Dear Colleague:

Every patient exam includes a recording of four vital assessments: temperature, pulse, respiration and pain. Unfortunately, nutrition—something that can impact a pet’s health tremendously—is often overlooked during these routine exams. In a 2003 Compliance Study, AAHA found that only 7% of pets that could benefit from a therapeutic food were actually on such a regimen, and that 90% of pet owners would like to receive a nutritional recommendation, while only 15% perceive actually receiving one.

Veterinary teams have a responsibility to inform clients about the importance of nutrition on the health of their pets. Nutrition must be an essential assessment, the fifth vital assessment. That’s why AAHA is proud to collaborate with Hill’s to bring readers a special section in Trends magazine about the importance of making nutrition recommendations to clients. The goal with these special inserts is to provide information to help members make a specific nutritional recommendation for every pet, every time. Watch for two more sections in upcoming issues of Trends.

According to the AAHA Nutritional Assessment Guidelines, “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 U.S. Food and Drug Administration recently praised AAHA for the development of the AAHA Nutritional Assessment Guidelines in its article, “Helping Pets Live Healthier, Thinner Lives: AAHA Nutritional Assessment Guidelines.” The article stated that obesity in pets is growing, just as it is with people. The AAHA Guidelines give veterinarians and their staff a no-cost, quick way to obtain crucial nutrition information for pets.

Thank you for taking the time to read this important special section of Trends magazine. By making nutrition the fifth vital assessment, together we can make a difference in the lives of our pets.

Michael T. Cavanaugh, DVM
AAHA Executive Director and Chief Executive Officer
Why Nutrition Matters: Quality Medical Care

**IT IS WELL ACCEPTED THAT** individual health is influenced on a daily basis by three factors: environment, genetics and nutrition. Hippocrates recognized the contribution that diet makes to wellness when he said, “Food should be our medicine and medicine should be our food.” Twenty-five centuries after the age of Hippocrates, there is now a clear trend in veterinary medicine to give nutrition a more prominent role in clinical practice. This is reflected by the recent publication of the AAHA Nutritional Assessment Guidelines and the AAHA-AVMA Preventive Healthcare Guidelines. Additionally, a growing number of practices now consider nutrition to be the “fifth vital assessment” (5VA).

Veterinarians increasingly recognize that nutrition is a force-multiplier that enhances the patient’s health through all life stages, maintains pet quality of life, provides therapeutic support following disease or injury and elevates the overall quality of veterinary practice.

Importantly, AAHA acknowledges that incorporating nutritional assessment into regular veterinary care requires little or no additional time or cost. Veterinarians who make nutrition a core competency for their practice consistently focus on individualized nutritional assessment and specific dietary recommendations as opposed to a one-size-fits-all approach. Moreover, these practitioners emphasize sound nutrition at all life stages of their patients.

Making dietary recommendations patient-specific for the lifetime of the pet is consistent with practicing good medicine. This is an approach that also meets clients’ expectations.

**Making nutrition pet-specific**

The AAHA-AVMA Preventive Healthcare Guidelines are clear: During the physical exam, every dog and cat should routinely receive a nutritional assessment and a specific dietary recommendation as part of its wellness or therapeutic plan. Inherent in this guidance is that each patient should be individually evaluated for nutritional risk factors as determined by age, activity level, lifestyle, body weight and condition, medical history, underlying morbidities, current medications and diet.

AAHA and Hill’s Pet Nutrition have collaborated on extensive market research, including on-site interviews, directed at veterinarians who actively promote pet nutrition in their practices. Results indicate that a customized, written protocol for nutritional
assessment may be the most important success factor for incorporating individualized nutritional assessment into the practice culture. A sample nutritional assessment protocol developed by the Pet Nutrition Alliance is available online and is specifically designed to implement the AAHA Nutritional Assessment Guidelines. Click on the Resources tab at the PNA site (http://petnutritionalliance.org).

Meeting client expectations
AAHA compliance data indicate that 90% of pet owners would welcome a nutritional evaluation of their pets, but only 15% recall having received one. Furthermore, compliance surveys have shown that only a small minority of dogs and cats receive therapeutic diets or dietary supplements that may be of benefit based on their diagnosed health status.

All evidence suggests that there is a sizeable opportunity in the delivery of dietary expertise by veterinarians to their clients. This lost opportunity not only deprives patients of an important component of professional veterinary care, but also drives pet owners to other, less-reliable sources of dietary information. By making a specific dietary recommendation for every pet at every visit, veterinarians are meeting the needs of their patients as well as strengthening relationships with their clients.

Nutrigenomics: A new frontier in pet nutrition
Nutrigenomics is a newly emerging field that allows veterinarians as never before to deliver pet nutrition targeted for specific indications. Nutrigenomics measures gene expression in response to specific dietary nutrients. Animal nutrition scientists at the University of Illinois and elsewhere have evaluated the gene expression profile of dogs and cats at different life stages and disease states.

Wayne Carter, DVM, PhD, Dipl ACVIM, former vice president of global research at Hill’s Pet Nutrition Center, has directed studies that determine how diets specific for osteoarthritis, excessive weight and gastrointestinal inflammation alter gene expression patterns in dogs and cats.

