.

OSHA = Occupational Safety & Health Administration: The United States OSHA is an agency of the U.S. Department of Labor. Its mission is to prevent work-related injuries, illnesses, and occupational fatality by issuing and enforcing standards for workplace safety and health.

SDS – Safety Data Sheet: A safety data sheet (SDS, formerly known as MSDS or Material Safety Data Sheet) is a form containing data regarding the properties of a particular substance. An important component of product stewardship and workplace safety, it is intended to provide workers and emergency personnel with procedures for handling or working with that substance in a safe manner, and includes information such as physical data (melting point, boiling point, flash point, etc.), toxicity, health effects, first aid, reactivity, storage, disposal, protective equipment, and spill-handling procedures. SDS at ACC are located in a couple binders on the shelves across from the lab.

PPE – Personal Protective Equipment: Personal protective equipment (PPE) refers to protective clothing, helmets, goggles, or other garment designed to protect the wearer’s body from injury by blunt impacts, electrical hazards, heat, chemicals, and infection, for job-related occupational safety and health purposes. At ACC this refers to items like, latex gloves, radiology apron, thyroid shield, etc.

Preventive Care & Disease Control Basics

Wellness, or preventative medicine, is very important at ACC. We recommend many tests and procedures to detect or treat disease early on, when it is easier to treat them.

**Intestinal Parasites:**

 Dogs and cats can carry and transmit several intestinal parasites. The intestinal parasites that are of most concern to us at ACC are:

* Roundworms
* Hookworms
* Giardia
* Tapeworms

 Roundworms and hookworms are very common but rarely cause disease in dogs and cats in California. Puppies and kittens get the worms from their mother, but all pets can pick these up anywhere outside where another animal has been, even a fenced backyard. Cats get them from hunting and eating rodents. Our biggest concern with these two worms is that they are transmissible to people and they do very bad things to people. We make very strong efforts to control these parasites for human health reasons

 Giardia is the same parasite you get when you drink contaminated water in the mountains while camping/backpacking. People get a different “species” of giardia. About 15% of puppies and kittens and dogs/cats from shelters are carrying giardia even if they do not show signs. Giardia may possibly be transmittable to humans. We don’t regularly test for this, but we can sometimes see it on routine fecal examinations.

 Tapeworms are the only worms clients routinely see – the others are usually shed as microscopic eggs. Tapeworms look like little rice grains and may be seen moving. These are carried by fleas – you cannot get tapeworms unless you eat a flea. They are not usually a problem for the pet, but they are very distressing to clients.

 The Centers for Disease Control and Animal Care Clinic recommend routine screening for intestinal parasites through yearly fecal examination. All dogs and outdoor cats should be on a year round deworming program. At Animal Care Clinic we recommend oral Interceptor Plus, Sentinel or Trifexis for dogs and topical Revolution for cats. All of these products are given monthly.

Recommendations:

1. Puppies and kittens: Fecal (intestinal parasite exam) on first or second visit.
2. Dogs and outdoor cats that use a litterbox – intestinal parasite exam (fecal) yearly
3. Dogs and outdoor cats – monthly dewormer year round

**Vaccines:**

**Dogs:** The core canine vaccinations that Animal Care Clinic recommends are DAP and Rabies.

**DAP** - The DAP vaccine protects against multiple agents:

* Distemper causes diarrhea and respiratory disease. It is a highly fatal disease that is not very common anymore because vaccine is so prevalent
* Adenovirus causes liver disease in very young puppies
* Parvovirus is a common and severe disease that causes vomiting and diarrhea. It is expensive.

 As puppies the DAP vaccination is given as a series starting at 6-8 weeks of age and repeated every 3 weeks until the puppy reaches 4-5 months (16-20 weeks of age). Then it is boostered 1 year later and every 3 years after that.

**Rabies** - This virus is carried by bats, skunks and other wild animals in this area. SLO County has the highest Rabies rate in California. All mammals, including people, can get rabies. This disease is virtually always fatal and is considered a very high human health risk.

 All dogs in California are required to be vaccinated against Rabies and the first vaccine is given at 4 months of age. A booster vaccine is given 1 year later then every 3 years after that.

**Bordetella/Parainfluenza** – This is a bacteria & one virus that are part of the kennel cough complex. Kennel cough is a common and highly infectious disease that causes an irritating cough (a lot like the bronchitis people get sometimes.) It is generally not a serious disease, but it is obnoxious. Vaccines are only partially effective and only protect for 3-12 months. Therefore we do not routinely vaccinate nor require this vaccine for lodging.

**Cats:** The core feline vaccinations Animal Care Clinic recommends are CPRT, FeLV, and Rabies vaccinations.

**CPRT** – “**Upper Respiratory”** Also called FVRCP at some clinics, this vaccine protects against

* calicivirus is a part of the feline upper respiratory complex that causes sneezing, runny eyes and occasionally lung disease.
* feline viral rhinotracheitis – a herpes virus that is part of the upper respiratory complex.
* Panleukopenia is a parvovirus that causes diarrhea and severe bone marrow disease. It is usually fatal.

 As kittens this vaccine is given as a series starting at 6-8 weeks of age. It is given every 3 weeks until the kitten reaches 4 months (16 weeks of age). Then it is boostered 1 year later and every 3 years after that.

**FeLV** - The FeLV vaccine protects against feline leukemia virus. This is a virus similar to our AIDS virus and cats who get the disease usually die within 2 years.

 We usually test kittens for the disease after they reach 3 months old and the vaccine is given at 12 weeks (3 months) of age and repeated 3 weeks later. Then it is boostered 1 year later and every 3 years after that. Completely indoor cats do not need to have the every 3 year vaccines, but should get the initial series.

**Rabies** – See above under “dogs” for basic information.

 Cats are not required by law to get the vaccine, but outdoor cats and those that might bite people should be vaccinated. It is given to kittens at 4 months of age, repeated 1 year later, and every 3 years thereafter.

**Canine Infectious Disease Screen:**

 We recommend that all dogs have a blood test yearly to screen for the following diseases:

Heartworm Disease- This is a true worm that lives in the heart and lungs of dogs. If not treated, it can be fatal. Heartworm disease is transmitted via a mosquito bite and is most common in humid and warm areas like the Gulf Coast and Hawaii. There are pockets of the disease in Atascadero, Santa Cruz and other areas in California, but it is not a big threat here. While cats can get heartworm disease, it is not common at all in SLO. Our internal parasite control products prevent heartworm disease.

