Your Step-by-Step Guide for Making Pet Food Recommendations
Dear colleague,

Hippocrates said, “Let thy food be thy medicine and thy medicine be thy food.”

Just as in human health, nutrition is one of the most important preventive care tools we can use to prevent or manage disease. Of course, these tools are only helpful when professional recommendations are discussed with and followed by the pet owner.

With so many pet food options out there—and the myths that abound—it can be difficult for clients to know where to start. In a 2003 Compliance Study, AAHA found that 90% of pet owners would like to receive a nutritional recommendation from their veterinarian, while only 15% reported receiving one. That’s where veterinary healthcare teams come in.

While conversations about pet food—including hot topics such as brand loyalty, ingredients, cost concerns, and more—can be intimidating, they are critically important to the health of our patients and our relationships with our clients.

According to the AAHA Nutritional Assessment Guidelines for Dogs and Cats, “Good nutrition enhances pets’ quality and quantity of life, and is integral to optimal animal care. Incorporating nutritional assessment into regular animal care is critical for maintaining pets’ health, as well as their response to disease and injury. It requires little to no additional time or cost.”

The guidelines were developed to help veterinary healthcare teams advise clients about the importance of nutrition and how to feed their pets, as well as stress the need to make nutritional recommendations at each and every visit.

Now, this booklet will help you put the guidelines into practice, providing the framework your team needs to start open, honest, and actionable discussions with every client and thoughtful recommendations your clients will follow.

Using a step-by-step process, this guide will help your practice:
• Develop specific roles for each member of the veterinary team
• Discuss pet food options without judgment or debate
• Provide opportunities for education, while still leaving decisions in the client’s hands
• Boost confidence and address client concerns with cost comparison formulas
• Ask questions that keep conversations focused, directed, and nonconfrontational
• Document the details of each conversation and provide appropriate follow-up

These important conversations provide invaluable benefits to our patients, clients, and healthcare teams. Thank you for taking the time to read this educational booklet and make nutrition an integral part of your daily practice.

Michael T. Cavanaugh, DVM, DABVP C/F (Emeritus)
AAHA Chief Executive Officer
Your Step-by-Step Guide for Making Pet Food Recommendations

AAHA Nutritional Assessment Guidelines for Dogs and Cats provides direction for making nutrition a cornerstone of lifelong pet care. The goals include knowing what each of your patients eats (and why) and then making clear pet food recommendations for each one, based on the patient’s current clinical status.

Just as with other vital signs, veterinary teams should document nutritional information and conversations at every wellness exam or sick-pet exam. Medical records, therefore, should include a patient’s weight, body condition score, muscle condition score, and notes about the patient’s current food.

Taking these steps gives you a way to monitor clinical trends and gain insights into how this particular client approaches pet food. If the answer to “What do you feed?” is different every time you ask, that’s a concern to discuss. Is there a reason for frequent changes? Or is it simply change for change’s sake? For instance, frequent food changes also might become more common as Millennial pet owners, with less brand loyalty, are much more likely to have tried a new pet food in the past month.¹ (See page 14 for more insights into generational differences and pet food.)

AAHA’s 2003 Compliance Study found that 90 percent of pet owners would like to receive a nutritional recommendation, while only 15 percent reported receiving one.

Yet, there remains angst among veterinary professionals about discussing pet food. The reluctance may stem from feeling unprepared. For some, it may also come from personal frustration with clients’ objections.

Take heart. This guide gives practical ideas for making clear and effective pet food recommendations without having to refute every wild idea about pet nutrition. Inside, you won’t find advice on arguing. Instead, you’ll find ideas on using good listening and communication skills, along with targeted education strategies, to avoid heated situations or to transition the conversation while:

- Maintaining good client relationships
- Making a food recommendation
- Putting the pet food choice squarely in clients’ hands

Each time you make an actionable recommendation, clients are in the position to make decisions about the nutritional care of their pets. There are five important steps to take to help improve your pet food recommendations for clients.

Step 1: Get your whole practice team involved.
Step 2: Set expectations and build confidence.
Step 3: Have the conversation.
Step 4: Make a pet food recommendation.
Step 5: Chart it and track progress.

Over time, actionable conversations about pet food can change behavior. Maybe not overnight. Maybe not with every client. However, if your practice team follows the steps in this guide as part of daily practice, the nutritional care of many patients will improve.