“With this technology, we can measure how diet affects gene expression for conditions such as inflammation, immune dysfunction and degenerative processes,” he explains. “For example, we confirmed that omega-3 fatty acids down-regulate genes responsible for cartilage destruction and inflammation. We also demonstrated that certain nutrients reduce gene expression associated with obesity.”

Using the nutrigenomics model, Hill’s so far has developed commercial diets for canine obesity and osteoarthritis.

Carter notes that the gene expression profiles for dogs and cats are markedly different, even for the same disease. “Our gene expression studies have demonstrated that arthritis in cats is a very different disease from that in dogs.” He adds that practitioner feedback on nutrigenomics-based pet foods has been very positive.
Dietary management epitomizes preventive medicine, promotes the well-being of patients, provides therapeutic support and contributes to client satisfaction.

“Veterinarians learn relatively little about nutrition in veterinary school. We have found that they’re very interested in the connection between nutrition and gene expression and the way in which the nutrigenomics approach can upgrade their dietary recommendations.”

A clinical success story
Dawn Brooks, DVM, a veterinarian at the AAHA-accredited Countryside Animal Hospital, in Chelmsford, Mass., champions the role of nutrition in pet health and therapy. Her practice places strong emphasis on pet nutrition, applying the principles developed by AAHA to make nutrition the fifth vital assessment.1,3,7 “Most veterinarians prefer not to sell or promote food,” she says. “They feel like they’re endorsing a commercial product, not practicing medicine. Human medicine overtly recognizes the connection between diet and health, and the importance of making good food choices. Thanks to programs like 5VA [Fifth Vital Assessment] and the availability of research-based pet foods, our profession is starting to think about pet nutrition in earnest and to make it part of their standard of care.”

Brooks points out that starting dogs and cats on an evidence-based formulated diet early in life is a form of preventive medicine that is always cost-effective in the long run for the pet owner. “We recommend dental diets at an early age that can minimize periodontal disease and diets for cats that prevent urinary tract disease,” she says. “If a preventive diet can prevent bladder surgery in a cat, it can save the client well over a thousand dollars.”

Improving pet health, strengthening client relationships
Making pet nutrition part of a practice’s culture is noteworthy because it serves the practice on multiple levels. Dietary management epitomizes preventive medicine, promotes the well-being of patients, provides therapeutic support and contributes to client satisfaction. In Brooks’ words, “We educate almost every client on pet nutrition and recommend a specific diet for each patient’s circumstances. All eight veterinarians in our practice share the conviction that nutrition is the foundation for pet well-being.”

REFERENCES
What I Wish My Veterinarian Would Have Told Me

by Lisa Sigler

At our recent check-up with our veterinarian, I was delivered somewhat surprising news about my third child, our yellow lab mix named Lady. “She is at least 10 pounds overweight and it needs to come off. What do you feed her?” asked my veterinarian.

Well, like most girls, I was offended by being told Lady was overweight, but after I swallowed my pride, I told her she was on a holistic dog food that was very high in protein. After all, we are bombarded with information that carbs are bad for people, so I just assumed they were bad for dogs. I mean they are carnivores, aren’t they? Descendants of wolves?

My veterinarian told me that food was fine, just cut back on the amount. But after Lady’s blood work revealed her kidney function was a little funky, the second bit of advice I got was to stop feeding high-protein food and go to higher carbs/lower protein.

“But isn’t that going to keep her fat?” I protested. “No, just feed her less,” was my veterinarian’s response.

It’s confusing, to say the least. But I went to my local pet supply store and wandered the many aisles of dog foods, reading labels for 45 minutes, which I don’t have time to do. I need more advice than “feed her less.” What I really wanted my veterinarian to tell me was what I should be feeding my dog—what brand, how much, how often, etc. The choices are overwhelming: organic, high protein, no grain, whole grain, raw, white fish, salmon, buffalo, elk, chicken, etc. I’m certain other pet owners are struggling with how to make the right choice.

And that’s the thing. We want to make the right choice. Our dog is a member of our family. We want to her to be healthy and live as long as possible. Veterinarians need to understand that their clients are busy and confused by all the information that’s out there and the many varieties of food to pick from. I want my veterinarian to take the time to help me determine what’s the best food and feeding routine for my pet.

I finally selected a food that seems to be working. Lady has lost four pounds and feels great. Her collar is looser too. But I hope the next time I need to make a choice about Lady’s care, I get more concrete advice.

Lisa Sigler owns Sigler Communications, Inc., a Denver public relations firm that has done work for AAHA, ACVIM, ACVS and many human healthcare organizations. Lady is her fourth lab and the love of her life.
Making a Specific Dietary Recommendation: How You Do It Is Critical

**THE KEY TO MAKING NUTRITION** an integral part of a pet’s healthcare plan is to give a nutritional assessment at each exam, followed by a specific dietary recommendation.

However, as any veterinarian will attest, this is only half the battle. In order for the pet to receive the care the veterinary healthcare team recommends, the owner must be in compliance. The good news is, evidence suggests pet owners want a nutritional recommendation even if they don’t always follow through with the advice.

Unfortunately, AAHA surveys indicate that pet owner compliance in general is notoriously low. In the case of canine and feline therapeutic diets, pet owners comply with veterinarians’ recommendations less than 15% of the time!