Lyme Disease - The disease is transmitted via the bite from an infected tick. It usually causes joint pain in dogs and can progress to a body-wide inflammatory process. It is not very common in SLO county, but is quite common in northern California.

Ehrlichia – This is also carried by ticks and is the most common of the 4 diseases we screen for on out Infectious Disease Screen. It causes enlarged lymph nodes, diarrhea and bleeding.

*Anaplasmosis -*  Not a significant disease causing agent, but on the test

**Feline Infectious Disease Screen:**

FeLV - FeLV (Feline Leukemia Virus) is a highly fatal viral disease in cats that can cause several non-specific symptoms including fever, upper respiratory illness, and severe anemia. It is highly contagious and can be transmitted from mother to babies or between cats who share bowls or groom each other. It is usually fatal within 2 years

FIV (Feline Immunodeficiency Virus) - FIV is a viral disease that causes immunodeficiency in infected cats. It is transmitted through cat bite wounds or sexual contact. Just as is true with people, cats can live with this virus for years and transmit it to many other cats before it is detected.

**Timing/When We Recommend Specific Tests for Dogs/Cats:**

Because cats age differently than dogs and small dogs age differently than larger ones, our wellness recommendations vary depending on age, size and species.

**Youth:** Cats 0-4 years old. Dogs <70# 0-3 years old, >70# 0-2 years old

1. Yearly wellness **exam**
2. Yearly **intestinal parasite exam** by fecal flotation- this checks for roundworms, hookworms and whipworms, and may find giardia. Coccidia are another parasite we often find in puppies and kittens. It can make them sick but it isn’t passed to people.
3. Yearly **infectious disease** screening- Dogs should be at least 6 months old before testing. Cats are tested for FeLV at 3 months and should be at least 6 months old before having a complete infectious disease screen. All dogs and outdoor cats should then be tested yearly.
4. **Intestinal Parasite Control**- We recommend monthly Interceptor for all dogs and topical Revolution for outdoor cats, especially those that hunt. These products prevent roundworms, hookworms and heartworm.

**Adult:** Cats 5-7 years. Dogs 0-25# 4-7 years, 26-69# 4-6 years, >70# 3-5 yrs old

1. All the same recommendations for “Youth” plus…
2. Every other year blood test or a single baseline: Complete blood count (**CBC) and blood chemistry** (chem. panel). These check organ function and help identify common diseases such as kidney disease, liver disease, diabetes, Cushing’s disease, etc.
3. Every other year **urinalysis**- this checks for bladder infections (dogs often don’t show any signs), crystals in the urine and helps complete the picture the blood tests paint. It is important to do both at the same time whenever possible because the urinalysis helps us more accurately interpret the blood work.

**Mature:** Cats 8-13 years. Dogs 0-25# 8-11 years, 26-69# 7-9 years, >70# 6-8 years

1. All the same recommendations for “Adult” plus…
2. Yearly blood tests and urinalysis
3. Yearly **thyroid screening** – low thyroid is a common problem in older dogs and high thyroid is common in older cats
4. Wellness exam every 6-12 months instead of just yearly- as pets get older they age faster and things can go wrong faster. By examining them more often we can catch problems earlier.

**Senior:** Cats 14+ years. Dogs 0-25# 12+ years, 26-69# 10+ years, >70# 9+ years

1. All the same recommendations as “Mature” except…
2. Blood tests and urinalysis every 6 months
3. Wellness exam every 6 months

Basic Dog/Cat Lodge Information

There are many things that separate ACC’s Pet Lodge from other companion pet boarding facilities. Listed below is some of what makes ACC a special place for owners to bring their pets.

General Lodge Perks:

1. Bring your own food
2. We provide premium food
3. Bring your own bedding, toys, etc.
4. We medicate and diabetics are welcome
5. We mimic what you do at home
6. 5 veterinarians on-site
7. 2-3 staff members live on-site
8. Lodge within a hospital
9. We help get your vaccine information
10. Provide medical services while lodging
11. Free baths after 5 nights
12. Basic grooming available
13. No deposit for reservations

Dog Lodge:

1. 25 Individual dog runs
2. Runs can become double-wide and some even bigger
3. Communal exercise yard
4. Separate small dogs from big dogs
5. Dogs are let out to potty 4 times daily

Cat Lodge:

1. Cats are far away from dogs
2. Let-outs for cats
3. Can lodge up to 15 cats
4. Most suites can be opened up into multi-level living areas with perches

**To make an appointment for the lodge you must first:**

1. Have accurate and up to date vaccine information – not just the owners word but actually records or a call to the vet hospital to verify dates.
2. Dates of reservation and full info on pet and owner.
3. If you can see that there is clearly a free suite, you can make the appointment
4. If it looks busy or full, tell the owner that the lodge is quite full but that you are relatively sure that our lodging staff can find room. Advise the owner that you will put the reservation request on their voice mail and the owner should hear back from them by the end of the day.

Basic Appointment Information

 Making appointments at ACC can be a complicated and challenging task. For now we want you to understand the basic essentials of how to make an appointment. We will teach you how long appointments should be and how our system works & flows after you have had a chance to see the system in action. As we do role playing exercises to practice talking to clients, you will need to be able to pretend to make appointments. You can use the following information to help you with this.

 We see several different types of appointments and different people schedule or confirm each type of appointment:

1. Wellness exam = for a healthy pet. Seen by a Dr. in exam room
2. Exam other = For any kind of illness or problem. Seen by a Dr. in exam room
3. Behavior consult = longer appointment. Prefer entire family to come. Dr. Evans sees these in exam room or consult room.
4. Recheck (or “recheck no-charge” or “walk-back recheck”= to reassess an ongoing problem. This is generally requested by the Dr. and will recheck an issue that the doctor expects to improved or resolved and does not require coming up with a new diagnostic or treatment plan. This pet will be taken to the treatment room for examination, and the client will not talk to the doctor directly. Clients often call to request a recheck, but it is not what we would consider a recheck. It is important to determine when the pet was last seen for this problem and whether or not we had requested the recheck or the owner just decided to come in. If we have not seen the pet for this problem in the last 30 days and a Dr. did not request this, set it up an “Exam-other”. You do not have to tell the owner all this, but they should know there will likely be a fee for the exam.
5. Progress Exam—This is an appointment to check on the progress of a specific problem the doctor is addressing. It will be seen in the exam room, and the client will speak directly with the doctor. It is used to reassess ongoing and chronic problems.
6. Urgent Care – left to the last minute to fill – so we have space to see urgent appts on the same day the owner calls.
7. Will Wait – people we are “working in” – they have no specific appt time and must be willing to wait up to several hours to be seen. Charge an unscheduled appt fee.
8. Nursing Appointment appt = usually vaccines or other similar procedures. No Dr. involved. Seen in exam room.
9. IPOP (in patient/out-patient) = These are nursing team appointments that do not need an exam room (nail trims, blood draws, injections, x-rays) and will not need a Dr. at the time of the appointment.
10. Procedures = anything involving anesthesia. These are set up with a special Dr. and a nursing team member. These appointments can be tentatively set up by anyone, but must be confirmed and details discussed by a senior nursing team member.
	1. Spays/neuters
	2. Teeth cleaning
	3. Mass removals, etc – anything requiring anesthesia