Teamwork throughout the practice maximizes the effectiveness of pet food recommendations. Setting up systems to make, reinforce, remind, and follow up on nutritional recommendations ensures consistency.

These systems help provide structure for gathering critical nutrition-related information about every patient and for creating more opportunities to make strong recommendations regarding pet food.

Clients enjoy different kinds of relationships with different veterinary team members. In many cases, the conversations between veterinarians and clients will differ from those between veterinary technicians and clients or front-desk staff and clients. In each encounter, each team member needs to fill a specific role that supports pet food recommendations made in the exam room.

Involving everyone on your team in creating protocols for implementing nutritional guidelines in everyday practice. Ask yourselves these questions:

- What is my role, and what are my responsibilities around nutritional recommendations?
- How do I make the team stronger?
- How and when should I engage with our clients about pet food?
- How can I encourage and support our clients?

In addition, discuss ways team members might accidentally undermine recommendations in conversations with clients about pet food. For example, a team member might recommend an over-the-counter (OTC) food, supplement, or even home remedy if a client balks about a food recommendation after leaving the exam room. In another instance, a client might see the total dollar amount at checkout and decide not to purchase the recommended food. Both situations effectively negate the veterinarian’s treatment plan.

In this second scenario, instead of adjusting the invoice and sending clients on their way without the recommended food, a better response would be to reply, “Let me check with the veterinarian about this.” In the ideal world, the client would go back into an exam room for a second conversation with a veterinarian about the food recommendation, but if that’s not possible, the refusal should be noted and the chart added to the veterinarian’s call-back pile to continue the conversation.

Veterinarians need to know right away if clients refuse to purchase the food after having agreed to do so in the exam room. Pets’ health can be at stake in some situations if the recommended food is not started soon. Ultimately, it’s the client’s decision, but if pets end up in an acute medical situation because they didn’t eat the recommended food, it shouldn’t be because a veterinary team member inadvertently encouraged the refusal.

Follow-Ups Matter

Different follow-up calls can come at various times from people in various roles:

- 2-3 days: Veterinarian
- 2-3 weeks: Veterinary technician
- 2-3 months or typical reorder periods: Receptionist or veterinary assistant

You'll likely have different goals for later follow-up calls, but in the early days after a food transition, be sure to:

- Ask how the patient is doing.
  - How did the transition go?
  - Is he/she eating the food well?
  - What changes have you noticed?
- Ask clients if they have any questions.
- Thank clients for feeding the recommended food.
- Empathize and talk clients through any struggles they’re having with the pet/food.
- Recommend that clients continue to feed the food.

If the client expresses concern or wants to stop the food, refer the conversation to the veterinarian. In some cases, another food recommendation or additional treatment options may be appropriate.
Nutritional Guidelines: Roles and Responsibilities

Veterinarians
- Meet with vendors to stay informed about new products
- Examine and diagnose patients
- Develop diagnostic and treatment plans
- Discuss nutrition with clients
- Select food to recommend
- Explain benefits of the recommended food
- Answer clients’ questions
- Make initial follow-up calls

Technicians
- Answer questions about recommended food
- Discuss transitioning to new food, including importance of continuous and/or long-term feeding
- Explain how long a bag of food will likely last
- Welcome calls with questions
- Make follow-up calls

Office manager or inventory manager
- Order proper inventory amounts, including rotating stock
- Meet with vendors
- Schedule staff training on nutrition topics
- Schedule staff meetings for creating and conducting training on nutrition protocols

Veterinary assistants and receptionists
- Answer questions about how long a bag of food will likely last
- Explain how and when to reorder
- Schedule recheck appointment
- Reinforce message about continuous and/or long-term feeding
- Make follow-up calls about reorders
- Divert any questions or objections back to the veterinarian or technician

Other kennel staff or on-staff groomers
- Monitor how patients are eating while in their care
- Look for issues with skin and coat conditions or stool quality
- Report any concerns to the veterinarian
When you can speak with authority about how many pounds of food the pet will eat and how those costs play out over time, it can help people begin thinking about pet food costs in a new way.
Veterinarians and practice teams often feel backed into a corner when discussing pet food with clients. When the objections and nutritional myths start flying, it’s no fun for anyone.

Ready to feel better instantly? You do not need to refute every single objection to your pet food recommendations. Educate? Yes. Argue? Probably not. You’ll find reputable resources to share with clients on many hot topics in pet nutrition on page 23. In some cases, how the profession defines quality pet food sits in stark contrast to what some clients may value, and it can be appropriate to point that out.