Fortunately, pet owner acceptance of your dietary recommendations can be greatly improved by following some proven principles. These include making the dietary recommendation specific for the individual patient, using techniques that reinforce your recommendation and engaging in active communication about the practice’s approach to nutrition, both within the healthcare team and with the client.

**Recommendations should be individualized**

A one-size-fits-all approach to making dietary recommendations gives the impression that nutrition has a secondary role in the practice’s healthcare philosophy. Suggesting one or two brand-name pet foods as default diets is contrary to making a specific, individualized dietary recommendation.

In contrast, a patient-specific approach begins with a nutritional evaluation of the animal at every exam opportunity. Obtaining information such as the pet’s nutritional history and food preferences; eating habits, including consumption of table scraps; body weight and condition; and activity level and mobility will provide a clinical basis for the specific dietary recommendation. Presence of underlying or chronic disease conditions will further identify the need for nutritional support.

The recently published **AAHA Nutritional Assessment Guidelines** (http://tiny.cc/mep7fw) were written by pet nutrition experts. The Guidelines provide practitioners with a definitive resource for making a sound, evidence-based nutritional assessment and specific dietary recommendation for canine and feline patients.

**Tips for ensuring compliance**

Once a nutritional assessment has been made, you are in a position to make a clinically based dietary recommendation. Several simple techniques will encourage pet-owner compliance with your professional advice. They all rely on what Jason Coe, DVM, PhD, calls the “seven-times rule.” Coe is assistant professor and Nestlé Purina PetCare Canada Chair in Communication, Ontario Veterinary College, University of Guelph, Ontario, Canada.

“On average,” he says, “a person needs to hear something seven
LISTEN UP! Good listening skills improve compliance.

You’ve completed the nutritional assessment for a patient and you’ve determined that this five-year-old, overweight dog is better off eating a proper diet for its age, weight, health status and lifestyle. You’ve made your specific dietary recommendation.

How can you know the client has understood?

Carolyn Shadle, PhD, and John Meyer, PhD, co-founders of ICS Workplace Communications and co-authors of Communication Case Studies: Building Interpersonal Skills in the Veterinary Practice (AAHA Press, 2011), say what you tell your clients is only half the equation. The other vital part of effective communication is listening to how your client responds.

Following are their tips for improving your listening skills to make sure your clients understand the importance of proper nutrition.

1. **Mouth shut, ears and eyes open.** You can’t hear without being silent. Keep your eyes on your client’s eyes and focus on him or her, not on what you’re going to say next.

2. **Watch nonverbal cues.** Pay attention to your client’s body language and to your own. Watch his/her face for signs of concern or confusion. Leaning forward as you speak is another way to signal to your client that you are open to any response (question, concern, confusion).

3. **“Listen” for the feelings behind the words.** Consider the words you’ve heard in the context of former conversations or other client behavior you’ve observed.

4. **Paraphrase what he/she said.** When the client is done speaking, now you can break your silence! Say something like, “I believe you said Sparky has difficulty adjusting to a new diet.” This will assure your client that you are listening. It will also be a good way to make sure you have really heard the intended message.

5. **Reflect back the feelings.** You could say something like, “My sense is that you are feeling anxious about changing Sparky’s diet.” Or you could ask, “Are you feeling anxious about Sparky disliking his new food?” Your client will correct you if you’re off target but will appreciate your effort to understand.

6. **Ask your client to paraphrase what you said.** Watch to see if he/she stumbles on technical terms or looks unsure. While you don’t want to “talk down” to your client, remember that he/she is not a veterinary professional. How would you explain your recommendation to someone who has never heard these terms before?

Veterinarians should take every opportunity to restate their recommendations to the client.” Coe’s suggestion can be applied in the following ways:

- Explain the rationale for why a particular diet is recommended; a recommendation that has a medical basis is actually easier to explain and more credible to the client.
- Give the recommendation verbally and in writing, or reinforce it with client literature; retention increases when you use multiple channels to deliver the message.
- Invite any questions the pet owner might have about the recommendation.
- Follow up the recommendation with a phone call or e-mail message to discuss outcomes or answer questions.
- Emphasize client education on how nutrition contributes to pet well-being and longevity.
- Have a healthcare team member assume the role of in-clinic nutrition counselor and champion who is accessible to pet owners and responsive to their questions and concerns.
**WHAT WOULD YOU SAY TO THIS CLIENT?**

Most clients will accept your recommendations about their pet’s nutrition, but some may have questions or concerns. What would you say to help such clients understand your recommendations? Compare your answers to these suggested by Jane Shaw, DVM, PhD, a veterinarian and director of the Argus Institute at Colorado State University, Fort Collins, Colo. The Argus Institute works to strengthen veterinarian-client-patient communication and support relationships between people and their pets.