 When making an appointment with a client, you need to take control of the conversation or it can get quite cumbersome. Avoid open-ended questions such as “When would you like to come in?” Instead, guide the client into an appointment. Ask such things as “Do you prefer morning or afternoon appointments?” “What day of the week works best for you?” Then say “I have an opening at 10am on Thursday or we can see you at 11:30 Friday.” Always determine which Dr. they prefer and that will determine what day we can see them. ALWAYS reiterate which Dr. the appt is with as you make and confirm the appointment. Don’t be afraid to repeat yourself on this!

Prices of Most Common Services

|  |  |
| --- | --- |
| Name of Service | Price |
| Doctor Exam | $59.95 |
| Vaccines | $19.90 - $27 |
| Empty anal glands | $28.52 |
| Spay/Neuter – less than 6 months | $285 |
| Spay/Neuter – over 6 months | $340 |
| Canine teeth cleaning | $375-$410 |
| Feline teeth cleaning | $315-$370 |
| Infectious disease screen - canine | $56.00 |
| Intestinal parasite exam/fecal | $49.33 |
| Nail trim/canine | $28.52 |
| Nail trim /feline | $20.20 |
| Lodge: 1 animal/1 suite | $28.00/night |
| Revolution: 3 or 6 pack | about $15 per dose (monthly) |
| Interceptor Plus: 6 pack | $7-10 per dose (monthly) |
| Trifexis: 6 pack | about $22/dose (monthly) |

Specialist vs. Special Interest

Specialists have received advanced training-usually one year of an internship, and 3 years of residency training, in a specific field (for example: surgery, internal medicine, oncology, dermatology, ophthalmology). After completing this training, the specialist takes a very advanced test, and only after passing it, is considered a specialist in their field. Specialists are considered “board certified” in their specific area. The doctors at ACC are not specialists, but have many special interests. This means that there are certain aspects of practice that they have taken a special liking to, and have attempted to gain more knowledge about by attending continuing education courses. For example, Dr. Evans has a special interest in behavior-she has gone to extra hours of classes about behavior, but she did not complete the training required to be a board certified behaviorist.

Services ACC Doesn’t Provide, Why, and Alternatives

• We do not do **tail docking** or **ear cropping**. These are both strictly cosmetic, elective procedures, that we do not believe is in the best interest of the patients. Ear cropping takes special training to be able to do it correctly for the best results that meet the standards for each breed and can, if done in the wrong hands, go poorly. If you have a breed that needs its ears cropped for showing, then we recommend discussing that with your breeder. Occasionally we may have to amputate portions of an adult animals tail, but this is only done when it is in the best interest for the pet’s health.

• We see **pocket pets** (rats, mice, guinea pigs, hamsters, and rabbits), but do not see other exotics like **birds and reptiles**. Birds and reptiles are very delicate creatures that are very different from the mammals we see. These animals are best cared for by veterinarians who have received additional training in their care, and have the special equipment that is required to treat them safely. We do not treat **ferrets** as they are illegal in California.

• We will only **declaw cats** if we are convinced the owner is going to get it done despite our education – we will provide the best pain control and so would prefer the procedure be done here. Only Dr. Markoff will do the procedure.

 **Declawing cats** is equivalent to amputating the end of your fingers – removing the bone and tissue of the last knuckle. We take this very seriously. Not only is it a painful procedure, but also if done incorrectly, cats can live in pain for the rest of their lives and their feet may not function properly. If you have an indoor cat that is scratching your furniture, we are happy to offer recommendations for trying to change their behavior, rather than have them declawed. Cats need to be offered an alternative to scratching the furniture, so be sure to provide them different kinds of scratching posts. When you see them scratching at the furniture, remove them, and place them at whatever you would like them to scratch. Spraying them with water when scratching might also be a good deterrent. In addition, you can try scat mats around the area that they are scratching, or covering the area with aluminum foil while you try to modify their behavior and teach them to scratch the appropriate place. Keeping their nails trimmed short can help decrease the damage they can do in the house. There are also “soft paws” available that goes over their nails, so that if they do scratch, they do not cause damage. Another alternative is arranging to take indoor only cats outside under supervision, either in an enclosed patio type setting, or on leash, to allow them access to a more natural environment to scratch. Once declawed, cats need to be indoor only, as they no longer have one of their best means of defense. If all methods of behavior modification have been unsuccessful, then we can offer to declaw your cat. Because it is a painful procedure, your cat will come in to the hospital the day before to be dropped off and receive a pain patch. Your cat will receive additional pain medications before surgery, as well as a local anesthetic during surgery. Your cat will spend the night in the hospital after surgery so that we can assess and administer pain medications as needed. Your cat will go home with pain medications as well. Talking to Clients

 You can understand all of the above information, know everything about ACC and be a whiz at all aspects of veterinary medicine, and still be totally ineffective at getting that information to clients. The most important skill you can learn at ACC is how to properly communicate with clients. When you speak to clients and other people in person or on the phone, the way you speak is immensely more important than the words you use. What they hear or think they hear is more important than what you say.

 We will spend most of your first month at ACC working on how to properly talk to clients, how to be professional, how to control expectations and how to bond people to our practice. You will learn this through lectures and watching examples. We will also have you practice conversations and role play situations. In order to make this real, you will know the more technical information we listed above. You will also have to understand the basic flow of conversation here at ACC. The next few pages are to help with the latter.