Once you start tackling points of disagreement, though, some discussions can get complicated. It’s probably better to avoid tit-for-tat conversations with clients about pet nutrition if it’s clear that the person holds strong beliefs. Because objections from clients vary from person to person and because the latest evil ingredient changes all the time, you cannot expect to bust those myths and battle your way to an agreement every single time.

It can help to keep in mind that no matter what people say or feed, they do so with good intentions. Always assume:
• Pet owners do what they think is best for their pets.
• Pet owners make decisions about pet food often because someone they like and trust has influenced the decision. (If you criticize the decision, it’s often seen as an insult to that friend as well.)

How Do You Define Pet Food Conversation Success?
If you define success in only yes-or-no terms, you’ll greatly underestimate your accomplishments and undervalue your progress. Redefine your goals as follows:
• **Success means** documenting patients’ weights and body and muscle condition scores at every single visit.
• **Success means** asking and documenting during every exam what patients are being fed.

• **Success means** asking clients if they want to discuss pet food in further detail after you’ve documented a solid food history in the chart. Even when they decline, document it and consider that you performed your duty by simply asking the question.
• **Success means** getting clients to tell you why they feed what they feed, so you’ll better understand their views.
• **Success means** communicating what you thought was best even if you disagree with a client’s reasons for feeding a certain food and make a recommendation the person turns down.
• **Success means** confirming that you agree with what the client is feeding by simply saying, “Keep feeding what you’re feeding.” If the pet is doing well, this is also a form of pet food recommendation and counts as a win.

Ultimately, you want to track the pet food recommendations that you make and that clients agree to as well as their long-term compliance with feeding therapeutic food. However, consistently using the steps outlined in this booklet and doing the work to achieve those results matters too.

Three Quick Calculations to Boost Your Confidence
Being able to quickly estimate how long pet food will last and daily feeding costs can help address clients’ concerns. Clients tend to focus on the immediate cost and not how it averages out over time. When you can speak with authority about how many pounds of food the pet will eat and how those costs play out over time, it can help people begin thinking about pet food costs in a new way.

1. **How much food.** Broadly speaking, pets eat about half of their body weight in dry foods per month and about six times their body weight per year. That means a 20-pound dog eats about 10 pounds of food per month. A 40-pound dog eats about 20 pounds of...
food per month, and so on. Giant breeds will eat a little less than half their body weight per month, while toy breeds will eat slightly more.

You’d never use this method to calculate actual feeding amounts, but it’s a good way to estimate quickly how long a bag of pet food should last.

2. **Daily cost to feed.** The second calculation that comes in handy in pet food conversations with clients figures the incremental cost difference between what the pet currently eats and the food you’re recommending. In this case, let’s assume it’s a therapeutic food.

Using the earlier estimate, the 40-pound dog needs 20 pounds of dry food in a single month.
- Let’s say that a 20-pound bag of therapeutic food costs $45.
- $45 ÷ 30 days = $1.50 daily cost to feed therapeutic food.

Once you can get clients to consider the daily costs of the food you recommend, don’t forget to subtract the daily cost of what the pet is currently eating because that difference is the real answer to how much more or less it will cost the client to feed the food that you’ve recommended.

Using daily cost is much more accurate than trying to compare bag-to-bag or can-to-can costs. Many OTC foods are more expensive than therapeutic foods. Be sure you’re comparing cost per day rather than cost per can or bag as there is a difference, especially because the variances in moisture content can affect how much needs to be fed per meal or per day.

Is there going to be a greater difference between therapeutic foods and so-called grocery store brands? Sure, but in many cases, the “ultra-premium” foods that ingredient-focused clients feed aren’t exactly inexpensive. In many cases, they actually cost more than therapeutic food.

For our example, let’s assume the dog currently eats a moderately priced OTC food that costs $1.15 per day.
- Daily cost to feed therapeutic food - Daily cost to feed current food = Actual cost difference
- $1.50 per day - $1.15 per day = 35 cents more per day to feed therapeutic food

Yes, therapeutic foods can be more expensive than many OTC foods, but especially for cats and smaller dogs, the cost difference is often mere pennies per day. And, even with our larger dog example, a 35-cents-per-day difference should seem like a bargain when you consider how therapeutic foods can often:
- Increase the pet’s quality of life
- Increase the pet’s length of life
- Decrease the family’s veterinary costs
- Decrease the pet’s signs of disease

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3. **Profitability of pet food.** The third calculation that may boost your confidence is knowing how much profit your practice makes from pet food sales. It’s important for your entire practice team to understand that talking about nutrition isn’t causing the practice to lose money and that it isn’t a waste of time.

