Veterinarian communication and its impact on dog and cat owners’ satisfaction with care, trust, compliance and the veterinary care a pet receives

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1. Introduction

Two main reasons to why communication is vital to veterinary medicine can be identified. These two are quite dissimilar in nature, but arguably equally important for the individual small-animal practitioner. First, and foremost, communication greatly influences client response and compliance, thereby having a significant impact on the success of treatment, and health-outcome of the patient\(^1\). Second, small animal veterinary clinics are essentially businesses, service providers, and as such, their success depends heavily on their ability to establish long-term, value-laden relationships with customers\(^2\). Research that has specifically considered the monetary aspects of veterinary care has found that stronger communication competency is related to higher financial returns\(^4\). The importance of communication is also accentuated by that the quality of veterinary services received are often difficult for the customer to evaluate confidently, even after purchase and consumption\(^5\).

Over the last twenty years the need for improved communication skills has repeatedly been identified in veterinary medicine\(^6\). Recent studies indicate that the communication skills of the veterinarian, and the veterinarian-owner bond, has a strong impact on the veterinary care a pet receives. The way in which the veterinarian provides information and care, interacts with owner and pet, greatly influences client response and compliance\(^7\). Despite the fact that the majority of complaints concerning veterinary care can be linked to poor communication\(^8\), relatively few studies have addressed this issue\(^9\). This explorative study aims to investigate how veterinarian communication, perceived veterinarian interpersonal behavior, and veterinarian-owner relations influence client compliance and the amount of veterinary care dogs and cats receive. It also briefly explores owners’ general knowledge about their dog or cat, in an attempt to reveal common misconceptions that veterinarians might fail to take into consideration when consulting with the owner.

It is hypothesized that perceived veterinarian communication skills such as the ability to provide a.) relevant information/education about why recommended treatment is needed, b.) information about the advantages/risks of the treatment, b.) choices and alternatives to recommended treatment, c.) encouraging the client to make an active decision and empowering the client, will correlate positively with client satisfaction, trust, the amount of veterinarian care a dog/cat receives and ultimately, client compliance. It is also hypothesized that veterinarian interpersonal behavior perceived as empathetic, calm, attentive,
understanding and approachable will correlate positively with client satisfaction, trust and compliance. Consequently interpersonal behavior perceived as stressed, distant, cold and dismissive is assumed to correlate negatively with client satisfaction, trust and compliance.

Areas of improvement in veterinary education and communication are discussed in the light of the study’s results and recent research.
2. A Survey of Literature

*Human Health-Care & Communication*

Human health-care has undergone a fundamental change during the past three decades. Starting from a heavily doctor-centered approach, the field has gradually shifted towards a more client-oriented viewpoint, striving to achieve a relationship-oriented service encounter. Relationship-centered care is described as “medically functional, informative, facilitative, responsive, and participatory.” As such, it takes into consideration the wants, needs and preferences of the patients. Striving to meet and understand patients’ expectations has gradually become an elemental part of practicing medicine. Studies in human medicine have linked patient expectations to paramount health-care outcomes, such as health status, compliance, satisfaction and even quality of life. Drawing on prior research Stoewen et al. (2014) summarized some of the notable patient-expectations in human medicine. These included the expectation of direct, clear, jargon-free information provision. Also, to be met with empathy, compassion and patience, in a place easy to relate to, in an unstressed, unhurried environment. Further, to be heard and listened to – to be able to share personal take and perspective on discussed health issues - and disclose psychological and social concerns. Patients expected to be included in the decision making process, be met with a non-judgmental attitude, and be given emotional support and reassurance when needed. Key components of the desired interaction were friendliness, trustworthiness, reliability, and tact.

The Toronto consensus statement also attempts to identify some of the core communication skills needed in human health care. It emphasizes that essential diagnostic information arises from the doctor-patient interview; hence communication has a central clinical function. Active, reflective listening, and refraining from interrupting the client, is considered vital, as well as feedback. Also communicating in a clear manner and repeating information when needed, is stressed, since a surprising high proportion of patients do not understand or remember what their physicians tell them about diagnosis and treatment. The consensus asserts that concordance between patient and physician in identifying the seriousness of the clinical problem clearly effects compliance, as well as greater participation by the patient in the encounter. The Toronto consensus finds that patient compliance is largely determined by the physician’s interpersonal skills.
In the early seventies medical schools started developing course programs on communication skills\(^1\). By the early nineties most medical schools in western countries offered some kind of communication skills training\(^2\). In an international consensus statement in 1991 it was stated that “the importance of communication between doctors and patients has been well established, and there is growing acceptance of the need to teach and assess communication skills in medical schools”. Eight recommendations where made regarding teaching communication in medical education programs. These included that communication skills and clinical teaching should be consistent and complementary, that the courses should help students achieve a patient-centered interaction and foster personal and professional growth. Emphasis was also put on that communication curricula should follow a coherent framework, that students should be assessed and evaluated on their communication skills directly, and that faculty development should be adequately supported and resourced.\(^3\) In Hungary, Semmelweis University and University of Szeged both offers medical students courses in communication.\(^4\)\(^5\)

**The Singularity of Veterinary Medicine**

Human and veterinary medicine are similar in many ways. Both are service providers and health care professionals working to improve patient health, and both professions success is heavily dependent on interaction with humans. Many of the communication skills identified in research within human medicine can therefore also be applied to veterinary care.\(^6\) Still, rigorous scientific standards mandate that the unique – and in many aspects different - specialty of veterinary medicine establishes an evidence base of its own\(^7\). Veterinary medicine differs from human medicine in many ways that might be essential to communication. One reason to why the relevance of communication is heightened in veterinary care, is the monetary aspect. While most human patients have insurance, or government funded health care, most animals do not. Improved communication skills help in arguing for recommended treatment, increases compliance alongside monetary gain for the individual practitioner.\(^8\) Some of the main differences arise from that the veterinary consultation can be described as tripartite, involving the client, patient and the veterinarian. It is important to note that the client is not equal to the patient. In order to tailor the communication with the owner efficiently, an accurate assessment of the owner-pet bond is indispensable. The role and purpose of the animal to the owner should be assessed, and can assist in building a positive, strong relationship with the client. Also, pets can’t communicate
verbally, the veterinarian must therefore rely heavily on information gathered from the owner for correct diagnosis and treatment. Skillful and accurate communication is essential to help the owner recall and accurately recite vital information. Since our patients rely on our clients for compliance and adherence to the treatments recommended, it can be argued that more responsibility weighs on the veterinarian to increase the probability for compliance.\textsuperscript{24} The veterinarian-animal-client consultation has been compared to the pediatrician-child-parent situation\textsuperscript{25}. In pediatrics some key components have been identified that affect communication. Family dynamics is one of these, as well as the revelation, that parents and children have differing needs during the consultation process. Parents want their physician to understand their thoughts and concerns, while paying adequate attention to their child, and establishing a positive interaction with both parties\textsuperscript{26}. Many parallels can be drawn between the child in pediatrics, and the animal in veterinary care, but whilst it is true that many similarities exist, the two situations can hardly be regarded identical.

\section*{Communication Skills Identified in Veterinary Medicine}

A study conducted in 2008 established focus-groups where pet owners and veterinarians discussed veterinarian-owner communication together\textsuperscript{27}. It was found that five areas in particular have an impact on veterinarian-client communication. The first area was named \textit{educating clients}, and within this area three subthemes where identified. First, owners expected veterinarians to explain information in detail, educating them with respect to their pets’ care. The focus group arrived to the conclusion that the quantity and quality of the information should be tailored to the individual clients’ needs. Second, owners expected information to be delivered up front, and last they required information to be available in different formats, such as handouts, pamphlets or information packets for new pet owners. The second area was named \textit{providing choices}. Owners expected their veterinarians to provide multiple options for treatment, and help them to make an informed decision by educating them on the pros and cons, costs and prognosis of each option. For some owners this expectation was related to cost-motivation. Participating veterinarians reflected that usually there is only one treatment option they feel is appropriate. If that is rejected or dismissed, they are willing to present more. They were more prone to feel that the motivation behind multiple options was primarily cost-reduction. Owners expected veterinarians to respect their choices, not to pressure them or make them feel guilty. These discussions often
referred to occasions when the monetary aspect of care contributed in the decision making process. The veterinarians present acknowledged the importance of a non-judgmental attitude, but also voiced that many of their clients expect them to validate the decision they’ve made, trying to burden them with the weight of their decision. The third area was the use of two-way communication. Clients wanted their veterinarians to speak in layman terms, communicate in an understandable, non-condescending manner. Owners and veterinarians agreed that one of the few ways owners evaluate their veterinarian’s competence is through the confidence with which he/she speaks and the clarity of his/her logic. Pet owners reflected that they often don’t know what information to provide and expressed a need for their veterinarians to “ask the right questions”. Closely intertwined with the clients’ care-satisfaction was also whether they perceived their veterinarian as listening to them, and giving them enough time to voice their concerns. They also wanted the veterinarian to try to explore and understand their pet’s role in their life and household. They felt this would facilitate positive interaction and understanding. The focus group identified several common breakdowns in communication, such as misinformation (clients feeling like they had been misinformed about either the procedure, the cost, or the possible outcomes, including the long-term implications for the owner and pet), inadequate choices leaving the clients feeling “handicapped”, and failures in attentive listening. The focus group also recognized and discussed some of the common challenges veterinarians encounter when communicating with clients. One of these was the sensitive subject of cost and time. Another was the preconceptions and misconceptions clients arrived with at the clinic; incorrect information gathered from elsewhere posed a challenge to many of the veterinarians. The veterinarians also voiced that often more than one client is involved in an animals’ care, making communication strained. Studies in companion animal practice have shown that the type of appointment requested may greatly influence veterinarian communication and behavior. During “problem associated appointments” veterinarians tend to focus entirely on biomedical topics, disregarding other areas. In contrast, during “wellness appointments”, veterinarians are more prone to indulge in social talk, laughter and statements of reassurance. The study concluded that owing to the emphasis on biomedical content during problem appointments, veterinarians may neglect lifestyle and social concerns that could impact patient management and outcomes, such as client satisfaction and adherence to veterinarian recommendations.