 A client’s first impression of any veterinary hospital comes from the person who answers the phone. If they are not impressed by you, they will never get to see our cool building or meet our super knowledgeable doctors. Every phone call is a potential new client and must be treated with extreme care. You can never feel too busy for anyone!!! When you speak to someone on the phone, they should feel that you have nothing else to do in the world but talk to them. They should feel very special. We want you to roll out the red carpet to every person, every time.

 Oddly enough, your word choice has little to do with what a client hears. A listeners perception of what you said is based mainly on tone of voice (and body language when you are in person.) Do not speak too fast or too slow. Enunciate your words. Be positive and upbeat. Sound interested in the caller. Show caring, compassion and interest. Make them feel you want to help them and provide answers to their needs. However, there are certain words and phrases that can upset a client very easily!

Special Words/Forbidden Phrases

 How a person perceives a statement or reacts to a specific word is not always how the speaker intends it. Great care should be taken when communicating with clients, especially over the telephone when they cannot relate to your current surroundings and body language, to ensure they do not interpret words and phrases in a negative way. You have 20 seconds to make an impression – on the phone or in person. Your goals in dealing with clients are to control client expectations, set yourself up to exceed those expectations, and to end all instructions with repetition. Most people need to hear an idea 7 times before it becomes a fact to them and they will remember it.

 The word “you” will often put a person on the defensive! Never use “you need to” or “you should have.” These phrases imply the person is at fault for something or being demanded to do something. No one likes either of these scenarios! Instead use “I need” which changes the phrase from a demand to a request: “You need to get records from your previous vet” sounds rather abrupt. “Too make sure we know exactly where Fluffy is in his health care, I need to obtain his previous vet records” opens the door to further communication on how to best get those records.

8 Basic rules of word choice/phrasing:

1. Don’t lead with negatives (like this statement does!)
2. Don’t define your self as the person who can’t – tell listeners what you **can** do
3. Don’t use work related slang terms – “the back,” “get a weight,” “we’re booked.”
4. Don’t talk down or insult
5. Avoid jargon (too many medical terms) – don’t talk over heads
6. Be specific, clear and honest
7. Use empathy – validate a person’s right to “own a feeling”
8. Don’t lecture

Words to avoid:

1. Can’t
2. Don’t
3. I’ll Try – tell them specifically what you will do
4. “you” at the beginning of a statement
5. Sorry (It is never wrong to apologize when we mess up. However, repeatedly apologizing for little things gets irritating. Try to avoid this word unless there has been a serious problem that deserves a true apology.)
6. Policy, or “that is how we do things here.”
7. She’s busy. Instead say “She’s in surgery”, “She’s at lunch”, “She’s with a client”
8. Have to
9. You should have
10. Vague words & phrases (moment, a sec, later, soon, pretty expensive)
11. The Back (say treatment room, blood drawing station, etc.)
12. Get a weight (say – let’s see how much Fluffy weighs)
13. Cage or run (say suite)
14. Kennel (say lodge)
15. Drop-off (say admit or day stay)

 It is also important to control the expectations of the pet owner. When we use words such as “a minute” or even “I will have Dr. Greenberg call you back.” They may think something different in their mind or may hold you to the exact time. For you “a minute” may actually mean sixty seconds, but the client thinks may think it means a few seconds. To you having “Dr. Greenberg call back” means she will call back sometime during the day, while the client may believe they will be getting a call within five to ten minutes. Be specific and ask if that time frame is OK. Our goal should be to exceed their expectations

 Practice with the following “forbidden phrases” so you can quickly and routinely change them to more positive, caring words when relating to others. Much of this is not natural for most people. You will need to practice talking like this. Practice you’re your spouse or roommates, talk to yourself in the car. Make it all come naturally. Remember, our goal is to make each client or potential client feel important, cared for and trusting in our abilities to serve them and give excellent care to their pets.

**Statements to Avoid**

1. I’m sorry, I can’t fit you in today. (Don’t tell them what you can’t do, rather find something you can do!)
2. I’m sorry, we’re booked. (They don’t have any idea what “booked” is! Let them know the doctor appointment times are currently all scheduled, then try to offer an alternative way to see them.)
3. We are running late. (Wow, to a client this may just mean we are slow and lazy! We have experienced several critical patients that have required immediate care. Then let them know how long the expected wait is and offer to reschedule if waiting will be inconvenient.)
4. When would you like to come in? (Be specific when making appts, give them several choices so we can better stay with the scheduling plan… “I have an opening today at 3pm or we can see Fluffy tomorrow at 10am)
5. Sorry to keep you waiting. (Thank you for your patience. Avoid saying “I’m sorry” very often)
6. You must have misunderstood. (We must have had a slight miscommunication. Start sentences with anything other than “you” when possible)
7. We’ll work you in. (We will see Fluffy, however the wait may be as long as an hour so we can dedicate ample time to check her ears thoroughly.)
8. I don’t know. (That is a great question; let me find the answer for you.)
9. We can’t do that. (“Let me tell you what we can do” “We need the doctor to see Fluffy before we can prescribe medication for her ears as there are a variety of medications available and we need to determine which one will be most effective.”)
10. Just a moment/second/little while/shortly/soon/few minutes. (Be specific and tell them why the length of time, then adhere to the time frame you promised.)
11. Hold please. Hold on. (May I place you on hold for about two minutes or I would be glad to call you back within ten minutes.)
12. I don’t handle that. (Let me see who I can have take care of that for you.)
13. She is still at lunch. (Dr. Tao is unavailable at this time, however I expect him to be available within the hour.)
14. Doctor is busy. (Dr. Markoff is in surgery, with a critical patient, or with another client right now.)
15. Can I help you? (How may I help you? – this implies that you are capable)
16. Don’t Forget (Please remember, or “I’m sure you will remember”)
17. You’re free to go (Thanks so much for coming in)
18. I’ll try (I will or an alternative action. I will see if we can do that)

Scripts

 When people call to ask how much something costs, 90% of the time they are really trying to find out more about the process or us. Your job in handling these phone calls is to bond the client to our practice as you give them the information they need to decide where to get care for their pets. As you talk to them, you need to do all you can to determine what they need – what information, what services, what level of care, what level of expense – and then help them meet that need. Rarely will anyone need to go elsewhere for a lower cost procedure, as our fees are quite low. If you do not get the appointment, you probably did not bond the client well.

 People who call asking about prices are called “Phone Shoppers.” We will have many of these calls every day. It is essential that you handle these calls well. Each phone shopper that is turned into a new client is worth about $500 per year and will last at least 5 years – that is $2500 worth of income! We don’t want to lose these people!