On average, veterinary practices see about $1.10-$1.25 profit per pound of therapeutic food sold. Since those extra nickels and dimes make the calculations harder to do quickly in your head, let’s round down to a $1.00 per pound.

Next time your team is recommending a therapeutic food, keep that $1.00 per pound in mind. That means a 20-pound bag just added $20 to the practice’s bottom line. And that is just for the first bag! Remember that a 40-pound dog will eat about 240 pounds of food per year, which translates into roughly $240 of profit. In addition to covering the real costs of the time and energy you spend talking about nutrition with clients, that $240 helps cover the costs of all the good you do for pets throughout the year. It isn’t profit purely for profit’s sake. Profit makes your excellent work possible.

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**Formulas for Calculating Costs**

**How Much Pets Eat**

These rough calculations work for both dogs and cats.

Pet’s weight in pounds × 50% = approximate amount of dry food (in pounds) pet will eat in one month

Pet’s weight in pounds × 6 = approximate amount of dry food (in pounds) pet will eat in one year

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**How Much Pet Food Costs**

Cost of the food pet will eat in one month ÷ 30 days in a month = Cost per day to feed that food

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**Therapeutic Food Cost Comparison**

Don’t forget to subtract the daily cost of the pet’s current food.

Daily cost to feed therapeutic food – Daily cost to feed the current food = Actual daily cost difference
As your practice team commits to starting pet food conversations about each patient at each visit, it helps to follow a specific interview structure to keep the conversation focused, directed, and non-confrontational from start to finish.

While it may seem more efficient to ask yes-or-no or other closed questions, especially with your chattier clients, you'll get much more useful information from asking open-ended questions. Open questions give you more opportunities to:

- Learn what clients feed and why
- Watch for nonverbal cues that signal comfort or discomfort with the conversation
- Listen for feelings behind the words
- Paraphrase and reflect back what you’re hearing

**Question 1:** What are you currently feeding [pet’s name]? How would you instruct someone to feed [pet’s name] if you were going on vacation?

Keep asking follow-up questions until you get a specific answer—not just a company or brand name but a specific product name.

**Step 3:** Have the conversation.
Ask additional questions if the client doesn’t automatically offer details, such as:
- Whether the pet has free access to food or if the pet eats specific meals
- How much the pet eats, including if the food is specifically measured
- Any other foods the pet eats as well (canned, human foods, and such)
- What treats the pet also receives regularly (and how often)

No matter what the client says, reply with something like “Great!” or “Thanks for sharing those details.”

Once you’ve made clinical notes about the patient’s weight, body and muscle condition, and current pet food, you can approach the rest of the conversation like an interview with the following goals:
- Asking permission to discuss pet food in greater detail
- Understanding why the client chooses to feed this particular food
- Preparing to make a different pet food recommendation, if necessary

This process also gives clients the opportunity to share any misgivings they may have about pet food advice they’ve received, including from breeders. In some cases, it might be a relief to have different advice to follow.

**Question 2:** I’d like to talk more about what you’re feeding [pet’s name]. Is that okay with you?
Essentially, you’re looking for permission to have a deeper conversation. Many clients will say, “Sure.” Others may seem less open. If you sense any hesitancy at all, that’s your first indication to tread lightly.

If the client says, “No, thanks,” leave it at that, but document it in the patient’s chart: Offered to discuss nutrition. Client declined.

**Question 3:** Why do you feed this specific food? Is there a particular feature or reason you choose it for [pet’s name]?
Next, you want to know the specific reasons, issues, or preferences the client has about this food, or perhaps if they just fell into a certain food. Often this part of the conversation uncovers if the client feels an aversion to any ingredients, manufacturers, or brands and why. How you ask this question will depend upon your own personal communication style as well as the depth and longevity of your relationship with this client.

Use reflective listening to confirm and clarify any statements or concerns about specific ingredients like corn, by-products, meat meals, etc., then say, “Tell me more about your feelings about corn and by-products.”
Once you’ve documented the patient’s food-related vitals, including asking what the patient currently eats, ask questions and listen for answers that drive the next step.