**Staff training tip:** Cut apart the boxes and use them as a training game at your next staff meeting.

<table>
<thead>
<tr>
<th>What would you say to this client?</th>
<th>What would you say to this client?</th>
</tr>
</thead>
<tbody>
<tr>
<td>That’s my recommendation for feeding your pet. Do you have any questions?</td>
<td>“I’ve been feeding my cat the same food for years. Why do I need to change it now?”</td>
</tr>
<tr>
<td>“No, I think you’ve covered it.”</td>
<td>“Jax has only gained a pound or two. I’m not worried about his weight.”</td>
</tr>
<tr>
<td>“But it makes Molly so happy when I feed her treats!”</td>
<td>“Max is such a fussy eater. What if he doesn’t like the new food?”</td>
</tr>
<tr>
<td>“Isn’t special food more expensive? I’m not sure I can afford it right now.”</td>
<td>“There are a dozen different brands and kinds of food in the store. How do I know which one to choose?”</td>
</tr>
<tr>
<td>“How can Fluffy be gaining weight when I only feed her diet food?”</td>
<td></td>
</tr>
</tbody>
</table>
That’s a great question. As the body changes, **nutritional requirements** change. Would you like to talk more about what X needs at this stage of life?

<table>
<thead>
<tr>
<th>Suggested Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>I can see how Jax’s weight gain seems insignificant to you and me. Having a couple of extra pounds is a bigger deal in relation to his <strong>body weight</strong>. What do you think about that?</td>
</tr>
<tr>
<td>You are so good to Molly and you can still give her treats that are <strong>good for her</strong>—like carrots and green beans.</td>
</tr>
<tr>
<td>The good news is that we have several kinds to choose from [OR there are several kinds to choose from], so we can <strong>find his favorite</strong>. We can start with some samples until we find what he likes!</td>
</tr>
<tr>
<td>It is more expensive and it is an <strong>investment</strong> in keeping him/her healthy for years to come—you are what you eat!</td>
</tr>
<tr>
<td>That is definitely a challenge. Can I make some <strong>recommendations</strong> to guide you?</td>
</tr>
<tr>
<td>That must be frustrating. Can we look at how much Fluffy is eating? Even if it's diet food, if she eats too much, she'll still gain weight. What about <strong>exercise</strong>? Have you noticed any changes with her activity level?</td>
</tr>
</tbody>
</table>

**Nutrition: The First Step in Preventive Care**
Vital role of communication
Coe emphasizes the vital role of both internal and staff-to-client communication in making recommendations that are acted upon by the pet owner. “Internal communication among the healthcare team about the practice’s approach to pet nutrition ensures delivery of consistent messages to clients,” he points out. “Staff training and case rounds are ways of creating a practice culture where pet nutrition is discussed and valued for its role in achieving optimum pet care.”

Coe adds that the best recommendation is one that not only includes a clinical assessment, but also occurs after a dialogue between the clinician and pet owner takes place. Whenever possible, the history-gathering that occurs during the exam should give the veterinarian an understanding of the role that the pet plays in the life of its owner and the setting in which the animal lives. How does the owner interact with the pet? Are there challenges to accepting and implementing your recommendation? What is the pet’s physical environment like?

During this conversation, it is important to call the pet by its name, he notes. “A recommendation then becomes a collaborative outcome based on an understanding of what is important to the owner. A client who is ‘invested’ in your recommendation in this way is much more likely to follow it.”

Bridging a healthcare gap
Survey data indicate that 90% of pet owners want a specific dietary recommendation from their veterinarians, but only 15% recall being given one. This remarkable gap in healthcare delivery encouraged AAHA to develop its 2010 AAHA Nutritional Assessment Guidelines. Realizing the benefits of those Guidelines occurs only if a specific, sound dietary recommendation is made by the veterinarian and acted upon by the pet owner. Ultimately, a client accepts a veterinarian’s recommendation on the basis of trust, and implements the recommendation because it is top-of-mind.

Therefore, the best recommendations are pet-specific and informed by a discussion that invests the pet owner in the recommendation itself. Ideally, the recommendation is given verbally and reinforced in writing and by staff follow-up. A healthcare team with a unified philosophy that advocates nutrition as vital to pet well-being will add further credibility to a specific dietary recommendation.

This comprehensive approach will help ensure that a client will willingly adopt your specific dietary recommendations as part of their pet’s healthcare or treatment plan.

REFERENCES
Deploy Your Team

INFORMATION ABOUT PROPER NUTRITION ISN’T something that should come just from the veterinarian. It takes the whole team to get the message across that proper nutrition is an important part of pet care.

Jason Coe, DVM, PhD, assistant professor and Nestlé Purina PetCare Canada Chair in Communication, Ontario Veterinary College, University of Guelph, Ontario, Canada, points out in the article “Making a Dietary Recommendation: How You Do It is Critical” that it takes repetition of a message before someone hears it.

“On average,” he says, “a person needs to hear something seven times before they’re likely to assimilate the information. Veterinarians should take every opportunity to restate their recommendations to the client.”

But it’s not just the veterinarian. As pages 13–14 show, every member of the veterinary team has an opportunity and the responsibility to reinforce the message about the importance of nutrition.

In fact, every member on the team should be considered a “nutrition champion.” Every veterinary team member should be educated and trained that nutrition is the fifth vital assessment (5VA).