 The following is basic information on how to handle a phone shopper or someone calling to learn more about our practice. After this “basic script” you will find more specific information on how to talk about the most commonly “shopped” services. We would like you to say several good things about ACC in each call (brag about us!) You will find a list if ideas in this regard following the scripts. Add to this list and prepare a set of “brags” that you have memorized and that easily fall out of your mouth as you talk to clients.

BASIC SCRIPT/CALL

1. Answer the phone as quickly as possible – preferably after 1-2 rings and try to never let it ring more than 3 times.
2. Answer by saying “Thank you for calling Animal Care Clinic. This is Bonnie. How can I help you?”
	1. Use these exact words and do not cut it short!
	2. Speak clearly and do not sound rushed
	3. Truly mean what you say – really care about what you can do to help!
3. Immediately make them feel glad they called you. Set yourself up as the one who will help them.
	1. Tell them specifically “I am glad you called us – I can help you.” This seems mundane but it is very reassuring to a caller.
	2. Determine if they are an established client or new to the practice
	3. Say something good about the practice – do this early and do it again later (see suggestions for this under “Good things to say about ACC”)
4. Get basic information
	1. Frequently the caller will provide information you need without you specifically asking. LISTEN carefully when answering a call and jot down things the caller says that you need to remember. Remembering what a caller has already said and using that information helps to bond the client to you and the clinic. “So Rocky is a Rottweiler and how old is he?” to obtain the age of the pet when the caller has already given the previous information. Some callers will introduce themselves immediately after you answer, be prepared to write down the name of the caller so you can use it later during your conversation “Mrs. Smith, Rocky is only eight weeks old so I will explain The full vaccine series he will need.”
	2. Ask permission to do this – “In order to give you the best information, would it be okay if I ask you a few questions about your pet?” And always “My name is Bonnie, may I ask what your name is?”
	3. Get pet’s name as early as possible
	4. Pet’s age and species – dog or cat
	5. Ask if male or female – NEVER assume an owner knows that a spay is for female and neuter for male.
	6. Comment on some aspect of this information: “What a great name! I’ve never heard that one before.” “I love Golden Retrievers – I have three at home.” “How exciting to have a puppy in the house!”
5. Tell them about the procedure BEFORE mentioning any prices!!!!
	1. Once you say the price, they stop listening – you won’t get a chance to brag
	2. Learn about specific procedures and Shoppable services so you can talk about them easily.
6. Give them the price
	1. You should have this memorized with the ranges that show up in estimates.
	2. Be specific but also give wiggle room.
	3. Be accurate. Any mistake here can be devastating later! Control expectations by telling the client all the things that might change the price and all other fees that might be included. If someone calls to ask the price of a vaccine and you tell than cost only and fail to advise that we will charge and exam fee also, you are setting us up for a disaster!
7. Go for the appointment
	1. The BEST way to do this is “It looks like I have an opening on Thursday, would you like to schedule Fluffy?” If they say yes, then ask them to hold while you get a nursing team member to make a procedure appt, or go ahead and make an exam appt yourself. Or you may need to talk about what days of the week are better, etc.
	2. Asking if they want to make an appointment will rarely get you to an appointment – it is way too easy to say they want to think about it or will call back.
8. Close with further bonding
	1. If no appointment was made
		1. Thank them for calling…”Thank you for calling us. We are here to help you.”
		2. Offer your self as a source of future information….”As you call around, if you come up with any questions, please fell free to call me back.”
		3. See if you can send them anything…. “Can I send you any information about the practice or the procedure? We have many great handouts to explain the surgery.”
		4. Direct them to the website for more info… “Or you can check our website at animalcareclinicslo.com or find us on Facebook.”
	2. If an appointment was made and you close the call
		1. Thank them…. “Thank you for calling and setting up the appointment for Fluffy….”
		2. Assure them they made a good choice…”I am confident you will be pleased with the quality of care that Fluffy receives. Our doctors are truly wonderful.”
		3. Offer to send paperwork, information….”Can I send you any information about the procedure or perhaps the forms we will need for you to fill out before Fluffy can be admitted on the day of surgery?”
		4. Refer them to website and discuss pet portal….”You might want to check out our website or Facebook page. You can download the admissions forms and can also set up a Pet Portal, which will give you better access to our services on line.
	3. Whether an appt is made or not, as you transfer the call to a nursing team member or end the call:
		1. Repeat your name
		2. Refer to their name or the pet’s name
		3. “My name is Bonnie and I have enjoyed talking with you Steve. Good-bye.” “My name is Bonnie. Please give Fluffy an extra pat on the head for me, okay! Good-bye.” “My name is Bonnie and I am very excited to meet both you and Fluffy next Wednesday. Good-bye Steve.”
9. Throughout the call
	1. Use the owner’s and pet’s names – sparingly but more than once.
	2. Use your coworkers names and titles. Rather than “someone will help you with that appointment” say “Erin, one of our veterinary nursing team members, will help you..”
	3. Say good things about ACC
	4. Be personal, relational and develop a relationship with the caller!

***Spay/Neuter Information:***

1. Ways to describe the procedure – refer to it as an ovariohysterectomy.
2. Things to mention before giving the price!
	1. One of our excellent doctors will do a complete exam before the procedure
	2. Every pet has a brief blood panel run the morning of the procedure
	3. All animals are on IV fluids before, during and after the procedure
	4. We are totally focused on pain control and pets receive pain medication before and during the procedure.
	5. One person is dedicated to monitoring anesthesia and pets are recovered in our ICU.
	6. Every pet goes home with pain medication
	7. There are no sutures to remove – all buried and dissolve on their own
	8. You don’t need to say everything listed here every time, but you should hit what you think are the most important points and be able to bring up the others if needed/asked.
3. We recommend spays and neuters at 4 months of age
	1. Huge health advantages to females as we can eliminate breast cancer by spaying before their first heat.
	2. Advantage to males is more behavioral – preventing “testosterone induced behaviors” like aggression, chasing females and urine marking
4. We discount the fee for under 6 months of age for 2 reasons
	1. To encourage people to spay before the first heat
	2. The surgery is easier when there is less body fat
	3. 4 months is a very safe time for anesthesia
5. We do not charge extra for being in heat or pregnant
6. Animals are admitted in the morning and discharged between 3 and 6 the same day – no overnight required
7. It is fine to leave pets overnight the night before surgery – there is no charge for this
8. A spay involves removal of the uterus and ovaries and requires that we enter the body cavity.
9. A neuter involves removing the testicles – we do not have to enter the abdomen to do this in most cases.
10. Animals with only one descended testicle (one testicle on the outside) need a more involved surgery, as we must enter the abdomen and search for the testicle. There is an extra fee for this.
11. Some hospitals charge by weight. We do not do this as we want to make things simple – costs do not change that much based on weight.
12. Some people may ask about sevoflurane vs. isoflurane or other anesthetics. We use Isoflurane. Sevo is NOT a safer anesthetic – it is only a little bit faster. We use an injectable protocol that makes the difference between these two inhaled anesthetics nominal. Sevo is much more expensive so we use Iso since it is equally safe. If someone seems quite knowledgeable on this and has questions, refer them to a doctor.