A recent (2014) qualitative and explorative study executed repeated, thorough semistructured interviews with owners seeking cancer treatment for their dogs (n = 30). They study found
that most owners appreciated if the vet delivered diagnosis in an upfront, forthright manner. This led the owners to feel well-informed, and secure in the knowledge, that the veterinarian will let them know any important information. It reduced the need for questions. The need for information up front was well reflected in one of the participant’s comments, “You don’t know what you don’t know, so you don’t always know what to ask”. Participants also appreciated when information was conveyed to them through different channels – for example, with visual aids. They liked receiving short, informative, to-the-point handouts to take home. These served as assurance that they were following the instructions precisely - if they felt insecure, they could re-read them in their home environment. The participants formulated the importance of understandable, jargon free language. They found it to be exceedingly hard to understand medical terms, especially in emotionally laden, distressful situations. Participants expressed the need for stress-free, calm, and unrushed consultations, where the veterinarian listens to them, and in turn, they have time to ask their questions. They appreciated if important information was repeated several times. Participants found positive, realistically hopeful attitudes highly helpful and valued signs of compassion, empathy and support. They valued a non-judgmental stance that did not make them feel guilty for their choices.

In 2008, a comprehensive survey-based study assessing the client-veterinarian relationship and the owner-pet bond was conducted among dog and cat owners in the United States\textsuperscript{30}. The study yielded several informative results concerning the complexity of the veterinarian consultation. It found that owners exhibiting a stronger bond to their pets seek higher levels of veterinary care and are more prone to follow the recommendations of their veterinarian, regardless of cost. The strength of the bond was defined by the owners’ feelings and thoughts about their pets, but also behavioral patterns, such as the time spent together, shared activities and experiences. Owners with the strongest bonds tended to keep their pets indoors, allowing them to access all rooms of the house. Interestingly, dog-owners tended to be more attached to, and have a stronger bond with, their animals than cat-owners. Characteristics of a strong owner-dog bond where found to be factors such as; purchasing animal, having a lower income, be solely responsible for care of dog, have a lower education, and no children in household. In contrast, cat-owners with strong human-animal bonds tended to be have a college degree. Dog-owners took their dogs to the veterinarian more frequently and also showed higher compliance with medical recommendations. The study also found a clear connection between veterinarian communication skills and the medical care pets receive.
Arguably, the competence with which a veterinarian explains reasons for treatment drives clients’ perceptions of value and quality of care, effecting loyalty and compliance. The top indicators of the quality of the veterinarian-owner bond where found to be: a.) amount of information a veterinarian provides about how to take care of pet, b.) communication with clients, c.) perception that veterinarian only sells clients things their pets need and d.) interaction with pets. Important factors fostering non-compliance were clients’ feelings of confusion, uncertainty and misunderstanding. Surprisingly, cost of treatment did not seem to be a major obstacle for compliance.

**Relationship-Centered Care in Veterinary Medicine**

Humans appraise other peoples’ basic attitudes and personality through verbal and non-verbal communication cues. The two – communication and personality – are therefore intertwined, inseparable, and might be easiest examined as an entity. In the word “relationship”, both parties personalities are included. A conceptual framework called “The Four Habits Approach” offers a more relationship-centered conceptual framework for communication. It is founded upon four principles: (1) relationships should encompass the entire personhood of the participants, (2) emotions are an important part of these relationships, (3) providers and patients can both influence one another and (4) forming genuine relationships in health care is morally valuable. A relationship-centered approach is vital, since today patients seem to be less concerned with physicians professional competence, and more concerned with how much they care about their patient. The Four Habits Approach is founded on that clinicians behave according to distinct patterns of habit, and these habits can be changed. It emphasizes four distinct steps; a.) **investing in the beginning of the consultation**, b.) **eliciting the patient’s perspective**, c.) **demonstrating empathy**, and d.) **investing in the end**. In the beginning of the consultation this approach stresses the importance of the physician focusing on the client-professional relationship, for example by inquiring about something shared in the last visit. Only following this step is it recommended the physician steer the conversation towards the medical problem at hand. The approach highlights the importance of using open-ended, instead of close-ended questions, and emphasizes the advantages of using linguistic devices known as “continuers”, such as repeating or emphasizing an important word the patient used, using vocalizations such as “mmm-hmm”, and short phrases, such as “I see”. Continuers encourage the client to elaborate on the content and the emotional impact of what he/she is
trying to convey. In The Four Habits Approach eliciting the patient’s perspective is seen as a vital step in the collaboration between physician and client. Physicians might often assume that clients will automatically voice their concern or disagreement, but this is often not the case. The physician needs to ask for the client’s opinion, clarifying that it is appropriate for him/her to express his/her thoughts and feelings. This simple gesture empowers the client; it conveys that the veterinarian respects the patient’s experience and individuality, and strives for partnership. Further, this will provide the veterinarian with a deeper insight into what meaning the client is attaching to the animal’s symptoms, and opportunity to frame the rest of the dialogue accordingly. The Four Habits Approach also advocates that demonstrating empathy should be viewed as one of the fundamentally important steps during consultation. Shaw and colleagues found that only in 7% of the 300 visits they studied did the veterinarian express empathy. Foregoing and neglecting to utilize this tool seems to be unwise, since researchers have linked perceived caring to a range of positive outcomes, such as satisfaction, compliance, and lower propensity to sue. Expressing empathy can seem tricky, and hard. Accurately observing the clients non-verbal behavior (facial expression, body posture, gestures, eye-contact, and tone of voice) helps in identifying when and what to say. Five types of verbal statements that might help expressing empathy are: reflection (“It sounds like you are concerned that...”), legitimization (“Anyone would feel scared if...”), support (“I will be there for you...”), partnership (“I think we can figure this out together”) and respect (“I have confidence that you’ll do the right thing...”). Further, using own non-verbal cues as body language, silence, eye-contact, tone of voice and posture consciously during interaction is vital. In the end of the consultation the Four Habits Approach advocates involving patients in decision making and shading information in a clear manner. Delivering diagnostic information that is “bad news” for the client is a very sensitive area. Poorly communicated bad news about for example the loss of a beloved pet, can lead to extreme emotional responses and the initiation of lawsuits for medical malpractice. Strand finds that “a person’s ability to remain internally calm, flexible and appropriately responsive during moment-to-moment interpersonal interactions in the midst of high levels of tension associated with cognitive, emotional and behavioral demands” helps in avoiding emotionally tense situations to spiral. In her work, Strand focuses mainly on non-verbal communication skills and the importance of what she calls a “non-anxious presence”, referred to in short as NAP. Strand’s work accentuates how veterinarians are often faced with emotionally laden situations, for example in the case of euthanasia. In these distressful moments the client can lose emotional control and act-out in various ways towards the veterinarian. Clients can
become angry, intensely sad, or scared. Veterinarians equipped with NAP can be empathetic and understanding, while not interpreting the emotional reaction as being directed towards them personally. They can still ensure that their own needs are met – for example adequate financial compensation – without becoming emotionally detached, hostile, angry or distressed. Strand states that the concept of NAP was historically developed by psychoanalytical theory, and that it has been the realization of other helping profession, that if at least one of the partners remains non-anxious and calm, the interpersonal outcomes are relatively positive. Qualities such as self-awareness, flexibility, non-judgment (compassion), and being present are emphasized.³⁷
2. Materials and Methods

The target population of present study was dog and cat owners who regularly or irregularly visit the veterinarian.

Sample

568 dog and cat owners, with a mean age of 31.8 (SD= 13.4) participated in the online-survey. A majority of the respondents, 445 (78.3%), where females, while only 119 (21%) where male. 5 people chose not to state their gender. 288 owned one or more dogs, 154 owned one or more cats, and 126 where owners of both dogs and cats. 49 of the participants also noted that they own other animals in addition to their dog, or cat, ownership. These animals varied widely, from guinea pigs, to horses. The majority (54.7%) of cat owners only had one cat, while only a minority (7.4%) owned 5 or more cats. The tendency was the same with dog owners; 65.3% owned only one dog, while 20.5% owned two dogs. 3.7% of dog owners stated that they own 5 or more dogs. Most animals where kept indoors (452, 76.4%), and most owners planned on acquiring a pet, before obtaining one (421, 23.3%).

Participants with no present dog-, or cat ownership where excluded from the survey. Participants who owned a dog or cat, but had never been to the veterinarian, where accepted, but not given the option to rate the owner-veterinarian, veterinarian-pet interaction.

1. Table

<table>
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<tr>
<td></td>
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<tr>
<td>Cat</td>
<td>154</td>
<td>27.1</td>
<td>32.5</td>
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<tr>
<td>Both</td>
<td>126</td>
<td>22.2</td>
<td>32.9</td>
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344 Hungarian and 224 English language questionnaires were completed. 356 (62.7%) respondents filled out the questionnaire from Hungary, but some participants from other parts of the world where also accounted for, such as Sweden 30 (5.3%), Norway 23 (4%), the UK 21 (3.7%) Israel 20 (3.5%), Germany 18 (3.2%), the United States 15 (2.6%) and other countries.

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<tr>
<td>Big city</td>
<td>91</td>
<td>16.0</td>
<td>30.8</td>
</tr>
<tr>
<td>Urban area</td>
<td>124</td>
<td>21.8</td>
<td>32.3</td>
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<tr>
<td>Rural area</td>
<td>79</td>
<td>13.9</td>
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<td>Alone</td>
<td>105</td>
<td>18.5</td>
<td>32.7</td>
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<tr>
<td>Parents</td>
<td>107</td>
<td>18.8</td>
<td>26.9</td>
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<td>Roommate</td>
<td>36</td>
<td>6.3</td>
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<tr>
<td>Partner</td>
<td>305</td>
<td>53.7</td>
<td>33.2</td>
</tr>
<tr>
<td>Children</td>
<td>125</td>
<td>22.0</td>
<td>37.7</td>
</tr>
<tr>
<td>Other</td>
<td>34</td>
<td>6.0</td>
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<table>
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<td>31.1</td>
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<td>621 - 930 EUR</td>
<td>126</td>
<td>22.2</td>
<td>31.5</td>
</tr>
<tr>
<td>931 &lt; EUR</td>
<td>185</td>
<td>32.6</td>
<td>32.6</td>
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</table>
Monthly household income levels where averagely distributed in the entirety of the sample; 100 (17.6%) earning between 1-120’ HUF, 141 (24.8%) earning between 121-200’ HUF, 126 (22.2%) earning between 201-300’ HUF, and 185 (32.6%) earning above 301’ HUF. 16 respondents chose not to answer this question. The evenly distributed income-levels changed somewhat if the English and Hungarian language questionnaires were separated. 101 (47.6%) of the respondents to the English language earned above 301’ HUF. 137 (24.1%) students, 53 (9.3%) entrepreneurs, 259 (45.6%) employees, 44 (7.7%) in middle management and 12 (2.1%) in higher management answered the questionnaire. 63 (11.0%) of the participants could not place themselves in either category.