<table>
<thead>
<tr>
<th>Yes</th>
<th>Ask why the client likes that food.</th>
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<tr>
<td>“Why do you feed this specific food? Is there a particular feature or reason you choose it for [patient’s name]?”</td>
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| No | Fine. Document in the chart that you offered and the client declined, and move on to your next topic. |

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<th>Do you agree with what the patient is eating? Is the patient healthy?</th>
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<tr>
<td>Yes</td>
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<tr>
<td>“[Patient] is healthy and happy, and his/her weight looks good. Great work! Keep doing what you’re doing.”</td>
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| No | Discuss feeding plans and any necessary follow-up. |
| “If this were my pet, I would consider feeding [specific food] and here’s why … Let’s try it for 30, 60, or 90 days. Let’s see what happens. Let’s let [patient’s name] respond or not and make our decision based on that.” |

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<th>Does the client seem defensive or argumentative?</th>
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<tr>
<td>Yes</td>
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<tr>
<td>“I understand that you have concern about [pet’s name] eating corn. Tell me more about that.”</td>
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| No | Then, use a transitional statement to end debate and move to making a recommendation. |
| “Let’s agree to disagree on a couple of those points. If this were my pet, I might consider feeding [specific food] and here’s why. . . . It’s up to you to say yes or no.” |
The client might simply reply, “I’ve heard corn is bad for dogs and cats.” Most clients simply repeat messages heard on television or read on the internet. Clients don’t typically have strong arguments to support their ingredient aversions.

On the other hand, you will sometimes run into people who will give you a personal dissertation about the subject.

Either way, these answers tell you how attached they are to the current food and how to proceed with the conversation. As you listen and reflect back what you’re hearing, you’re building rapport and a comfortable framework for having productive conversations, which builds trust over time.

Remember, clients feed what they feed because they believe it’s the best thing for their pet, and you do not want to get into a tit-for-tat argument, even if you disagree. There will be times, however, when you can share a few counter points. If you hear the same few points from a majority of clients, those are discussion topics for which you can formulate and practice concise, informative responses. Test out a few and see which ones work best for you and your clients. Offer a few resources for clients to review at home, when helpful.

Even if you plan to make a counter point, confirm you understand the client’s point of view by nodding your head. You aren’t agreeing, but you are showing you heard and understand the client’s concern.

If clients express aversions to specific ingredients or are set on food including other specific ingredients, you can assume they have been listening to marketing messages meant to create doubt about other pet foods or pet food companies. In these cases, take the opportunity to educate clients on how to recognize marketing spin when they see it.

If the conversation starts to feel argumentative, it probably is. There will be times when you’ll need to agree to disagree on certain points. In those cases, if the patient is doing well on the current food, then you can simply transition out of the conversation with something like this: “We might not agree on a few of these points, but let’s agree on this. We’re going to talk about nutrition every time you come in, and if I see something medically wrong with [pet’s name] that I think a different food is going to help, I’m going to make that recommendation. At that point, it’ll be up to you to make the final decision about [pet’s name]’s health.”

You’ll never win over some people, and that’s okay. Channel your nutritional counseling energies into new clients or existing clients with new puppies and kittens, so that they understand right away that you’re always going to ask about food and make recommendations you think are best.

As you listen and reflect back what you’re hearing, you’re building rapport and a comfortable framework for having productive conversations, which builds trust over time.
Generational Differences in Attitudes Toward Pet Food

In March 2016, Packaged Facts published a report called “Millennials as Pet Market Consumers.” It reveals several key insights into what Millennial pet owners (current ages 18–35) value in pet food compared to their Gen X and Baby Boomer counterparts. Millennials are:

- Less concerned about brand loyalty and are far more likely to have tried a new brand of dog food in the past 30 days
- Much more likely to read ingredient lists of pet food products
- Much more likely to consider pet food contamination or product safety in the dry dog foods they buy
- More likely to prefer raw diets to avoid conventionally processed pet foods
- More likely to view dog treats as providing nutritional benefits for their dogs
- Significantly more likely to be price sensitive—looking for lower prices, special offers, and sales (using QR code scans and mobile price-checking apps, but not really interested in using coupons)
- Much more likely to be concerned about the impact of pet food packaging on the environment

The most promising data from this report is that younger pet owners are much more open to trying a new pet food, but you might have only a month or so to convince them it’s working before they move on to something else. Older clients, on the other hand, are more likely to be loyal to a specific brand. That said, older clients also tend to be more loyal to a veterinary practice or specific veterinarian.
Why We Ask About Your Pet’s Diet

You know the saying “You are what you eat?”
It’s true for pets too.
That’s why we ask about your pet’s food.
Do you have questions about pet food?
We’re happy to help with answers and resources.