Vaccine Information Script

Pet owners frequently phone and simply state their pet needs its’ vaccinations. They often have no idea what is due or why. While vaccinations may seem simple to us, vaccine information can be very complicated for pet owners. Take care during your conversation that the owner does not feel “stupid” for asking questions and make sure your tone lets the client know how important you feel proper vaccinations are.

BASIC SCRIPT/CALL

* + - 1. Be sure to determine basic information
				1. Age - approximate
				2. Species (dog or cat)
				3. Male or female and name (so you can say he or she and talk using the pet’s name)
				4. How long have they had the pet
				5. Has it had any vaccines previously
			2. Tell the owner right away that there is a lot more to a wellness program than just vaccines. Do not talk prices until you have reviewed basic wellness.
				1. For puppies and kittens:

There is a series of vaccines usually given every 3 weeks

Parasite control is extremely important for your pet and your entire family

Don’t forget that the cost of a spay or neuter is in the near future also

* + - * 1. For adults:

If your pet has been vaccinated before, he may not be due now – we recommend vaccines every three years – not yearly.

Parasite control is very important

Some older pets benefit from “wellness lab screenings”

Offer to get past records and to review them to see exactly what is due

* + - * 1. Don’t go into excessive detail here. You don’t have to go over the every 3 weeks until 5 months, etc. unless the owner asks. Just point out there is more involved.
			1. If you sense a client is getting a little frustrated with too much information, it means you need to back off. Too much detail for this client.
			2. Tell them that we tailor our preventive care plans to the individual needs of the pet and the family and therefore it is best to set up an appointment where we can review everything with them, including all fees, before we decide how to proceed. A good line for this is **“Our veterinarians like to consider each family’s lifestyle and each pet’s unique medical needs when designing the best wellness programs. Not every pet needs the same vaccines and parasite control programs, and not every family wants to care for their pets in the same way. I would love to set up an appointment with one of our doctors so you can meet us and we can determine what will best for you and Fluffy.”**
			3. When you give the prices, try to stick to the original question – which is usually vaccines….**”Our exam fee is $55 and vaccines are about $15 each. We will review the costs of other care that Dr. Tao recommends before we proceed with any other procedures. If Fluffy only needs that Rabies vaccine, than you total visit cost would be $70.”**
			4. For puppies, kittens or those you know will need more than one visit try to summarize a bit…**”Our exam fee is $55 and vaccines are about $15 each. Most first time puppy visits that include some parasite testing and deworming are about $125 and subsequent visits are about $50-60 every 3 weeks.”**
			5. Be sure to not overwhelm with information. Make sure the caller knows this can be very confusing.
			6. Let them know that our nursing team is excellent at explaining all of this and we will review everything again when they are here.
			7. After making an appointment, a great closing type line is… “**our nursing team memebers are great at helping you get started with Rocky’s health care schedule and will go over that extensively when you are here. Is there anything else I can clarify for you prior to you appointment time?”**