123 of the respondents worked, or studied to work, with animals professionally. They constituted 21.7% of the entire sample. Out of the 123, 33 indicated that they are veterinarians, 42 stated they are students of veterinary medicine. Other answers where very versatile, and included being a police officer, animal assisted therapist, dog-trainer, breeder, biologist and pet groomer.

**Construction and Translation**

The questionnaire was compiled drawing on a number of research-papers previously mentioned and discussed. To the knowledge of the writer no standardized, available, questionnaire exists to rate veterinarian communication. The applied questionnaire can be viewed in its entirety in the Appendix 1, 2.

The structure of the questionnaire was as follows:

1. Introduction
2. Filter question: excluded participants who did not presently own a dog or cat
3. Demographics
4. Animal ownership and the veterinary care provided for the pet by the owner
5. Owners awareness and knowledge about what is healthy for pet
6. Veterinarian communication, perceived veterinarian interpersonal behavior, and the veterinarian-owner bond
7. Client satisfaction and compliance
8. Closure
Participants were asked to rate several statements on a 5-point Likert scale. Other items provided multiple choices. Some restricted the minimal or maximal amount of possible answers.

**Questions Rating Veterinary Communication**

The questions used to rate veterinary communication are listed below. Participants were asked to rate the statements on a 5-point Likert scale, where 1 was Strongly Disagree, and 5 was Strongly Agree. A 5-point Likert scale was also used to rate the interpersonal behavior of the veterinarian, and to assess satisfaction and compliance.

- my vet can handle my pet well
- my vet asks relevant questions about my pet
- my vet listens attentively to my observations regarding my pet
- my vet dedicates enough time to me and my pet
- my vet conveys important information thoroughly
- my vet clearly explains why he/she recommends a treatment
- my vet clarifies the recommended treatment's benefits
- my vet clarifies the recommended treatment's drawbacks / risks
- my vet offers me several treatment options
- my vet respects my decision
- my vet often uses professional lingo
- my vet often misunderstands me
- my vet knows or asks what my pet's name is
- my vet makes encouraging statements
- my vet compliments my pet

The questionnaire was first formulated in English. In order to develop a Hungarian version a translation and back-translation was made. The back translation was compared to the original, and smaller adjustments were made. The first version of the Hungarian and English questionnaire was tested on five respondents. Adjustments were made based on their comments and suggestions.
**Questions Rating Perceived Veterinarian Interpersonal Behavior**

The participants were asked to rate their veterinarians interpersonal behavior by rating the following qualities on a 5-point Likert scale: distant cold, dismissive, nice, anxious, decisive, empathetic, attentive, calm, stressed, understanding, insecure, patient.

**Internet Based Survey**

The online version of the 73 item questionnaire was created with the help of Surveygizmo’s survey software. The interface was constructed to be user-friendly, and made it possible to relieve the respondent of any unnecessary workload.

**Sampling Technique**

A chain-referral sampling technique was used, where existing study subjects recruited future subjects from among their acquaintances, with the help of online social networking services.

**Statistical Analysis**

The statistical analysis was performed with SPSS 17.0 and IBM SPSS 22.0. Independent-samples t-test was used to search for statistically significant differences between the means of two groups. Spearman’s two-sided rank correlation method was used to assess correlation between the continuous or semi-continuous variables. Multiple, stepwise linear regression analysis was also applied to estimate the degree of the predictive power of multiple variables on a continuous variable. Analysis of variance (ANOVA) was also used to search for main effects between multiple groups.

The correlations where interpreted using Dancey and Reidy's categorization, according to which 0.1 – 0.3 correlations are weak, 0.4 – 0.6 correlations are moderate and 0.7 – 0.9 correlations are strong.
3. Results

Quantitative Findings

Mann-Whitney U test found no gender differences between 190 evaluated female, and the 372 evaluated male veterinarians with regard to their communication skills. Also, the age of the veterinarian did not correlate with communication skills. 5 (0.9%) of the participants stated that they had never been to the vet, but only two gave reasons indicating that they didn’t feel the need to. One wrote; “I didn’t need it, cause my dog never got sick”. Most of the participants visited the veterinarian 2 or 3 times per year.

2. Table

Number Of Veterinary Visits Per Year

<table>
<thead>
<tr>
<th>Number of veterinary visits</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid 0</td>
<td>5</td>
<td>.9</td>
<td>.9</td>
<td>.9</td>
</tr>
<tr>
<td>1</td>
<td>40</td>
<td>7.0</td>
<td>7.1</td>
<td>8.0</td>
</tr>
<tr>
<td>2</td>
<td>143</td>
<td>25.2</td>
<td>25.4</td>
<td>33.4</td>
</tr>
<tr>
<td>3</td>
<td>144</td>
<td>25.4</td>
<td>25.6</td>
<td>59.0</td>
</tr>
<tr>
<td>4</td>
<td>102</td>
<td>18.0</td>
<td>18.1</td>
<td>77.1</td>
</tr>
<tr>
<td>5</td>
<td>129</td>
<td>22.7</td>
<td>22.9</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>563</td>
<td>99.1</td>
<td>100.0</td>
<td></td>
</tr>
<tr>
<td>Missing System</td>
<td>5</td>
<td>.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>568</td>
<td>100.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

According to the survey’s results, 331 (58.3%) of the participants relied on their veterinarian for information regarding their pet’s health. The second most common information-source was the internet (21.3%). Remaining answers were scattered almost equally between family, friends and books.

3. Table

Source of Information

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>family</td>
<td>31</td>
<td>5.5</td>
<td>5.5</td>
</tr>
<tr>
<td></td>
<td>friends</td>
<td>30</td>
<td>5.3</td>
<td>10.8</td>
</tr>
</tbody>
</table>
A strong majority, 91% of the owners stated, that they usually visit the same veterinarian.

4. Table

<table>
<thead>
<tr>
<th>Loyalty of Client</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>alternate between vets</td>
<td>40</td>
<td>7.0</td>
<td>7.2</td>
<td>7.2</td>
</tr>
<tr>
<td>usually visit the same vet</td>
<td>517</td>
<td>91.0</td>
<td>92.8</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>557</td>
<td>98.1</td>
<td>100.0</td>
<td></td>
</tr>
<tr>
<td>System</td>
<td>11</td>
<td>1.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>568</td>
<td>100.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Most participants chose vaccinations (467, 82.2%) as one of their two top reasons for veterinary visits. The second most common choice was illness, while neutering, dental care, parasites and euthanasia was low on most participants’ list of reasons.

5. Table

<table>
<thead>
<tr>
<th>Reasons for veterinary visit</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>vaccinations</td>
<td>467</td>
<td>82.2</td>
</tr>
<tr>
<td>illness</td>
<td>239</td>
<td>42.1</td>
</tr>
<tr>
<td>routine check-up</td>
<td>222</td>
<td>39.1</td>
</tr>
<tr>
<td>injury</td>
<td>67</td>
<td>11.8</td>
</tr>
<tr>
<td>neutering</td>
<td>50</td>
<td>8.8</td>
</tr>
<tr>
<td>dental care</td>
<td>32</td>
<td>5.6</td>
</tr>
<tr>
<td>parasites</td>
<td>32</td>
<td>5.6</td>
</tr>
<tr>
<td>euthanasia</td>
<td>3</td>
<td>0.5</td>
</tr>
</tbody>
</table>

A strong majority, 91% of the owners stated, that they usually visit the same veterinarian.
Client compliance was measured on a 5-point Likert scale. Very few of the participants used the lower end of the scale, as can be seen in the table below. 96.7% of participants answered that they usually, or almost always, follow their veterinarian’s instructions.

6. Table

<table>
<thead>
<tr>
<th>Q: Do you follow your vet’s instructions?</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1: Almost never (0-20%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2: Sometimes (20-40%)</td>
<td>3</td>
<td>.5</td>
<td>.5</td>
<td>.5</td>
</tr>
<tr>
<td>3: About half the time (40-60%)</td>
<td>7</td>
<td>1.2</td>
<td>1.3</td>
<td>1.8</td>
</tr>
<tr>
<td>4: Usually (60 – 80%)</td>
<td>106</td>
<td>18.7</td>
<td>19.0</td>
<td>20.8</td>
</tr>
<tr>
<td>5: Almost always (80 – 100%)</td>
<td>443</td>
<td>78.0</td>
<td>79.2</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>559</td>
<td>98.4</td>
<td>100.0</td>
<td></td>
</tr>
<tr>
<td>Missing System</td>
<td>9</td>
<td>1.6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>568</td>
<td>100.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. Table  Chart Depicting Client Compliance

Veterinary Communication In Relation to Compliance and Satisfaction

Items deemed to measure veterinary communication skills were converted into one continuous variable, named “Veterinary Communication”. Using Spearman’s two-sided rank correlation method veterinary communication was correlated with client compliance, satisfaction and trust in the veterinarian. A weak positive correlation was found between veterinary communication and compliance ($r_s = 0.307$; p<0.01). A moderate positive correlation was found between veterinary communication and satisfaction ($r_s = 0.594$; p<0.01).
A strong positive correlation was found between veterinary communication and trust in the veterinarian ($r_s = 0.693; p<0.01$).