Ask any time!
In the 2003 Compliance Study, AAHA found that only 7 percent of pets that could benefit from being fed a therapeutic food actually were on a therapeutic food regimen. In addition, the study found that 90 percent of pet owners would like to receive a nutritional recommendation, while only 15 percent reported receiving one.

This disconnect likely comes from miscommunication. When you make pet food recommendations for either overall wellness or to address an active clinical issue, find a way to be authentic to your own communication style. Also, find a comfortable level of directness about your food recommendations. These examples are quite direct. You might phrase it a little differently:

- **Wellness food:** “If this were my pet, I would feed [specific food] and here’s why…”
- **Therapeutic food:** “If this were my pet, I would feed [therapeutic food]. There is nothing out there that will do what this food will do…”

The next step in the pet food discussion involves determining if clients are willing to try another food at all, if it’s in their pet’s best interest and even if the food features an ingredient or two from their “no feed” list.

If the earlier discussion uncovered any points of dissent, focus the conversation on nutrients rather than ingredients:

“[Patient’s name] needs a food that is high in XYZ and low in ABC. This will help to do DEF and bring GHI under control.”

In some cases, you can explain how the food you recommend includes nutrients that provide the same outcome the clients want from the food they already feed:

“[Patient’s name]’s coat does look shiny. This food I’m recommending contains high levels of fatty acids that can provide that same benefit.”

The goal is to get clients to try the recommended food and see how the pet responds:

“How would you feel about trying it for 30, 60, or 90 days? We can see what happens and make our decision based on that.”

If the client repeats an ingredient objection, such as saying, “Well I’m okay with that if it doesn’t have any XYZ in it,” respond as follows, “I certainly understand how you feel about XYZ. I don’t know of any product
off the top of my head that will provide the benefits that [patient's name] needs with the ingredient preferences that you are looking for, but I’ll do my best in the next 30 to 60 days to see if I can find another food that might give you what you are looking for. And maybe you could do a little looking around as well. In the meantime, let's feed [recommended food]. How does that sound?"

Situations like this present the perfect opportunity to educate clients about evaluating pet food by recommending resources available online from organizations such as the World Small Animal Veterinary Association. (See a list of such resources on page 23.)

The reality is that you probably won't be able to find another food that meets the patient’s clinical needs and the client’s preferences, but if you do, then you’ve built goodwill and can compare the results of the two foods.

If you cannot find another food, then you'll need to revisit the topic at recheck. Ask, “So tell me how [pet’s name] is doing.” If improved, then say, “That’s really great to hear. So, you remember I promised to look around to see if I could find any other foods that might be appropriate. I did/didn’t find anything. Did you have any luck?”

In most instances, the client will not have had any more success than you did, so it’s time to suggest the patient continue to eat the recommended food: “So how would you feel about leaving [pet’s name] on [therapeutic food] for an extended amount of time?”

Ideally, the pet owner agrees that the pet is doing better (certainly not worse) on your recommended food. In many cases, you’ll have diagnostic or clinical measurements as well.

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2. Veterinary values list based upon “WSAVA Global Nutrition Committee: Recommendations on Selecting Pet Foods.”
The challenge with getting patients who need them onto therapeutic foods is keeping them on those therapeutic foods if they require long-term or life-long use.

When clients treat therapeutic foods as temporary interventions, they put both their pets and their pet-care budget in danger. In many cases, there’s going to come a time when declines in the pet’s quality of life, the emotional stress on the client, and the financial toll of regularly getting into an acute medical situation is just too much.

Here is one example, but you could easily make a similar case for other therapeutic foods and conditions.

Kidney Disease Scenario 1 (Non-compliant pet owner)
• Cat hospitalized for acute kidney disease (dehydrated, anorexic, lethargic).
• Cat goes home with kidney therapeutic food (10-pound bag for a 10-pound cat—lasts two months) and improves.
• Cat goes off therapeutic food. (Pet owner may think their cat is cured!)
• Cat hospitalized again.
• Cat goes home with kidney therapeutic food and improves.
• Cat goes off therapeutic food. (Pet owner may think OTC food is just as good.)
• Cat returns in acute renal failure and is euthanized.