Here are some simple steps you can take to advocate for better nutrition in your practice:

• Schedule a team meeting that will be focused on nutrition’s role in preventive healthcare.
• Develop a written protocol that works for your practice (see the simple 1-2-3 protocol on pages 15–16).
• Explain the recommendations of AAHA, AVMA and the other members of the Pet Nutrition Alliance: Temperature, pulse, respiration, pain and nutrition (TPRPN) should be recorded at every exam.
• Make a nutritional assessment and a specific recommendation for each patient. Every pet. Every time.
• Gain commitment from every team member—everyone needs to support the specific recommendation and provide a consistent message.
• Define the roles and responsibilities of every team member.
• Ensure every team member understands and can communicate about these specific recommendations to clients.
• Empower the team to advocate for the pet and to interact with the pet owner.
• Address questions that your team may have.
ALL PRACTICE TEAM MEMBERS
In a team meeting, discuss the AAHA Nutritional Assessment Guidelines.

Introduce the concepts of 5VA and TPRPN (temperature, pulse, respiration, pain and nutrition).

Clarify team members’ roles.

Discuss ways to educate and motivate clients to participate as your partner in their pets’ care.

Follow the Guidelines with your own pets.

Be a champion of the AAHA Nutritional Assessment Guidelines.

DOCTORS
Discuss the Guidelines at a doctors’ meeting.

Using the model provided, write your practice’s protocol.

Assign responsibilities for completing specific tasks to doctors and technicians.

Determine which tasks and procedures will be performed by technicians and which by doctors. For example, who will review the pet’s history with the client?

In the exam room:
If this is the first time seeing this client, introduce yourself to the client and pet.

Review patient history.

Conduct a complete physical exam.

Complete the nutritional screening assessment while discussing findings with the pet owner. If this was performed by the technician, review those findings.

Communicate the value of the physical exam and the nutritional assessment.

Summarize your findings.

If indicated, explain and then perform the extended nutritional evaluation or schedule this for a later time.

Make specific recommendations and discuss the nutritional plan for the pet.

Make sure everything was understood by your client. Ask, “Have I answered all of your questions?”

Provide indicated educational materials, handouts and resources, including websites.

Discuss the plan and the next visit.

Fully document all steps in the chart.
**PRACTICE MANAGER**

Meet with doctors and technicians to discuss how the nutrition protocol will be used.

Be sure the entire team understands and carries out their roles. Be sure new staff members are familiar with the nutritional assessment protocol.

Maintain an adequate supply of materials required to implement the Guidelines in each exam room and at the reception desk.

Plan team meetings for training and motivation.

File the completed protocol, and schedule periodic reviews/uploads.

Measure results (manually or using practice management software). Tracking and monitoring results can ensure compliance and success.

**CLIENT SERVICE SPECIALISTS**

At check in

If this is a new client or a client you don’t know, welcome him or her and introduce yourself.

Answer the client’s questions, or let the client know who will be able to do so.

Emphasize that regular care promotes the pet’s quality of life and longevity.

At check out

Review procedures that were performed, explaining the value of nutritional management and wellness care.

Again ask, “What are your questions?”

Give clients relevant printed information.

Schedule the next appointment. Ask about reminders: How does the client want to be reminded (e-mail, telephone or postal mail)? Send reminders at appropriate times using the client’s preferred method.

**TECHNICIANS**

In some practices, the technician plays a big part in the office visit. In other practices, the technician plays a very limited part. With either situation, the important thing is that the pet owner receives a consistent message from the entire team.

With doctors, determine which tasks and procedures will be performed by technicians and which by doctors. For example, who will review the pet’s history with the client?

Assuming you are a major client educator:

If this is the first time seeing this client, introduce yourself to the client and pet.

Determine the primary reason for the visit.

Conduct a preliminary exam if that is the standard operating practice. Take a history and do TPRPN.

Once the doctor has completed the exam and given a specific recommendation, review the tests, assessments and procedures that will be performed.

Show and provide to the client the relevant training tools.

Ask, “What are your questions?”

**CLIENT SERVICE SPECIALISTS**

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Schedule the next appointment. Ask about reminders: How does the client want to be reminded (e-mail, telephone or postal mail)? Send reminders at appropriate times using the client’s preferred method.
AAHA Nutritional Assessment Guidelines for Dogs and Cats

Implementing the Guidelines is as Easy as 1-2-3

1 What do the AAHA Guidelines say?

Incorporate a nutritional assessment and specific dietary recommendation in the physical exam for every pet, every time they visit.

It’s as simple as that.

2 What is included in the nutritional assessment?

A. For every patient: do a screening evaluation (nutritional history/activity level, body weight & body/muscle condition score).

B. For a patient with abnormal physical exam findings or nutritional risk factors: do an extended evaluation.

3 How do you incorporate the nutritional assessment within the physical exam?

Screening Evaluation:
- Nutritional history/activity level
- Body weight
- Body/muscle condition score

Normal Physical Exam
No nutritional risk factors identified

Abnormal Physical Exam Findings
or nutritional risk factors identified

Make a specific dietary recommendation

Extended Evaluation

Make a specific dietary recommendation

* Nutritional risk factors:
  - Lifestage considerations
  - Abnormal BCS or MCS
  - Poor skin or hair coat
  - Systemic or dental disease
  - Snacks, table food > 10% of total calories
  - Unconventional diet
  - Gastrointestinal upset
  - Inadequate or inappropriate housing
How to ensure the entire team is working together to implement the Guidelines

**AAHA Nutritional Assessment Guidelines for Dogs and Cats**

How to develop and customize a written protocol that works for your practice

Make a **team commitment** to acknowledge nutrition as a vital assessment and follow the AAHA Nutritional Assessment Guidelines for Dogs and Cats because your patients deserve it.