Veterinary Dentistry Info/Script

1. Ways to describe the procedure – things to say before giving the price
	1. One of our excellent doctors will do a complete exam before the procedure
	2. Every pet has a brief blood panel run the morning of the procedure
	3. All animals are on IV fluids before, during and after the procedure
	4. We are totally focused on alleviating stress, so Fluffy may get a sedative/pain control to help the placement of the IV catheter and anesthesia go smoothly.
	5. A trained veterinary nursing team member will thoroughly clean Fluffy’s teeth following the same steps that your own dental hygienist will do.
	6. One person is dedicated to monitoring anesthesia and pets are recovered in our ICU.
	7. A doctor will thoroughly check Fluffy’s teeth after being cleaned to check for any problem teeth or anything else of possible concern.
	8. You don’t need to say everything listed here every time, but you should hit what you think are the most important points and be able to bring up the others if needed/asked.
2. Discuss extractions (only if owner asks you)
	1. If we have not seen this pet, mention that it is difficult to give an accurate assessment without first looking at Fluffy’s mouth. In this case it may be best to do an exam first, unless we have information from a previous or referring veterinarian.
	2. Cost is based on the time and tools it takes to remove the tooth. The things taken in account for cost are doctor time, anesthesia time, tools used, any additional pain meds, and likely dental x-rays.
3. Discuss full labs (only if pet is about 7 years or older or if owner asks)
	1. If pet is about 7 years of age or older mention that we highly recommend to do full blood and urine lab work before anesthesia.
	2. At 7 years, dogs and cats are the equivalent of 40 human years and as we all age our bodies can change a lot inside and outside.
	3. Lab work helps us to understand how pet’s internal organs are functioning and how they will react to various anesthetic protocols.
	4. Our doctors prefer to have full labs done within about 1 month of anesthesia.
	5. You should know the cost of a CBC/Chem/T4/UA.
	6. If the pet is of the age that needs full labs then try to schedule when you go for the appointment of the dental.
4. Give them the price
	1. You should have this memorized with the ranges that show up in estimates.
	2. Tell them the range in the estimate is there to allow the doctors to customize the anesthesia and sedation/pain control protocol based on exam and lab work results. Our doctors tailor the anesthesia to the individual pet’s needs.
5. Reasons we recommend routine dental cleanings
	1. “Routine” can mean anywhere from having a dental done every 6 months to 2 years depending on each individual animal, species, breed, and other preventative measures taken (tooth brushing, dental chews).
	2. There are huge health advantages to keeping teeth clean as dirty teeth with tartar and calculus are harboring bacteria that enter their pet’s blood stream every time they eat or chew on something. These bacteria can exacerbate underlying medical conditions, such as heart or kidney disease or cause a new infection.
	3. They can also prevent painful oral diseases and help ward off bad breath.
6. Older pets and puppies/kittens
	1. Kittens and puppies can have poor alignment of teeth or missing teeth, predisposing them to severe and painful dental problems in the future.
	2. Occasionally young animals will retain their deciduous (baby) teeth, which can cause misalignment of adult teeth, bad breath, and advanced progression of dental disease.
	3. Diseases associated with aging often cause dental disease.
	4. Early discovery can prevent a bad toothache. It is a misconception that this is not painful. Many dogs and cats will continue to eat and may act otherwise “normally” even with a toothache.
	5. Many owners report that their pet has a lot more energy and acts younger after a dental cleaning.
7. We currently have 2 levels of fees. Earlier disease will be classified as a score 1-2 and is less expensive than more advanced disease (score 3-4). Higher score indicates more advanced infection and calculus accumulation. We generally recommend full mouth x-rays with the grade 3-4 dentals and this incurs an additional fee.
8. Animals are admitted in the morning and discharged between 3 and 6 the same day – no overnight required
9. It is fine to leave pets overnight the night before or after surgery – there is no charge for this
10. A dental involves the same steps that our own dental hygienist follows. First ultrasonic scaling with a special tool that uses vibration to break up and remove tartar/calculus. Hand scaling to remove any tartar/calculus left behind and in hard to reach spaces and below the gum line. Polishing to smooth the tooth surface and help increase the time between cleanings. A thorough check-up by the doctor to assess gum health, teeth abnormalities, possible extractions/cavities, etc.
11. Some hospitals don’t include items we feel are important like, IV catheters and IV fluids. Let client know that when comparing between different hospitals it is important to know what is included in the cost so one can compare apples to apples.
12. Many hospitals will not even give you an estimate without first seeing the pet for an exam with the doctor. At ACC we will be happy to try and accommodate, though we will likely want some background on the pet and previous records that might affect the anesthetic protocol.
13. Some people may ask about sevoflurane vs. isoflurane or other anesthetics. We use Isoflurane. Sevo is NOT a safer anesthetic – it is only a little bit faster. We use an injectable protocol that makes the difference between these two inhaled anesthetics nominal. Sevo is much more expensive so we use less since it is equally safe. If someone seems quite knowledgeable on this and has questions, refer them to a Dr.
14. Dental cleaning DOES require general anesthesia to be done properly. After all we cannot expect a dog or cat to sit quietly with their mouth open while we clean thoroughly around every tooth. Especially because the most important areas to clean is below the gum line and the tools we use could be damaging to a pet’s gums if they were not still.
	1. Some groomers will clean teeth. Occasional scaling of the teeth while your pet is awake usually won’t hurt, but it can give you a false sense of security. A groomer doesn’t have the training to assess the various dental diseases and abnormalities and things may get missed if not assessed by a veterinarian.
	2. The California Veterinary Practice Act prohibits lay people from performing the teeth cleaning procedure unless it is done under the direct supervision of the veterinarian.
	3. Only veterinarians have the knowledge, skills, and abilities to diagnose and treat diseases of animals, including dental disease.
	4. Only veterinarians can provide a health benefit rather than a cosmetic solution for a disease condition.
	5. Only veterinarians can assess the health status of the patient and the possible need for antibiotic treatment. Scaling the teeth liberates showers of bacteria into the patient’s mouth. If there is any break in the gum tissue, the bacteria enter the bloodstream; most healthy animals can tolerate this bacterial shower.
15. Pre-dental antibiotics are given to all of our patients before undergoing anesthesia for dentistry procedures. This is important since just 1 milligram of plaque (an amount to cover a pinhead) contains 200 million bacteria!
16. We can give tips about ways to prevent dental disease and prolong time in between dental cleanings. We are happy to give demonstrations on tooth brushing as well.

***Clients Just Looking for Basic Information About ACC – Script/Info***

 When new clients call to ask about a cost or find out about us, they are looking for someone that is interested in them, isn’t distracted, and someone they trust to take care of their pet. Your job in handling these phone calls is to bond the client to our practice as you give them the information they need to decide where to get care for their pets. As you talk to them, you need to do all you can to determine what they need/want – what information, what services, what level of care, what level of expense – and then help them meet that need.

1. Ask them, “Have you heard about our practice before?” Mention some of the really awesome things about ACC. Here are some highlights and you can pull from the list of good things about ACC. Try to mention a few items. If they sound interested in something specific, you can go into further detail.
	1. 5 doctors and open Mon-Sat for medical services
	2. Open Sundays from 5-7 for non-medical services
	3. State of the art technology (ultrasound, digital x-ray, in-house lab…)
	4. Dog/Cat Lodge on-site
	5. Family practice caring from puppies/kittens to geriatric pets
	6. Work closely with an in-town x-ray/ultrasound veterinary specialist and access to many other specialists
2. Try to find out why they are looking for a vet
	1. New to the area?
	2. New pet owner?
	3. Not satisfied with current vet?
	4. Serious problem that they want a second opinion on?
	5. The reason they are looking should guide you into some things you can say to reassure the client that we can meet their needs.
3. Always offer a tour. Encourage them to drop by, view our website. Be very open and encouraging.

Good Things To Say About ACC

1. Five doctors
2. Dr. Evans has a special interest in pocket pets
3. Ability to allow owners to watch their pet's surgery via an observation room
4. Two nursing team members live on site/24-hour hospitalized care
5. Digital x-ray
6. Dental x-ray
7. Ability to consult with Dr. Jones, a local board certified radiologist for x-rays and ultrasound
8. Self-service spa
9. Computerized records
10. Dog runs can be opened larger for large breeds or multiple pet families to house together
11. Cat lodge is separate from dogs
12. In-house laboratory
13. Isolation unit
14. Intensive care unit
15. Open extended hours on Mondays until 8pm
16. Open Saturdays
17. Open Sunday evenings (non-medical related: Lodge pick-up/drop-off, buy food, self-serve bath, etc.)
18. OFA x-rays
19. Puppy training classes
20. Dr. Evans has a special interest in behavior
21. Comfortable consult room
22. Offer chemotherapy – Dr. Greenberg
23. Large waiting room with separate cubicles
24. Sell specialized & Rx food diets
25. Offer online Pet Portal
26. Send reminder emails and postcards
27. AAHA accredited – one of the top 5 practices in North America in 2011
28. Practice of Excellence status
29. ABVP Diplomat on staff
30. UCD fellow on staff
31. 10,000 square foot state of the art facility
32. Ultrasound
33. Echocardiogram
34. Computerized ECG
35. The only certified Cat Friendly practice on the Central Coast!
36. Fear Free Certified staff
37. Board certified surgeon comes & does procedures here
38. Micro-chipping
39. Highly trained staff with continuing education
40. Active in the community
41. Pet Lodge and Hotel for Dogs and Cats
42. Routine and emergency surgery
43. Our doctors enjoy working with all life stages of dogs/cats
44. We have 4 RVT’s on staff
45. We have access to several specialists when we need it
46. We tailor your pets vaccination plan to each individuals needs
47. We tailor your pets anesthesia plan to it’s individual needs
48. We have a RVT fluent in Spanish
49. Our doctors have a special interest in pain control
50. We focus on Veterinary Family Medicine