Kidney Disease Scenario 2 (Compliant pet owner)
• Routine bloodwork shows signs of early kidney disease in cat.
• Cat goes home with kidney therapeutic food.
• Cat’s regular rechecks and bloodwork look good. Values hold steady.
• Cat owner returns regularly to repurchase the pet’s proper renal-friendly food.
• Cat continues to do well, with no kidney-related dramatic episodes, and remains a patient of the practice.
Because therapeutic foods are different from OTC foods, it’s important that clients understand the possible consequences to a pet’s health and their pet-care budget if they stop feeding the food entirely or feed it only when the pet’s condition worsens. This roller coaster effect has the potential to hasten the decline of the pet’s quality of life and even shorten the pet’s life. It’s also probably more expensive for the family emotionally and financially to keep facing acute medical crises.

Making reorders as convenient as possible can help improve these long-term compliance stats. Options include:

- Running credit card payments for food on the phone so that clients can simply grab food in a designated “will call” area in the lobby
- Hiring a driver to make home deliveries
- Setting up an online ordering option through one of the services specifically designed for veterinary practices

Auto-ship remains one of the most powerful tools in the online pet food order and delivery world. Pet owners like the convenience of home delivery. When one of the very first online OTC pet food sites changed its online ordering systems in 2016, the company had to ask customers to recommit to their current orders, and 98 percent of auto-ship customers specifically chose to continue using auto-ship.4

Auto-ship is popular for therapeutic foods as well, with 62 percent of orders fulfilled by one of the larger providers of e-commerce done via auto-ship.5

Even offering an online ordering option to clients greatly improves therapeutic compliance.
Step 5: Chart it and track progress.

Medical history and documentation is paramount. If it isn’t documented in the chart, it didn’t happen—legally and otherwise.

Once your practice team commits to asking about a patient’s nutrition at every visit, put a system in place to document the details. Think of nutrition as another vital sign inclusive of weight, body and muscle condition scores, and current food.

Include making a food recommendation as part of your routine process. Remember, if you are happy with a client’s pet food choice and the patient is doing well medically and otherwise, then even saying, “Keep doing what you’re doing,” is itself a food recommendation. Clients work hard to do the right thing. A little encouragement and affirmation goes a long way.

If the weight on the scale, your assessment of body condition and muscle condition scores, or current food causes concern, then an extended evaluation may be needed. In addition to the reason for the patient’s visit or other clinical findings, keep these nutrition-related risk factors in mind:

- Age
- Activity level
- Diseases and conditions
- Poor skin or coat
- Use of medications and/or dietary supplements

Consider how you might use or adapt these forms and checklists into your own charting efforts for nutritional screenings, extended evaluations, and documentation.
Nutritional Screening Evaluation

The only way to know what each patient eats is to ask. Ask and then document what the patient currently eats. Just as you document vital signs, make exam notes in charts about the patient’s weight and body and muscle condition scores.

Temperature ______________  Pulse ________________  Respiration_______________

Pain _________________________________________________________________________________

Weight _________________  BCS _________________  MCS _____________________

Current Food __________________________________________________________________________

Clinical and Conversation Documentation and Checklist

Nutritional assessment done (weight, BCS, MCS, current food)?

Yes  No

 Asked to discuss pet’s nutrition and needs?

Yes  No

Client agreed to discuss pet food?

Yes  No

Specific nutrition recommendation made?

Yes  No

Recommended: ________________________________________________________________
(This can include praise of current food and reaffirming its use.)

Provided take-home pet food information and resources?

Yes  No

Client purchased recommended food, if different from current?

Yes  No
Focus on Improvement, Not Perfection

It’s important to acknowledge that some clients will never agree to veterinary pet food recommendations, but this should not stop your practice team from having conversations about nutrition. Even when you must agree to disagree, even when the client declines the recommendation, the fact that you had the conversation is still a victory.

Through consistent conversations, you make a statement that nutrition and a healthy weight matters to the wellness and longevity of pets. Goodness knows everyone else is talking to clients about pet food. If you don’t, it leaves a noticeable void that other voices—often less informed—can fill.