8. Table

<table>
<thead>
<tr>
<th>Spearman's rho</th>
<th>Veterinary Communication Correlation</th>
<th>Veterinary Communication Coefficient</th>
<th>Satisfaction Correlation</th>
<th>Satisfaction Coefficient</th>
<th>Compliance Correlation</th>
<th>Compliance Coefficient</th>
<th>Trust in Veterinarian Correlation</th>
<th>Trust in Veterinarian Coefficient</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterinary Communication Correlation</td>
<td>1.000</td>
<td><strong>.594</strong></td>
<td><strong>.307</strong></td>
<td><strong>.693</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction Correlation</td>
<td>.594**</td>
<td>1.000</td>
<td><strong>.199</strong></td>
<td><strong>.605</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compliance Correlation</td>
<td><strong>.307</strong></td>
<td><strong>.199</strong></td>
<td>1.000</td>
<td><strong>.267</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust in Veterinarian Correlation</td>
<td><strong>.693</strong></td>
<td><strong>.605</strong></td>
<td><strong>.267</strong></td>
<td>1.000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**. Correlation is significant at the 0.01 level (2-tailed).

Trust, Compliance and Satisfaction In Relation to Perceived Personality Traits

Using Spearman’s two-sided rank correlation method the trust, compliance and satisfaction variable were correlated with the perceived personality traits of the veterinarian. The following perceived personality traits where found to correlate positively with trust, compliance and satisfaction: niceness, decisiveness, level of empathy, attentiveness, calmness, level of being understanding and patience. The variables correlated negatively with the following perceived personality traits: keeping a distance, being perceived as cold, dismissive, anxious, stressed or insecure.
In all cases the strongest correlations were found between perceived personality traits of the veterinarian and level of client trust. The strongest positive correlation was found between client trust and perceived attentiveness ($r_s = 0.604; p < 0.001$), level of understanding ($r_s = 0.606; p < 0.001$) and empathy ($r_s = 0.593; p < 0.001$). The strongest negative correlation was found between trust and perceived coldness ($r_s = -0.514; p < 0.001$) and being dismissive ($r_s = -0.546; p < 0.001$).

**Positive correlations**

<table>
<thead>
<tr>
<th>Trust</th>
<th>Correlation Coefficient (2-tailed)</th>
<th>Nice</th>
<th>Decisive</th>
<th>Empathetic</th>
<th>Attentive</th>
<th>Calm</th>
<th>Understanding</th>
<th>Patient</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$r_s = 0.586**$</td>
<td>.586**</td>
<td>.531**</td>
<td>.593**</td>
<td>.604**</td>
<td>.551**</td>
<td>.606**</td>
<td>.583**</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>545</td>
<td>543</td>
<td>540</td>
<td>540</td>
<td>541</td>
<td>539</td>
<td>542</td>
</tr>
<tr>
<td></td>
<td>Correlation Coefficient (2-tailed)</td>
<td>$r_s = 0.225&quot;$</td>
<td>.215&quot;</td>
<td>.256&quot;</td>
<td>.219&quot;</td>
<td>.196&quot;</td>
<td>.245&quot;</td>
<td>.257&quot;</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>554</td>
<td>553</td>
<td>550</td>
<td>550</td>
<td>551</td>
<td>549</td>
<td>552</td>
</tr>
<tr>
<td></td>
<td>Correlation Coefficient (2-tailed)</td>
<td>$r_s = 0.450&quot;$</td>
<td>.385&quot;</td>
<td>.419&quot;</td>
<td>.451&quot;</td>
<td>.427&quot;</td>
<td>.473&quot;</td>
<td>.488&quot;</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>553</td>
<td>552</td>
<td>549</td>
<td>549</td>
<td>550</td>
<td>548</td>
<td>551</td>
</tr>
</tbody>
</table>

**. Correlation is significant at the 0.01 level (2-tailed).**

**Negative correlations**

<table>
<thead>
<tr>
<th>Trust</th>
<th>Correlation Coefficient (2-tailed)</th>
<th>Distant</th>
<th>Cold</th>
<th>Dismissive</th>
<th>Anxious</th>
<th>Stressed</th>
<th>Insecure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$r_s = -0.459**$</td>
<td>-.459**</td>
<td>-.514**</td>
<td>-.546**</td>
<td>-.346**</td>
<td>-.366**</td>
<td>-.506**</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>542</td>
<td>541</td>
<td>537</td>
<td>540</td>
<td>538</td>
<td>536</td>
</tr>
<tr>
<td></td>
<td>Correlation Coefficient (2-tailed)</td>
<td>$r_s = -.196&quot;$</td>
<td>-.202&quot;</td>
<td>-.237&quot;</td>
<td>-.151&quot;</td>
<td>-.112&quot;</td>
<td>-.144&quot;</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>552</td>
<td>551</td>
<td>547</td>
<td>550</td>
<td>548</td>
<td>546</td>
</tr>
<tr>
<td></td>
<td>Correlation Coefficient (2-tailed)</td>
<td>$r_s = -.388&quot;$</td>
<td>-.426&quot;</td>
<td>-.445&quot;</td>
<td>-.286&quot;</td>
<td>-.350&quot;</td>
<td>-.458&quot;</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>551</td>
<td>550</td>
<td>546</td>
<td>549</td>
<td>547</td>
<td>545</td>
</tr>
</tbody>
</table>

**. Correlation is significant at the 0.01 level (2-tailed).**
Satisfaction In Relation to Perceived Interpersonal Behavior of Veterinarian

Using multiple, stepwise linear regression analysis it was found that client satisfaction is largely predicted by the continuous variable of veterinarian communication. This variable predicts 50.3% of satisfaction’s variability. What we can conclude from this is that the variable Veterinarian Communication is a significant positive predictor of the variable Client Satisfaction. The relationship between Veterinarian Communication and Client Satisfaction remained significant even after adding additional variables to our model. These additional variables were not significant predictors, except for the variable which rated perceived veterinarian insecurity, which had a significant negative association with our dependent variable. All models were significant (p=0.000), but the predictive power did decrease a little bit by adding so many variables.

11. Table

Model Summary for Dependent Variable: Client_satisfaction

<table>
<thead>
<tr>
<th>Model</th>
<th>Adjusted $R^2$</th>
<th>F(df)</th>
<th>Predictor</th>
<th>β</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.252</td>
<td>170.209 (503)</td>
<td>VETS_Communication</td>
<td>.503</td>
<td>.000</td>
</tr>
<tr>
<td>2</td>
<td>.251</td>
<td>85.195 (503)</td>
<td>VETS_Communication</td>
<td>.485</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.53. VETPER cold</td>
<td>-.030</td>
<td>.534</td>
</tr>
<tr>
<td>3</td>
<td>.250</td>
<td>56.850 (503)</td>
<td>VETS_Communication</td>
<td>.476</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.53. VETPER cold</td>
<td>.000</td>
<td>.997</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.54. VETPER dismiss.</td>
<td>-.043</td>
<td>.541</td>
</tr>
<tr>
<td>4</td>
<td>.253</td>
<td>43.532 (503)</td>
<td>VETS_Communication</td>
<td>.431</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.53. VETPER cold</td>
<td>.010</td>
<td>.884</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.54. VETPER dismiss.</td>
<td>-.041</td>
<td>.559</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.61. VETPER understa.</td>
<td>.085</td>
<td>.088</td>
</tr>
<tr>
<td>5</td>
<td>.254</td>
<td>35.262 (503)</td>
<td>VETS_Communication</td>
<td>.407</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.53. VETPER cold</td>
<td>.006</td>
<td>.929</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.54. VETPER dismiss.</td>
<td>-.034</td>
<td>.628</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.61. VETPER understa.</td>
<td>.054</td>
<td>.101</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q. 57. VETPER decisive</td>
<td>.041</td>
<td>.171</td>
</tr>
<tr>
<td>6</td>
<td>.274</td>
<td>32.582 (503)</td>
<td>VETS_Communication</td>
<td>.382</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.53. VETPER cold</td>
<td>.011</td>
<td>.876</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.54. VETPER dismiss.</td>
<td>.009</td>
<td>.898</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.61. VETPER understa.</td>
<td>.077</td>
<td>.116</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q. 57. VETPER decisive</td>
<td>.033</td>
<td>.447</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Q.62. VETPER insecure</td>
<td>-.167</td>
<td>.000</td>
</tr>
</tbody>
</table>
Veterinarian Communication In Relation To the Veterinary Care a Pet Receives

Spearman’s two-sided rank correlation method was used to find correlations between the continuous variable of veterinary communication and the veterinary care a pet receives. The veterinary care a pet receives was measured by the amount of vaccinations and treatments provided by the owner for the pet.

A weak positive correlation ($r_s = 0.278; p < 0.01$) was found between veterinarian communication and the amount of vaccinations and treatments cats receive. A positive, but even weaker, modest correlation ($r_s = 0.160; p < 0.01$) was found between veterinarian communication and the amount of vaccinations and treatments dogs receive.

Owner Awareness

Regarding owner awareness the gathered data showed that 151 (54.7%) cat owners agreed, that it is healthy for their cat to eat vegetables, while 125 (45.3%) disagreed. 314 (77.1%) of dog owners agreed that it is healthy for their dog to eat vegetables, while 93 (22.9%) disagreed. 433 (76.2%) participants stated that they do not often feed their pet raw meat, and 369 (65%) owners declared that they do not often feed their pet bones. Only 26 (4.6%) owners answered that they allow their pet to eat chocolate.

Further Associations

Independent two sample t-test was used to search for statistically significant means between two groups. No significant difference was found between the two groups who planned, versus did not plan to acquire a pet, in regard to how many vaccinations or veterinary treatments they provided for their animal. Also, no difference was found in this respect between purebred and non-purebred animals; and owners who kept their pets indoors versus outdoors.