Together, develop a customized **written protocol** to ensure every patient receives a nutritional assessment and specific dietary recommendation at every visit. (See example on right)

Visit [everypeteverytime.com](http://everypeteverytime.com) to see the full AAHA Guidelines and tips for bringing them to life in your practice.

**Example of a protocol from practices already making nutrition a vital assessment**

<table>
<thead>
<tr>
<th>CHECK IN</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Client fills out nutrition history/update form</td>
<td></td>
</tr>
<tr>
<td>□ Weigh in</td>
<td></td>
</tr>
<tr>
<td>□ Front desk staff places nutrition history/update form in patient’s records</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EXAM ROOM</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Veterinary technician records history using nutrition history form to help ask questions and initiate discussion</td>
<td></td>
</tr>
<tr>
<td>□ Veterinarian performs a physical exam and nutritional assessment</td>
<td></td>
</tr>
<tr>
<td>□ Veterinarian makes a specific nutrition recommendation and documents the recommendation in patient’s records</td>
<td></td>
</tr>
<tr>
<td>□ Veterinary technician fills out travel log, including nutrition recommendation</td>
<td></td>
</tr>
<tr>
<td>□ Veterinary technician asks client if there are any questions and reinforces the recommendation</td>
<td></td>
</tr>
<tr>
<td>□ Veterinary technician dispenses tools (measuring cups, literature about nutrition, information packet)</td>
<td></td>
</tr>
<tr>
<td>□ Veterinary technician sends patient home with an information packet even if they don’t purchase recommended food</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHECK OUT</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Front desk staff asks client again if there are any questions</td>
<td></td>
</tr>
<tr>
<td>□ Front desk staff dispenses food and reinforces recommendation</td>
<td></td>
</tr>
<tr>
<td>□ Front desk staff schedules a callback in 2-7 days if recommendation is for a new food</td>
<td></td>
</tr>
<tr>
<td>□ Front desk staff enters reminder code for re-purchase of food two weeks before food will run out</td>
<td></td>
</tr>
</tbody>
</table>

**“Incorporating a nutritional assessment into the routine examination protocol for every patient is important for maintaining optimal health, as well as the response to disease and injury.”**

Michael Cavanaugh, DVM, DABVP, AAHA Executive Director

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**TIP!**

Download AAHA Tips for Implementing Nutrition as a Vital Assessment in Your Practice under the Resource tab on the Pet Nutrition Alliance website at [http://petnutritionalliance.org](http://petnutritionalliance.org). This booklet provides valuable information for the entire team including success factors and communication tips.
Obesity, Our Greatest Nutritional Challenge

**CANINE AND FELINE OBESITY IN** the United States has a remarkably high prevalence and is a growing trend. Recent studies indicate that the incidence of canine obesity ranges from 22% to 40%, depending on location.  

The Association for Pet Obesity’s fifth annual, 2011 survey found that 53% of adult dogs and 55% of cats were classified as overweight or obese by their veterinarians. 3 That translates to more than 88 million overweight dogs and cats in the United States. Cliff Faver, DVM, president and founder of Animal Health Services in Cave Creek, Ariz., confirms the accuracy of the data.

“Obesity is the leading dietary problem we see in our practice,” he says. “Body condition scoring varies,” he says, “but it’s clear that more than half of the dogs and cats that we see are overweight, and about half of those are obese. It’s a huge problem that will take its toll as these pets age.”

According to Faver, obesity-related hip and back problems are the number one cause of euthanasia in the large-breed dogs seen at his practice. “From that standpoint, obesity is a leading cause of mortality in bigger dogs. If pet overweight and obesity were an infectious disease, we would call it an epidemic.”

No pet health condition places greater emphasis on individualized dietary management than obesity. Diet is the cause of obesity, and its solution.

“When our clients see the results of the weight-loss diets we recommend, they realize how their pets’ obesity has adversely affected the relationship with their animals and how weight loss can give them back the pet they once knew,” Faver says.

**Short-term problem with long-term impact**

Scientific evidence is overwhelming in linking pet obesity to a wide variety of pathologies or negative physiologic effects. These include metabolic disease, endocrinopathies, cardiorespiratory disease, urogenital disorders, cancer, immune-impairment and osteoarthritis. 1

Importantly, longevity is strongly correlated with weight control. Recent studies have found that an energy-restricted diet can increase canine lifespan by nearly two years. 4 Behavioral changes that occur in the overweight animal can directly affect a pet’s relationship with its owner.

Overweight dogs and cats that exhibit weight-related exercise and heat intolerance, lethargy and irritability have less interaction with their owners. Increased

**HOW ONE PRACTICE MAKES NUTRITION A PRIORITY**

At Animal Health Services (AHS) in suburban Phoenix, Ariz., where Cliff Faver, DVM, practices, pet nutrition plays a central role in providing optimum pet care. AHS makes nutritional expertise part of its practice culture in the following ways:

- All nine AHS veterinarians subscribe to the concept of nutrition as the fifth vital assessment in determining optimal pet health. 5

- At each exam, the dog or cat receives a pet-specific dietary recommendation based on its life stage, health and nutritional status.