Managing Messages/Interruptions

* + - 1. The hardest part of taking and managing messages is to determine how urgent the message is. Urgency in the eye of the caller may be very different than urgency from our point of view. You must be specific in determining what the client needs and expects and you must control the expectations!
				1. As you listen to the caller’s statements, try to determine their emotional needs and the actual practical needs of the situation.
				2. Acknowledge what you think the reality of the situation is…

“It sounds like you would like an answer to your question immediately.”

“This sounds serious. We need to get an answer to your question in the next hour.”

“Is it important to you that you speak to Dr. Markoff today?”

* + - * 1. Then tell them the situation here and reassure them you will make things work out for them…

“Dr. Markoff is in surgery right now so I will find another way to handle your concerns until she is available.”

“All of our doctors are working with other patients at the moment, but I can get one of them to get back to you in about 45 minutes.”

“Dr. Markoff is not seeing appointments today so I am not sure what her meeting schedule is like. I will get your message to her, but cannot guarantee she will call back today. If you really need the call today, I will make sure she knows that.”

* + - 1. Truly critical– need an answer right now (THESE ARE RARE!!!!!)
				1. You can interrupt anyone doing anything for the truly critical
				2. Beware – it better truly be critical
				3. Start the interruption with…”I have a critical situation on the phone that needs your immediate attention.”
			2. Urgent
				1. Check to see if the person who needs to get on the phone is available.

The urgency of the caller/message determines when to interrupt.

If a doctor is overwhelmed with cases and is typing or anything else, try to avoid interrupting if you can

If we are not overwhelmed and the doctor appears more relaxed, ask if it is okay to interrupt.

Anytime anyone is typing an MRE or doing math, try to avoid interrupting or hovering (just hanging by someone’s shoulder is as distracting as speaking to them.) If the message is worth an interruption then just interrupt. If it is not, leave and move to the next section.

* + - * 1. If not immediately available, tell the caller you will need to have the person get back to them.
				2. DO NOT LEAVE PEOPLE ON HOLD WHILE YOU RUN AROUND LOOKING FOR ANSWERS OR WAITING TO INTERRUPT SOMEONE!!
				3. Get as much information as you can – do not assume anything! Make sure you know which person you are talking to (not Fluffy’s owner). Ask plenty of questions and be sure you truly understand the whole situation.
				4. Tell them when you expect them to get a call…”I will get this message to Dr. Markoff and you should expect a return call within 30 minutes.”
				5. Determine what number is the best to use for the time period you have set up.
				6. Call them back yourself if the return call is not going to happen when you said it was….”Mrs. Jones, it looks like Dr. Markoff has been tied up with her current patient longer than I expected. Is it okay if she takes another 45 minutes to call, or shall I try to get another doctor to help you?”
			1. Need an answer soon
				1. Let the caller know you will get a message to the doctor, etc and would expect them to call back in a few hours.
				2. Tell the caller to call and let you know if they do not get a call back
				3. Give the note to the doctor or one of their nurses personally and advise of the urgency level.
				4. DO NOT PUT THESE NOTES IN BOXES OR ON DESKTOPS OR ADD THEM TO PILES OF CHARTS!!!
			2. Need an answer today
				1. These can go into boxes of doctors who are actively seeing patients that day
				2. You can use voice mail so the client can give a good description of the issue, but be sure to put a note in the doctor’s box that they have a voice mail. DOCTORS DO NOT CHECK VOICE MAIL DAILY!
				3. Do not use Bon’s box on a day she is working upstairs – please bring messages up to her or try to transfer the call right away.
				4. If the doctor they want to talk to is not working that day, ask if they would prefer to talk to another doctor or wait another day.
			3. No urgency
				1. Voice mail is great here
				2. Message in box is fine
				3. Be sure to tell owners it might be a few days before there is a response.
			4. Always create an MRE to summarize the call and describe how you transferred the message (unless you just hand the call right over to someone else due to urgency.)

**What to do when you don’t know the answer to a question**

 When a client calls, they want the first person they interact with to be the one who can solve all problems. They want confidence from you. This requires tremendous knowledge and it will be impossible to have the confident and correct answer every time. It is essential that you never give out false information – animals can die when you do that. NEVER GUESS! If you find yourself saying “I assume” or “My best guess is” then you are over your head.

 So what do you do when you aren’t certain, or don’t know at all. How can you be the one to have the answers and stay confident. All you have to do is tell the owner with confidence how YOU will get the answer for them…..

 Use the basic line “That is a great question. I will get the answer for you.” Here are some examples:

*Caller:* “My dog just ate some Trumpet Vine. Is that poisonous?”

*You:* “Oh, poor Fluffy! I don’t think I have ever heard of a dog eating Trumpet Vine before. Let me see if I can catch a Dr. and ask them. Would it be okay if I put you on hold for about 5-10 minutes, or would you prefer I called you back?”

*Caller:* “Fido had vaccines at our regular vet in Arizona last month and we were told to get booster shots in 30 days. We are on vacation in your area now and the boosters are due. Can we come in to get them with you today?”

*You:* “We would be happy to help you. That time interval is a new one on me. Would it be okay with you if I called your regular vet office to get more information so we can be sure to set up the proper type of appointment today? I have several openings later this afternoon.”

*Caller:* “Dr. Tao suggested we have Fluffy’s mass removed and we need to make an appointment. First, though, we need to know about how much it will cost.”

*You:* “Of course you should have an estimate before you come in. Would it be okay if I pass your question on to one of our veterinary nursing team members who can put together an accurate estimate based on Dr. Tao’s exam notes? You should have a return call by the end of the day.”