Qualitative Findings

240 of the participants utilized the compliance-comment section and some gave very thought-provoking reasons to their lacking compliance. The list of comments and categorization can be found in its entirety in the Appendix 3. 86 of the clients just reaffirmed that they always comply, but some gave detailed reasons to why – which are going to be presented later. The remaining comments can be categorized into several groups, of which the main are:
a.) **hard to execute.** Many owners felt that their circumstances, their animals’ behavior, and so forth made the veterinarian’s instructions hard to execute.

b.) **forgetfulness.** Very many of the respondents simply commented that they “forgot”. It is hard to know how to interpret these comments. They might indicate that the respondent momentarily forgot to apply an instruction otherwise remembered, or that the respondent didn’t remember the instruction itself. Latter would indicate breakdowns in communication.

c.) **price-sensitivity.** Price-sensitive owners expressed that their non-compliance is connected to “Expensive food” and „Cost”. One participant wrote “If I can’t finance it (for example too expensive food), unaffordable medical treatments, interventions.” another commented “If I find cheaper pills for treatment (I will not comply)”.

d.) **treatment seeming too complicated.** Owners explained their lacking compliance with reasons such as “(If) I find (the recommendation) to complicated”

e.) **lack of compliance due to the assumption that the veterinarian is solely motivated by monetary gain.** In this group the comments where often very emotional. A veterinary student commented that “Some vets that I met advised me to do unnecessary surgeries or treatment because they wanted to earn money or make a quick and wrong diagnose.” An angrier respondent wrote “My veterinarian is an idiot, he is young, smug and only cares about money. I find this to be common. So far we have had five veterinarians, and money was the most important thing for all of them.”. Other comments included “I don’t know a normal, dog-friendly vet. All of them just do it for the money” and “I often don’t feel that the treatment is necessary

---

1 „Ha anyagilag nem tudom teljesíteni (pl. számonra drága táp vásárlása), megfizethetetlen orvosi kezelések, beavatkozások.”
2 “túl drága javaslatot tesz, vagy bonyolultnak tartom.”
3 „Az állatorvosom egy barom fiatal, önélégült és pénzre hajt. De ez jellemző. Eddig őt állatorvosunk volt mindegyiknek a pénz volt fontos.”
4 „Egy normális kutyabarát állatorvost nem ismerek. Mindegyik csak a pénz miatt csinálja.”
(he/she does not convince me of this), I rather feel, that he/she is exclusively motivated by money5.

- **f.) current state of the animal.** Many clients chose to deviate from recommended treatment on the grounds that they detected an either a positive, or negative change in the behavior and current state of their animal.

- **g.) instruction assumed to be unimportant.** Some clients stated that they don’t follow the instructions, if they think the recommendation is of less importance to the general health of the animal. Comments included “if (he/she) advises expensive vaccinations, which I don’t feel my dog needs"6, “(If) I don’t think that the question in concern is relevant, but I always follow his/her advice when it comes to important issues”7 and “I follow all main recommendations”.

Participants commenting that they almost always followed their veterinarian’s instructions sometimes elaborated on to the reasons why. Among these reasons communication played a vital role. One participant commented “I usually follow her advice because if I am insecure we discuss about it and she explains to me why to do so or so”, another one stated “I always follow the instructions, because (he/she) EXPLAINS in a way I can understand, why I have to do this/that8”. Very similar comments where “I follow the instructions of my chosen veterinarian, he/she usually explains everything (what, why?). In the case of other veterinarians, if they do not give adequate information, I am mistrustful”9 and “I usually follow her advice because if I am insecure we discuss about it and she explains to me why to do so or so”. Other comments where only indirectly connected to communication. For example one participant emphasized the veterinarians caring attitude; “I almost always follow his advice. (...) Also I feel that he genuinely cares for the animals he treats and wants to help them in the best way possible”.

---

5 Gyakran nem érzem, hogy a kezelés szükséges lenne (nem győz meg erről), sokkal inkább érzem, hogy kizárólag a pénz motiválja”.
6 “Ha drága oltásokat ajánl, amelyekre úgy érzem nincs szüksége kutyámnak”
7 “Nem találom lényegesnék a kérdést, melyben eltérek a tanáoltól, azonban minden fontos kérdésben az általa javasoltakra hagyatkozom”
8 „Mindig követem az utasításait, mert MEGMAGYARÁZZA számonra érthető módon hogy miért kell úgy cselekednem”
9 „A választott állatorvos instrukcióját követe mindent el szokott magyarázni (mit, miért?). Más állatorvos esetében, ha nem megfelelő a tájékoztatás, bizalmatlan vagyok”.

25
4. Discussion

Restrictions and Potential Errors in Data Acquisition

The results of present study should be interpreted keeping its restrictions in mind. The questionnaire was only available online, which made fast, low-cost distribution attainable, but also restricted the sample to participants with internet access and know-how. The chain-referral sampling technique used was advantageous in many ways. It was cost and time effective, yielded a heterogenic sample in terms of location, country and culture and made it easier to reach members of the target group, through interpersonal connections and social groups. The main disadvantage was that selection in chain-referral sampling does not occur randomly, it moves through social systems. Unfortunately, this results in that the sample might be skewed in several ways, including socioeconomic status, rural-urban residence, and field of study/employment. To counteract and control this, measurements of socioeconomic status where included, as well as questions inquiring about the respondents’ profession. Also, initial informants where chosen to be as diverse as possible. Availability in two languages contributed greatly to the heterogeneity of the sample, and gave the survey a wider reach. On the other hand, no translation can ever be entirely identical to, or have exactly the same intrinsic meaning as, the original. By working with experienced translators and using a back-translation, the disadvantages where hopefully minimized. Still, some questions might require additional attention upon interpretation. Cultural and regional differences - such as average income in the respondent’s country - also have to be considered.

Discussion of Results

The statistical analysis of the acquired data support the main hypothesis that perceived veterinarian communication skills correlate positively with client satisfaction, trust in the veterinarian, the veterinary care a dog/cat receives and client compliance. A moderate, significant correlation was found between the perceived communication skills of the veterinarian and client satisfaction. This indicates that a veterinarian’s way of communicating has a strong impact on how content and gratified a client feels. A satisfied client is vital for small veterinary clinics, since arguably it strengthens loyalty. A strong positive significant correlation was found between veterinary communication and trust in the veterinarian. This indicates that the way a veterinarian communicates highly influences how trustworthy he/she
seems to the client. Arguably this affects the client’s attitude towards the veterinarian and how open he/she is to accept the treatments offered. It may also influence how openly the client shares information. Veterinarian communication also correlated positively and significantly with the veterinary care a pet receives, but this correlation remained weak in the case of both cat and dog owners. This result might indicate that regardless of how the veterinarian communicates, owners have set preconceptions of what treatments or vaccinations they feel they need to provide for their pets. The weaker correlation can be understood as the area of choice where the client can still be influenced; in which area the amount of influence exerted is influenced by the communication skills of the veterinarian.

Surprisingly, although a positive significant correlation was present between veterinary communication and compliance, this correlation proved much weaker then communication’s correlation with trust and satisfaction. Upon observing the data (table 6, 7) 96.7% of participants only used the upper end of the Likert scale. Because of the one-sided figures it is important to critically examine these results. It is possible, that client compliance is a sensitive issue for owners; they might not want to admit to, or reflect upon, that they often deviate from their veterinarian’s instructions. Also, upon re-examination, the question “Do you follow your vet’s instructions” might be misleading. Information provided by the veterinarian can be interpreted in different ways by the client. For example, the client might qualify some directives as “suggestions”, others as “advice”, yet others as “instructions”. For example, a client might interpret instructions concerning nutritional and lifestyle choices as suggestions, and instructions relating to life-threatening states as “instructions”. In the interest of accurate data-acquisition future surveys should divide this question into several parts. Suggestions include separating the question based on its theme (lifestyle, diet) and the point of intervention (primary, secondary or tertiary prevention, active intervention). Upon reflection, it might also have been hard for participants to evaluate the interpersonal behavior and communication of their veterinarian in retrospect. It might be more effective and yield more accurate data, to administer questionnaires immediately after consultations.

The results showed that interpersonal behavior that lead to the client perceiving the veterinarian as nice, decisive, empathetic, attentive, calm, understanding and patient, correlated positively with trust, compliance and client satisfaction. In turn interpersonal behavior conveying distance, a cold, dismissive attitude, or stressed, anxious and insecure stance correlated negatively with the same variables. This indicates, that not only verbal, but
also on non-verbal signals are an inherent part of a successful and positive client-veterinarian consultation.

Based on the results of present study communication and perceived interpersonal behavior has a vital impact on client trust, compliance and the veterinary care pets receive. It can therefore be argued that veterinary students should receive education in communication as part of their training, and be made aware of non-verbal and verbal cues that might influence clients perception of them. Pertaining to the results it would be important to teach veterinary students skills to build two-sided communication with clients. For example, many participants commented that their non-compliance emanated from the procedure being perceived as “hard to execute”. Surmise a client would feel comfortable and motivated enough to voice his/her concerns regarding execution. This would give the veterinarian an opportunity to address the issues one-by-one, offer ideas, and techniques (ex. how to hold the animal) that could ease execution. Another main issue seems to be “forgetfulness”; the client either forgetting the veterinarians instructions entirely, or perhaps forgetting – or avoiding – implementation. This finding, reaffirmed by present study, but confirmed in most communication-centered surveys, emphasizes the importance of using jargon-free, clear language and repeating and highlightening vital information. It supports the idea and use of small pamphlets for common procedures that the client can take home and survey in a stress-free environment. These changes might not only helping clients remember instructions, but might also reduce cases when clients “forget” to implement. It can be argued that behind the excuse “I forgot to do it”, several other possible explanations lie. The client might be burdened with insecurities and anxieties related to implementation, and therefore be procrastinating. Straight, simplified, logical instructions, followed up with instructive pamphlets, could reduce these cases. Many of the more forceful, negative and emotional comments given in this survey where connected to the assumption that the veterinarian is recommending treatment solely motivated by monetary gain. The impetus with which these opinions were delivered indicated, that they might be reasons for breaking loyalty. From the veterinarian’s side this could possibly entail substantial financial loss – or a malpractice suit. This stresses the importance of teaching veterinary students to educate and inform their clients. They should not issue a recommendation like an order that is supposed to be followed blindly, without reflection. Rather they need to explain the necessity of advocated procedure step-by-step, giving the client enough time to ask questions and clarify. If the client still decides against recommended treatment, his/her choice should be accepted bearing a non-judgmental attitude in mind. The
subject of money is always a sensitive, emotionally laden one. In the veterinary-client-pet tripartite it becomes a highly reactive issue. Assuming that the owner (or his family) is emotionally attached to the animal, the predicament of having to weigh your pet’s health against your financial concerns, might trigger strong emotions such as guilt, feelings of inadequacy, anger, helplessness, and so forth. Among other highly-emotional situations, unique to the veterinary profession, is discussing euthanasia. How, when and in what manner to bring this issue up is essential to the outcome. Hence, educating veterinarians on how to conduct themselves and lead an effective and empathetic interaction, becomes increasingly important. Effective empathy demonstration involves being receptive to, the clients non-verbal communication cues – but also being in control and aware of ones’ own. Heightening awareness and receptiveness to own and others non-verbal signals could be practices in small-group situations, through role-play and constructive feedback. Present survey-results also attest to that owners like if their veterinarian makes gestures that indicate that they genuinely care about the animal; like asking the pets name. Inquiring why and when the owner got the pet, and what it does at home – what its favorite game, toy, or daily chore is, if it’s mostly indoors or outdoors and so forth – might not only make the owner feel that the veterinarian genuinely cares about the animal, but help the veterinarian assess the position, purpose and role of the animal within the household. This information can be used to tailor recommendation and communication. The importance of establishing a positive, possibly genuine and honest connection with the animal, should be emphasized during veterinary studies.