- The practice has a lay staff person who serves as a nutrition “champion” by counseling clients on proper pet nutrition and diet.

- The AHS website has a “Pet Nutrition Center” link dedicated to science-based information on pet nutrition and diet, including weight-loss diets. 6

- The practice emphasizes continuing staff education on nutrition, including at least five or six staff meetings per year dedicated to sharing relevant case histories and the current information on pet nutrition and diet.
expense and inconvenience of disease management from premature onset of degenerative disease complete the picture of adverse health, social and economic consequences of pet obesity.

A people problem
How do our pets become obese? Pet obesity is a people problem, not a pet problem, Faver explains.

“We love our pets to death. If pets are consistently fed a high-quality diet, they will often self-regulate their own weight. But for many pet owners, love for the animal means feeding them excessively. A pet usually responds with appreciation to over-feeding and with begging behavior when it expects to be fed table scraps. When that happens, its owner feels the animal’s love, and the love-equals-food cycle is perpetuated.”

Faver believes that the best way to show love for pets and enjoy their companionship for their full normal lifespan is to keep them as healthy as possible through proper nutrition. “In that sense, dietary management is a pure form of preventive medicine. Explaining that philosophy to our clients is part of the dietary recommendation we give at every pet examination.”

Nutrition for the obese pet
Nutrition experts agree that a key to treating pet obesity is a weight-reduction protocol using a purposefully formulated diet. This implies restricted fat and energy consumption combined with higher proportions of fiber and protein, and with micronutrient supplementation. The nutritional goal is calorie reduction while maintaining essential nutrient intake.

Science-based weight-reduction pet foods are the best choice in such cases. These differ appreciably from pet foods that meet the Association of American Feed Control Officials (AAFCO) standards for a pet food that supports all life stages, including pregnancy and a puppy’s growth demands. When these nutrient-dense, high-calorie foods are given to any pet, weight control becomes more difficult and weight loss takes longer.

The veterinarians at Faver’s Animal Health Services, an AAHA-accredited practice, are well versed in pet nutrition and embrace their role as nutritional counselors for their clients. Faver agrees that some veterinarians may not want to sell pet food. However, he believes that practitioners have an obligation to understand the principles of good pet nutrition appropriate for all life stages and therapeutic indications.

“Veterinarians don’t have to sell pet food if they don’t want to, but we should all be equipped to make a nutritional evaluation and give a medically sound dietary recommendation,” he says.

This is particularly important in managing the overweight or obese pet. Pet obesity is a medical condition where dietary intervention alone can restore the patient to optimum health.

“We have clients who wrote their pet off as getting old, when in reality they were just overweight and didn’t feel like doing anything,” Faver notes. “When the weight comes off through proper diet, it can transform the animal’s relationship with its owner. One client whose dog went from obese to a normal body weight told me, ‘I’ve got my puppy back.’ We get success stories like that on a regular basis.”

REFERENCES
53% of adult dogs and 55% of adult cats are overweight or obese.

The right diet can help prevent, delay or treat diseases like:
- osteoarthritis in dogs
- urinary tract disease in cats
- periodontal disease in cats and dogs

Proper nutrition is key at every stage of the life cycle.

Proper nutrition is key at every stage of the life cycle.

If a pet loses weight with the proper diet, it can transform the animal’s relationship with its owner.

I’ve got my puppy back.

Nutrition is a force-multiplier that enhances pets’ health and quality of life.

Can save clients in the long run.

part of my wellness or therapeutic plan.

Nutritional Assessment
Specific Dietary Recommendation

2012 Wittmann
Talking to Overweight Clients About Overweight Pets

It takes tact and empathy.

With about 60% of the U.S. population overweight, many clients with overweight pets will be overweight themselves. Counseling overweight clients about getting their pets in shape can be challenging.

“This is always a sticky situation,” said Terri Stone, DVM, owner of the AAHA-accredited Silverlake Animal Hospital, Pearland, Texas. “I tell clients that [having an overweight pet] is very common. I let them know they aren’t the only one with this situation.”

Empathy is vital. “The client probably has heard about losing weight for many years,” said Carolyn C. Shadle, PhD, co-owner of ICS, Inc., La Jolla, Calif., and co-author of Communication Case Studies: Building Interpersonal Skills in the Veterinary Practice (AAHA Press, 2011). “The first thing to do is take some time to smooth things out with a little small talk. Let the client’s emotions calm down. Go through the routine of a check-up and provide facts: ‘This is what your pet weighs, and this is what we want it to be.”

Stone says the key to successful interactions with clients is helping them understand that focusing on their pets’ weight is important for their pets’ health, not an attack on how they care for their animals.

**The F word**

“You don’t want to overwhelm someone,” Stone said, or come across as judgmental, especially if the client is also a little too heavy.

Shadle urges avoiding the word “fat.” If the owner is overweight, commenting on their pet’s weight “can be seen as a criticism of the self,” she said. “You have to be sensitive to how the owner might take any of this.”

Stone says one tack that might work is to suggest aiming for a certain body shape for the animal, instead of a specific weight.