Don’t forget to ask your pet food vendors for help with factual information, staff training, and any other needs you have when implementing the nutritional assessment guidelines in daily practice. The reps can share research, materials, and strategies they’ve seen work in other practices.

Learn as much as you can to build your team’s confidence, and then approach these conversations with the goal of maintaining respectful and open relationships, where you can talk with clients, even when you may disagree. Wouldn’t you rather know a patient is eating a raw diet than have the client lie about it or avoid telling you?

You and your team know these individual clients better than anyone. You’ll develop your own rules for when to be more forceful with recommendations and when to back off.
### Additional Resources for Veterinary Teams

<table>
<thead>
<tr>
<th>Resource</th>
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<tr>
<td><strong>AAHA Nutritional Assessment Guidelines for Dogs and Cats</strong></td>
<td><a href="http://www.aaha.org/public_documents/professional/guidelines/nutritionalassessmentguidelines.pdf">www.aaha.org/public_documents/professional/guidelines/nutritionalassessmentguidelines.pdf</a></td>
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<td><strong>The Pet Nutrition Alliance</strong></td>
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<td>- Nutrition Calculator for Adult Dogs (Weight Management Tool)</td>
<td>petnutritionalliance.org/calculator/dog.php</td>
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<tr>
<td>- Nutrition Calculator for Adult Cats (Weight Management Tool)</td>
<td>petnutritionalliance.org/calculator/cat.php</td>
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<tr>
<td>- Veterinary Team Training Materials</td>
<td>petnutritionalliance.org/category/team-training</td>
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<tr>
<td><strong>Every Pet Every Time</strong></td>
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<tr>
<td>- Nutrition Essentials</td>
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<td>- Putting Nutrition into Practice</td>
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<td>- Nutritional Resources</td>
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<td>- 5th Vital Assessment Quick Reference Guide</td>
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<td><strong>World Small Animal Veterinary Association</strong></td>
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<tr>
<td>- Body Condition Score Charts for Dogs and Cats</td>
<td><a href="http://www.wsava.org/nutrition-toolkit">www.wsava.org/nutrition-toolkit</a></td>
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<tr>
<td>- Muscle Condition Score Charts for Dogs and Cats</td>
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<tr>
<td>- Short Diet History Form</td>
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<td>- Nutritional Assessment Checklist</td>
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<td>- The Feeding Guide for Hospitalized Dogs and Cats</td>
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### Additional Resources for Pet Owners

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<td>- The Savvy Cat Owner's Guide to Nutrition on the Internet</td>
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</tr>
<tr>
<td>- The Savvy Dog Owner's Guide to Nutrition on the Internet</td>
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<tr>
<td>- Selecting the Best Food for Your Pet</td>
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<tr>
<td><strong>Pet Nutrition Alliance Controversial and Hot Topics</strong></td>
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<tr>
<td>- How to file a pet food complaint</td>
<td>petnutritionalliance.org/category/controversial-and-hot-topics</td>
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<tr>
<td>- Cats and carbohydrates</td>
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<td>- Grains in pet food</td>
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<td>- Corn in pet food</td>
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<td><strong>Petfoodology Blog from Clinical Nutrition Services at Tufts University</strong></td>
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<tr>
<td>- How therapeutic diets are different</td>
<td>vetnutrition.tufts.edu/petfoodology</td>
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<td>- Questions to ask about pet food</td>
<td>vetnutrition.tufts.edu/2017/01/therapeutic_diets</td>
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<td>vetnutrition.tufts.edu/2016/12/questions-you-should-be-asking-about-your-pets-food</td>
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Hill’s Pet Nutrition Inc. is committed to making nutrition the cornerstone of veterinary medicine. Founded more than 75 years ago with an unwavering commitment to pet nutrition, Hill’s mission is to help enrich and lengthen the special relationships between people and their pets. Dedicated to pioneering research and groundbreaking nutrition for dogs and cats based on a scientific understanding of their specific needs, Hill’s operates based on the philosophy that all animals should be loved and cared for during their lifetimes. To learn more about Hill’s, visit www.hillspet.com.

The American Animal Hospital Association is an international organization of nearly 6,000 veterinary care teams comprising more than 48,000 veterinary professionals committed to excellence in companion animal care. Established in 1933, AAHA is recognized for its leadership in the profession, its high standards for pet health care, and, most important, its accreditation of companion animal practices. For more information about AAHA, visit aaha.org.