Present survey also briefly explored owners’ general knowledge about their dog or cat, in an attempt to reveal common misconceptions that veterinarians might fail to take into consideration during consultation. According to the data, half of the cat-owners didn’t fully understand that their pet is essentially a strict carnivore, with a small, almost non-existent need for vegetables. Simultaneously, one-third of the dog owners stated that they believe vegetables are unhealthy for their dog, while in reality dogs are omnivores rather than carnivores, meaning it is beneficial to them to enjoy a mixed combination of fruits, vegetables and meat in their daily diet. A few respondents, around 5%, answered that they feed their animal chocolate - which could lead to that the owner unknowingly gives his animal theobromine poisoning. Between 20-40% of respondents admitted to regularly feeding their pet raw meat and bones, instead of a balanced diet recommended by veterinarians. 99% of the survey’s respondents regularly visit the veterinarian, making the veterinary-consultation the
most opportune moment to educate and correct misconceptions, helping owners to make healthy life-choices for their animals. Why don’t veterinarians seize this opportunity? One possible reason could be professionals’ misguided, incorrect assumptions about owners animal-health-knowledge. Future research could explore this territory in more detail, gathering common veterinarian misconceptions about owner awareness. Reducing misconceptions could increase communication efficiency.

Summary

In conclusion, the results of present study showed that communication and perceived interpersonal behavior has a vital impact on client trust, compliance and the veterinary care pets receive. The relationship between inadequate communication and significant deleterious health outcomes has already been recognized in human medicine, and ensured a place for communication among the core clinical competencies in human medical education. It can be argued that the same steps need to be taken in veterinary medicine. Communication and positive interpersonal behavior could not only be taught at university, but be something offered for already practicing veterinarians as well. Teaching communication should rest on an interactive approach, where veterinarians and veterinary students can be made aware of their own remitted verbal and non-verbal signals, and become more sensitive and receptive to their partners cues.
Abstract

This explorative study aims to investigate how veterinarian communication and veterinarian-owner relations influence dog and cat owner satisfaction, trust, compliance and the amount of veterinary care a pet receives. It also briefly explores owners’ general knowledge about their dog or cat, in an attempt to reveal common misconceptions that veterinarians might fail to take into consideration when consulting with the owner.

An online-survey was conducted among 568 (445 Female, 119 Male) dog and cat owners. Statistical analysis found that veterinarian communication skills correlate positively with client compliance ($r_s = 0.306; p < 0.01$), satisfaction ($r_s = 0.594; p < 0.01$) and trust ($r_s = 0.693; p < 0.01$). Weaker correlations were found between veterinarian communication and the amount of vaccinations and treatments cats ($r_s = 0.278; p < 0.01$) and dogs ($r_s = 0.160; p < 0.01$) receive. Using multiple, stepwise linear regression analysis it was also found that client satisfaction is largely accounted for by communication.

Areas of improvement in veterinary education and general veterinary communication are discussed in the light of the study’s results and recent research.
Abstract

Jelen feltáró jellegű tanulmány célja felmérni az állatorvosi kommunikáció, illetve állatorvos-tulajdonos reláció, minőségének a hatását a kutya- és macskatulajdonosok elégedettségére, bizalmára, compliance ("terápiás együttműködés") szintjére illetve háziállatuk egészségügyi ellátottságára. Továbbá röviden kitér a tulajdonosok kutyájukról vagy macskájukról szerzett általános ismereteire, hogy felfedjen néhány gyakori tévhitettet, amelyekre az állatorvosok nem is biztos, hogy gondolnak a konzultációk során.

Az online-kérdőíves felmérésben 568 (445 Nő, 119 Férfi) kutya és macskatulajdonos vett részt. Az adatok statisztikai elemzése pozitív korrelációt talált az állatorvos észlelt kommunikációs készsége és a kliens compliance szintje (r_s = 0.306; p < 0.01), elégedettsége (r_s = 0.594; p < 0.01) és bizalma (r_s = 0.693; p < 0.01) között. Gyengébb korrelációs értékek mutatkoztak az állatorvos kommunikáció, illetve macskák (r_s = 0.278; p < 0.01) és kutyák (0.160 **) védőoltási és kezelési ellátottsága között. Többszintű lineáris regresszió alapján a kliens elégedettségét nagyrészt befolyásolta az állatorvos kommunikációja.

Jelen tanulmány eredményei fényében az állatorvosi képzés és kommunikáció fejleszthető területeiről esik szó.
Appendix 1.

Veterinarian Communication Survey

Dog & Cat Owners!

I am conducting a survey to improve veterinarian communication, and investigate the owner-veterinarian bond.

If you own a dog or a cat, please help me by filling out this 15 minute questionnaire!

You will not be asked to state your name, all the information collected will be treated anonymously. The aggregated results will be used to write my final thesis. If you wish to know the results, please give me your email address at the end of the survey, and I will send them to you.

Thank you for your help, it is highly appreciated!

Roy Spigelman
Student of Veterinary Medicine

Page exit logic: Page Logic IF: Question "What kind of pets do you have?" #1 is not one of the following answers ("dog(s)","cat(s)") THEN: Disqualify and display: "Unfortunately, this survey is specifically for dog and cat owners. Thank you for your help and time!"

1) What kind of pets do you have?*

[ ] dog(s)
[ ] cat(s)
[ ] other: ____________________________________________
[ ] I don't have pets
Demographics

2) Gender:

( ) Female
( ) Male

3) Age:

________________________________________________________________________

4) Highest level of education:

( ) less than primary school
( ) primary school
( ) college
( ) technical school
( ) high school
( ) university degree

5) Do you live in a...

( ) capital city
( ) big city
( ) urban area
( ) rural area

6) Average monthly household income:

( ) 0 - 370 EUR
( ) 371 - 620 EUR
( ) 621 - 930 EUR
( ) 931 <

7) Which of the following best describes your status:
( ) student
( ) entrepreneur
( ) employee
( ) middle management
( ) higher management
( ) other: _________________________________________________

8) Who do you live with? Please make sure to indicate everyone you share a household with!

[ ] I live alone
[ ] parents
[ ] roommates
[ ] partner / spouse
[ ] children
[ ] other:: _________________________________________________

9) Do you study or work with animals professionally?

( ) no
( ) yes

Logic: Hidden unless: Question "Do you study or work with animals professionally?" #9 is one of the following answers ("yes")

10) Please state your profession:

______________________________________________

11) Regarding your animal's health, what is your main source of information?

( ) family
( ) friends
( ) my veterinarian
( ) the internet
Ownership

**Page exit logic:** Page Logic

**IF:** Question "With regard to one of your pets, how many times a year do you generally visit a veterinarian?" #15 is one of the following answers ("I have never been to the vet")

**THEN:** Jump to page 7 - (untitled)

**Logic:** Hidden unless: Question "What kind of pets do you have?" #1 is one of the following answers ("dog(s)"

12) How long have you owned a dog?

( ) 0 - 4 years
( ) 5 - 9 years
( ) 10 - 19 years
( ) 20 <

**Logic:** Hidden unless: Question "What kind of pets do you have?" #1 is one of the following answers ("cat(s)"

13) How long have you owned a cat?

( ) 0 - 4 years
( ) 5 - 9 years
( ) 10 - 19 years
( ) 20 <

14) I am currently the owner of:

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5 &lt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>cats</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dogs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
15) With regard to one of your pets, how many times a year do you generally visit a veterinarian?

( ) I have never been to the vet
( ) less than one time per year
( ) one time / year
( ) two times / year
( ) three times / year
( ) four or more times

Logic: Hidden unless: Question "With regard to one of your pets, how many times a year do you generally visit a veterinarian?" #15 is one of the following answers ("less than one time per year","one time / year","two times / year","three times / year","four or more times")

16) Please state the two main reasons for your visits to the vet:

[ ] vaccination
[ ] routine check-up
[ ] injury
[ ] illness
[ ] neutering
[ ] dental care
[ ] parasites (flea / tick)
[ ] euthanasia

Logic: Hidden unless: Question "With regard to one of your pets, how many times a year do you generally visit a veterinarian?" #15 is one of the following answers ("less than one time per year","one time / year","two times / year","three times / year","four or more times")

17) Do you:

( ) alternate between vets
( ) usually visit the same vet
18) Please state the **two main reasons** for why you visit the same vet:

[ ] my vet and I have a good relationship
[ ] my vet and my pet have a positive interaction
[ ] the clinic is close
[ ] the services are cheap
[ ] the vet is good professionally
[ ] the clinic has good equipment
[ ] other:: ____________________________________________

19) Could you please describe why you have never been to the vet?

____________________________________________
____________________________________________
____________________________________________
____________________________________________

20) Please indicate which of the following vaccinations/treatments your cat has received:

[ ] rabies vaccination
[ ] vaccination against infectious peritonitis
[ ] combined vaccine (against cat flu, calicivirus and panleukopenia)
[ ] vaccination against leukemia
[ ] against dermatophytes
[ ] anthelmintic
[ ] I don't know

21) Please indicate which of the following vaccinations/treatments your dog has received:

[ ] against canine parvovirus
[ ] against dystemper
[ ] against lyme disease
[ ] against rabies
[ ] against canine herpes virus
[ ] control of heartworms and intestinal parasites
[ ] against cennel cough
[ ] parasitic fungal infection
[ ] control of parasites (fleas, ticks, mites)
[ ] I don't know

22) Do you agree that it is healthy for your cat to eat vegetables?