**When the veterinarian has a weight issue**

Discussing a pet’s weight with an overweight client can be even trickier when the veterinarian, technician or other veterinary professional has a weight issue him- or herself. However, the practitioner who knows how it feels to be overweight and has felt pressure to lose weight may have an advantage. Shadle says he or she may be able to share their insights to create a common bond with the client, but a defensive client still could say, “You’re no ‘skinny minnie’ yourself. How dare you suggest anything about weight?”

Stone understands. “Willpower is something I struggle with myself, but we can [still] provide the willpower for our animals,” she said. She tells clients, “If I had someone who would control what I eat, I’d be glad. We can be that person for our pets.”

Shadle suggests using self-deprecating humor. “I’d laugh about it and say, ’I haven’t done a good job with weight control myself, but we’re here about your pet.’”

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Managing Nutrition: Profiles of Success

More Veterinary Hospitals Are Taking a proactive stance and educating their staffs and their clients about animal nutrition. Here are the stories of two such hospitals (both of which are AAHA-accredited) that have established dedicated nutrition centers.

Animal Health Services of Cave Creek
Animal Health Services of Cave Creek, in suburban Phoenix, Ariz., got serious about educating its clients on nutrition about two years ago. Since then, says Practice Manager Rob Graham, CVT, talking to clients about their pets’ food and diets has paid off, both for the animals and the hospital.

“All of our doctors are pretty passionate about it,” says Graham of the nutritional counseling the hospital offers all of its clients. “We’ve pushed it out there and made nutrition our fifth vital assessment.”

Veterinary technicians and the receptionist have been trained on the basics of pet nutrition and the hospital’s chosen therapeutic food, and are encouraged to chat with pet owners before the veterinarian comes into the room. Additionally, clients are offered consultations with the hospital’s full-time nutrition champion, Julie Cordwell.

“Julie is our nutritional advocate,” says Graham. “The doctors can talk about food choices with a client, but they refer them to Julie for weight consultations and to help the client set up an eating protocol.”

Cordwell says such meetings usually go very well. “They come in and sit down with me with their pet, and we talk about the pet. I do an extended nutritional consultation with them; we talk about environmental factors, what’s in the home, who’s there and what other pets are part of the family. I get a real feel for where the client is coming from.”

Graham says he thinks client visits are up, thanks to the nutritional counseling, and food sales are definitely doing well.

“It’s been very successful for us as a profit center,” he says. “We sold more than $200,000 of food last year.” He’s careful to emphasize that hospital staff carefully researched the food they sell. “You need to pick a food, and you need to believe in that food,” he says.
The Business of Nutrition

RIGHT-SIZE YOUR INVENTORY

Don’t order too much
Avoid waste. Freshness matters.
Be sure you have enough space to store what you order.
Don’t tie up cash in inventory.

Don’t order too little
Check stock frequently.
Order weekly.
Don’t run out. Clients are counting on you.

Order just right
It saves time and money.
Experiment with reorder points. Limit orders to once weekly.

Clients who accepted a recommendation for a therapeutic diet, then abandoned the diet because of cost. The real culprit for low pet-food sales: no recommendation or follow-through.

Source: Path to High Quality Care: Practical Tips for Improving Compliance (AAHA Press, 2003)

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YOURSales forecast

It takes a spreadsheet
Quantify sales for the past 12–24 months for cat food, dog food, prescription diets, nonprescription diets and total food sales.

Estimate monthly sales for the next year at three levels: no growth (same as this month last year), flat growth (figure the year-over-year growth in food sales for the last 2 years and apply that rate), and moderate growth (2%).

Track each month’s actual sales against forecast sales.

Create graphs to report progress and motivate staff.

Revise the forecast every two months, based on actual sales.

1.6
Total food income-to-expense ratio, or how many dollars in income are earned for every dollar spent on food

Tip!
Don’t try to match Internet or big-box store prices. Instead, add value with nutritional counseling. Also, investigate partnerships with vendors or distributors to provide clients with online ordering and home delivery.


CAN YOU MAKE MONEY SELLING PET FOOD?

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Brittney Barton, DVM, spends a lot of time talking with clients at East Lake Veterinary Hospital, in Dallas, Texas, about food. She says people want to do the right thing when it comes to their pets’ diets, but simply don’t know how to interpret the nutritional information on the bag.

“We’ve really been pushing nutrition education here for the past five years,” she says. “We teach people what foods do and do not have in them, how to read pet food labels, what the differences are between foods, what’s been subject to a recall and how they can find out about all of this.”

Technicians start the nutritional conversation, and veterinarians review clients’ answers before they go in for an exam. “If we see a nutritional question being answered with something that could be part of the poor health of the animal, we directly address it,” she says.

For the most part, clients are very receptive to the conversations. “A lot of times, they’re educating themselves on the Internet, which can be good or bad. But they want to know as much as they can, and everyone I’ve personally talked with has thanked me.

“I have a lot of clients I see on a repeat basis,” she adds. “I don’t beat them down with it every time they come in, but I do always try to ask what they’re feeding their pets.”

Barton says investing in nutrition has been worthwhile for the hospital. “I’ve received more referrals as a result of this,” she says. “I’d like to see every veterinarian really look into nutrition and develop a strong personal, professional opinion. Then you can reach more people and educate more people, and help effect a greater change in the veterinary community.”