( ) yes
( ) no

23) Do you agree that it is healthy for your dog to eat vegetables?

( ) yes
( ) no
24) I often give my pet....

<table>
<thead>
<tr>
<th></th>
<th>yes</th>
<th>no</th>
</tr>
</thead>
<tbody>
<tr>
<td>raw meat</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>bones</td>
<td>( )</td>
<td>( )</td>
</tr>
</tbody>
</table>

25) Do you allow your pet to eat chocolate?

( ) yes
( ) no

If you are the owner of more than one dog or cat, please choose one animal and keep him/her in mind, when answering the following questions.

I choose...

( ) a dog
( ) a cat

26) Did you:

( ) plan to get a pet
( ) get a pet without prior planning

27) Did you:

( ) buy your pet
( ) get your pet for free
( ) rescue your pet from an animal shelter
( ) take in a stray animal
28) Is your pet a pure breed?
( ) yes
( ) no

29) Is your pet mostly...
( ) outdoors
( ) indoors

30) Does your pet have a microchip?
( ) yes
( ) no

31) Does your pet have a passport?
( ) yes
( ) no

32) What do you usually feed your animal?
( ) dry food
( ) wet food
( ) house food
( ) raw food
( ) other: _________________________________________________

Logic: Hidden unless: Question "What do you usually feed your animal?" #32 is one of the following answers ("dry food","wet food")

Could you please state the brand name: ______________________________________________________
Please keep the vet you regularly visit in mind when answering the following questions!

If you alternate between vets and can’t think of one you regularly visit, please keep your last veterinary visit in mind when answering the following questions.

33) Vets gender:

( ) Male
( ) Female

34) Vets age:

( ) 25 - 35
( ) 36 - 45
( ) 46 - 55
( ) 56 <

35) Think of your vet / last veterinary visit and indicate to what extent you agree with the following statements:

**My vet....**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>can handle my pet well</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>asks relevant questions about my pet</td>
<td>( )</td>
<td>( )</td>
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<tr>
<td>listens attentively to my observations regarding my pet</td>
<td>( )</td>
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<td>( )</td>
<td>( )</td>
</tr>
<tr>
<td>Item</td>
<td>Strongly disagree</td>
<td>Disagree</td>
<td>Neither agree nor disagree</td>
<td>Agree</td>
<td>Strongly agree</td>
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<td>----------------------------------------------------------------------</td>
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<tr>
<td>dedicates enough time to me and my pet</td>
<td>( )</td>
<td>( )</td>
<td>( )</td>
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<tr>
<td>conveys important information thoroughly</td>
<td>( )</td>
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<tr>
<td>clearly explains why he/she recommends a treatment</td>
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<td>( )</td>
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<tr>
<td>clarifies the recommended treatment's benefits</td>
<td>( )</td>
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<tr>
<td>clarifies the recommended treatment's drawbacks / risks</td>
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<tr>
<td>offers me several treatment options</td>
<td>( )</td>
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<tr>
<td>respects my decision</td>
<td>( )</td>
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<tr>
<td>often uses professional lingo</td>
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<td>often misunderstands me</td>
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<tr>
<td>knows or asks what my pet's name is</td>
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<tr>
<td>makes encouraging statements</td>
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<tr>
<td>compliments my pet</td>
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</table>

36) My vet is ....

<table>
<thead>
<tr>
<th>Feeling</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
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<td>cold</td>
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<td>dismissive</td>
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<td>Neither agree nor disagree</td>
<td>Agree</td>
<td>Strongly agree</td>
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<tr>
<td>nice</td>
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</tr>
<tr>
<td>anxious</td>
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<td>decisive</td>
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<tr>
<td>empathetic</td>
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<td>calm</td>
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<td>understanding</td>
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<tr>
<td>insecure</td>
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<td>patient</td>
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</tr>
</tbody>
</table>

37) Please indicate to what extent you agree with the following statements:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neither agree nor disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>my vet honestly cares about my animal</td>
<td>()</td>
<td>()</td>
<td>()</td>
<td>()</td>
<td>()</td>
</tr>
<tr>
<td>my vet is professionally competent</td>
<td>()</td>
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</tr>
<tr>
<td>I can't follow the instructions my vet gives me</td>
<td>()</td>
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</tr>
<tr>
<td>I can't ask questions of my vet</td>
<td>()</td>
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<tr>
<td>I trust my vet</td>
<td>()</td>
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</tr>
<tr>
<td>I often forget, or have a hard time remembering, my vet's instructions</td>
<td>()</td>
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<td>()</td>
</tr>
</tbody>
</table>
38) How satisfied are you with your veterinarian?

( ) Very satisfied
( ) Satisfied
( ) Neither satisfied nor dissatisfied
( ) Dissatisfied
( ) Very dissatisfied

39) Do you follow your vet's instructions?

( ) Almost never (0-20%)
( ) Sometimes (20-40%)
( ) About half the time (40-60%)
( ) Usually (60-80%)
( ) Almost always (80-100%)

40) It would be very important for me to know, what the reason is behind you not following your vets instructions?

____________________________________________
____________________________________________
____________________________________________

41) Further comments, thoughts regarding the questionnaire:

____________________________________________
____________________________________________
____________________________________________
____________________________________________

If you are curious to know the results of this survey, please provide your email address below:

______________________________________________

The overall results will be sent to you at the end of May.

Thank you for your time and effort!
Your contribution is highly appreciated!
Állatorvosi kommunikáció

Kutya & Macska Tulajdonosok!

Kérdőíves vizsgálatot folytatok az állatorvosi kommunikáció fejlesztése, illetve az állatorvos-gazda és háziállat-gazda kapcsolat, vizsgálata érdekében.

Ha Ön kutya-, vagy macskatulajdonos, kérem segítsen az alábbi 15 perces kérdőív kitöltésével!

A kérdőív névtelen, az adatokat anonim módon kezelem, összesített adatbázisból dolgozom. Az adatokat szakdolgozatom megírásához fogom felhasználni. Amennyiben a kérdőív végén megadja email-címét a vizsgált végleges eredményét is megismerheti.

Megbecsülöm és köszönöm segítségét!

Spigelman Roy
Végzős állatorvostan hallgató

Page exit logic: Page Logic

IF: Question "Ön milyen háziállatot tart?" #1 is not one of the following answers ("kutyát","macskát")

THEN: Disqualify and display: "Köszönöm segítő szándékát, részvételét. Sajnos ez a kérdőív kizárólag macska- és kutyatulajdonosok felé irányul."

1) Ön milyen háziállatot tart?*

[ ] kutyát
[ ] macskát
[ ] egyéb: _________________________________________________
[ ] nem tartok háziállatot
Demográfia

2) Nem:
( ) Nő
( ) Férfi

3) Életkor:

4) Legmagasabb iskolai végzettség:
( ) kevesebb, mint 8 általános
( ) általános iskola
( ) szakmunkásképző
( ) szakközépiskolai érettségi, technikum
( ) gimnáziumi érettségi
( ) főiskola, egyetemi diploma

5) Milyen településen él:
( ) főváros
( ) megyei székhely
( ) város
( ) falu

6) Mennyi pénz felett rendelkezik havonta háztartása:
( ) 0 - 120.000
( ) 121.000 - 200.000
( ) 201.000 - 300.000
( ) 301.000 <
7) Milyen pozícióban dolgozik Ön?

( ) diák
( ) vállalkozó
( ) alkalmazott
( ) középvezető
( ) felsővezető
( ) egyéb: ____________________________________________

8) Kivel él egy háztartásban? Mindenkit jelöljön be, akivel közös háztartásban él!

[ ] egyedül
[ ] szülökkel
[ ] szobatárrsal
[ ] partnerrel
[ ] gyermekekkel
[ ] egyéb: ____________________________________________

9) Ön szakmája/tanulmányai szerint állatokkal foglalkozik?

( ) nem
( ) igen

Logic: Hidden unless: Question "Ön szakmája/tanulmányai szerint állatokkal foglalkozik?" #9 is one of the following answers ("igen")

10) Kérem, jelezze szakmáját:

_________________________________________________________________

11) Háziállatának egészsége ügyében jelezze fő információforrását:

( ) családtagok
( ) barátok
( ) állatorvosom
( ) internet
( ) könyvek
( ) egyéb:: _________________________________________________

Page exit logic: Page Logic
IF: Question "Egy háziállatának tekintetében évente átlagosan hányszor látogat el állatorvoshoz?" #15 is one of the following answers ("soha sem voltam még állatorvosnál") THEN: Jump to page 7 - (untitled)

Logic: Hidden unless: Question "Ön milyen háziállatot tart?" #1 is one of the following answers ("kutyát")

12) Mióta tart kutyát?

( ) 0 - 4 éve
( ) 5 - 9 éve
( ) 10 - 19 éve
( ) 20 <

Logic: Hidden unless: Question "Ön milyen háziállatot tart?" #1 is one of the following answers ("macskát")

13) Mióta tart macskát?

( ) 0 - 4 éve
( ) 5 - 9 éve
( ) 10 - 19 éve
( ) 20 <

14) Őn jelenleg gazdája:

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>macskának</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>kutyának</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15) Egy háziállatának tekintetében évente átlagosan hányszor látogat el állatorvoshoz?
( ) soha sem voltam még állatorvosnál
( ) évente egynél kevesebbszer
( ) évente egyszer
( ) évente kétszer
( ) évente háromszor
( ) évente négykétszer vagy többször

16) Kérem jelezze a két leggyakoribb okot állatorvoshoz tett látogatására:

[ ] védőoltás
[ ] rutin vizsgálat / állapotfelmérés
[ ] sérülés
[ ] betegség
[ ] ivartalanítás
[ ] fogászat
[ ] élősködők (bolha / kullancs)
[ ] eutanázia

17) Ön:

( ) váltogatja az állatorvosokat
( ) általában ugyanahhoz az állatorvoshoz jár

18) Mi a két legfontosabb oka annak, hogy ugyanahhoz az állatorvoshoz jár?
[ ] állatorvosom és én jó kapcsolatot ápolunk
[ ] állatorvosom és háziállatom jó kapcsolatban vannak
[ ] a rendelő közel van
[ ] a szolgáltatások olcsóak
[ ] állatorvosomat jó szakembernek tartom
[ ] a rendelő jól felszerelt
[ ] egyéb:: __________________________________________________________________

Kérem írja le, mi az oka annak, hogy még nem volt állatorvosnál?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Kérem jelezze, hogy a következő kezelések/oltások közül melyeket kapta meg (egyik) macskája?

[ ] veszétség elleni védőoldás
[ ] fertőző hashártyagyulladás elleni védőoltás
[ ] kombinált védőoltás (macskanátha, calicivirus és panleukopenia ellen)
[ ] leukózis elleni védőoltás
[ ] bőrgomba ellen
[ ] rendszeres féreghajtó
[ ] nem tudom
20) Kérem jelezze, hogy a következő kezelések/oltások közül melyeket kapta meg (egyik) kutyája?

[ ] parvovírusos bélgyulladás ellen
[ ] szopornyica ellen
[ ] lyme kór ellen
[ ] veszélytelen ellen
[ ] herpes vírus ellen
[ ] rendszeres féreghajtó / féregtelenítő
[ ] kennelköhögés ellen
[ ] bőrgomba ellen
[ ] élősködők kezeltetése (bolha / kullancs / atka)
[ ] nem tudom

21) Egyetért azzal, hogy egészséges macskája számára zöldséget enni?

( ) igen
( ) nem

22) Egyetért azzal, hogy egészséges kutyája számára zöldséget enni?

( ) igen
( ) nem
23) Gyakran ad háziállatának....

<table>
<thead>
<tr>
<th></th>
<th>igen</th>
<th>nem</th>
</tr>
</thead>
<tbody>
<tr>
<td>nyershúst</td>
<td>()</td>
<td>()</td>
</tr>
<tr>
<td>csontot</td>
<td>()</td>
<td>()</td>
</tr>
</tbody>
</table>

24) Megengedi, hogy háziállata csokoládét egyen?

( ) igen
( ) nem

Ha Ön több kutyát, illetve macskát tart, *kérem válasszon ki egy állatot, akire gondol a következő kérdések kitöltése során.*

Én most ..... gondolok.

( ) kutyára
( ) macskára

25) Ön:

( ) tervezte, hogy háziállata lesz
( ) tervezetlenül alakult úgy, hogy háziállata lett

26) Ön:

( ) vette háziállatát
( ) ingyen kapta háziállatát
( ) állatmenhelyről hozta háziállatát
( ) kóbor állatot fogadott be

27) Az Ön háziállata fajtatisza?

( ) igen
( ) nem
28) Az Ön macskája / kutyája ideje többségét .......... tölti

( ) kinn
( ) benn

29) Háziállatának van microchip-je?

( ) igen
( ) nem

30) Háziállatának van útlevele?

( ) igen
( ) nem

31) Általában milyen táplálékot ad háziállatának? (pl. száraztáp, nedvestáp, házikoszt, nyershús; illetve márkanév)

( ) száraztáp
( ) nedvestáp (konzerv)
( ) házikoszt
( ) nyershús
( ) egyéb: ____________________________

Logic: Hidden unless: Question "Általában milyen táplálékot ad háziállatának? (pl. száraztáp, nedvestáp, házikoszt, nyershús; illetve márkanév)" #31 is one of the following answers ("száraztáp","nedvestáp (konzerv")

Kérem adja meg a márkanevet:

________________________________________
Állatorvosának személyisége, kommunikációja

A következő állítások kitöltésénél kérem gondoljon rendszeresen látogatott állatorvosára!

Amennyiben nincs rendszeresen látogatott állatorvosa, gondoljon legutóbbi állatorvosi látogatására.

32) Állatorvosának neme:

( ) Férfi
( ) Nő

33) Állatorvosának életkora:

( ) 25 - 35
( ) 36 - 45
( ) 46 - 55
( ) 56 <

34) Kérem gondoljon állatorvosára és jelezze, milyen mértékben ért egyet az alábbi állításokkal:

<table>
<thead>
<tr>
<th></th>
<th>Egyáltalán nem értek egyet</th>
<th>Inkább nem értek egyet</th>
<th>Igen is, nem is</th>
<th>Inkább egyetértek</th>
<th>Teljes mértékben egyetértek</th>
</tr>
</thead>
<tbody>
<tr>
<td>jól tud bánni háziállatommal</td>
<td>( )</td>
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</tr>
<tr>
<td>releváns kérdéseket tesz</td>
<td>( )</td>
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</tr>
<tr>
<td>fel háziállatomról</td>
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<tr>
<td>figyelemmel hallgatja észrevételeimet háziállatomról</td>
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<td>( )</td>
</tr>
<tr>
<td>előg időt fordít rám és háziállatomra</td>
<td>( )</td>
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</tr>
<tr>
<td>fontos információkat alaposan ismertet</td>
<td>( )</td>
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</tr>
<tr>
<td>egyértelműen elmondja, miért javasolja a kezelést</td>
<td>( )</td>
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<tr>
<td>tisztázza velem az ajánlott kezelés előnyeit</td>
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<tr>
<td>tisztázza velem az ajánlott kezelés hátrányait / kockázatait</td>
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<tr>
<td>több kezelési lehetőséggel kínál meg</td>
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<tr>
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<td>tudja vagy megkérdezi háziállatom nevét</td>
<td>()</td>
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</tbody>
</table>

35) **Állatorvosom...**

<table>
<thead>
<tr>
<th>Távol-ságtartó</th>
<th>Egyáltalán nem érték egyet</th>
<th>Inkább nem érték egyet</th>
<th>Igen is, nem is</th>
<th>Inkább egyetértek</th>
<th>Teljes mértékben egyetértek</th>
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</tr>
</tbody>
</table>
36) Milyen mértékben ért egyet az alábbi állításokkal?

<table>
<thead>
<tr>
<th></th>
<th>Egyáltalán nem értek egyet</th>
<th>Inkább nem értek egyet</th>
<th>Igen is, nem is</th>
<th>Inkább egyetérték</th>
<th>Teljes mértékben egyetérték</th>
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</thead>
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</tr>
<tr>
<td>nem tudom állatorvosom instrukcióit követni</td>
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<td>()</td>
</tr>
<tr>
<td>nem tudok kérdéseket feltenni állatorvosomnak</td>
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<td>()</td>
<td>()</td>
<td>()</td>
</tr>
<tr>
<td>megbízhatom állatorvosomban</td>
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<td>()</td>
</tr>
<tr>
<td>gyakran elfelejtem, nehezen emlékszem, állatorvosom instrukcióira</td>
<td>()</td>
<td>()</td>
<td>()</td>
<td>()</td>
<td>()</td>
</tr>
</tbody>
</table>
37) Mennyire elégedett állatorvosával?

( ) Elégedett vagyok
( ) Inkább elégedett vagyok
( ) Igen is, nem is
( ) Inkább elégedetlen vagyok
( ) Nem vagyok elégedett

38) Követi állatorvosának instrukcióit?

( ) Szinte soha (0 - 20%)
( ) Néha (20 - 40%)
( ) Az esetek felében (40 - 60%)
( ) Általában (60 - 80%)
( ) Majdnem mindig (80 - 100%)

39) Nagyon fontos lenne számomra megtudni, mi általában az oka annak, ha nem követi állatorvosa instrukcióit?

____________________________________________
____________________________________________
____________________________________________
____________________________________________

40) A vizsgálattal / kérdőívvel kapcsolatos további gondolatok, megjegyzések:

____________________________________________
____________________________________________
____________________________________________
____________________________________________

Amennyiben kíváncsi a vizsgálat eredményeire, itt megadhatja email-címét, amelyre május végéig egy - a vizsgálat eredményeit összefoglaló - üzenetet kap.

____________________________________________

Nagyon szépen köszönöm a kérdőívre szánt idejét, energiáját!
Appendix 3.

REASONS FOR LACKING COMPLIANCE

Q: It would be very important for me to know, what the reason is behind you not following your vets instructions?

<table>
<thead>
<tr>
<th>No.</th>
<th>%</th>
<th>QUALIFIED AS</th>
</tr>
</thead>
<tbody>
<tr>
<td>327</td>
<td>57,6</td>
<td>57,6</td>
</tr>
<tr>
<td>4</td>
<td>7</td>
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</tr>
<tr>
<td>1</td>
<td>2</td>
<td>NO ANSWER</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>HARD TO EXECUTE</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>HARD TO EXECUTE</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>MONEY GAIN</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>FORMER EXPERIENCE</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>HARD TO EXECUTE</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>CURRENT STATE OF ANIMAL</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>COMPLY</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>NOT GOOD INSTRUCTIONS</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>COMPLY</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>COMPLY</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>COMPLY</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>COMPLY</td>
</tr>
</tbody>
</table>

A cica imádja a nyers hüst
A cicám egy hete halt meg FIP betegségben, amit a "doktor úr" nem vett észre. Másik állatorvoshoz vittem, a cicát 5 másodperc alatt diagnosztizálta és el kellett altatni (mája már régen nem működött szeme-bőre citromsárga volt, nem evett, ődéma volt mindene stb.) Pénzleuházásról szólt a dolog kettő héten át napi 5-6 ezer. Soha, de soha nem megyek hozzá többet! A városunkban már többen panaszkoztak rá ilyen dolgok miatt. Most először jártam ennél a "doktornál" mert ő volt hétvégén ügyeletes. Nem fogom követni a tanácsait egy olyan "orvosnak" aki kinok-kinja halálra ítél egy ártatlan élőlényt pusza haszonszerzés céljából, nem törödve a kiscica kinjaival és a gazdája szívfájdalmával.
A családban tartott kisállatokon végzett beavatkozások tapasztalatai alapján szeretünk mérlegelni a döntés meghozatala előtt.
A kutyám nem szerette a gyógyszer-kiegészítőt, így elmaradozott a bevétel.
A kutyánnak pl.a szemcsepp.,lábadozásnál már!
A macska állapotát figyelembe veszem.
A választott állatorvos instrukcióját követem, mindent el szokott magyarázni (mit, miért). Más állatorvos esetében, ha nem megfelelő a tájékoztatás, bizalmatlan vagyok.
Általában követem.
Always do
Always follow his instructions
Always following his instruction
Amikor csak telefonon kommunikálunk az állat egy problémájával kapcsolatban, akkor a nem kellő információ miatt nem biztos, hogy olyan javaslatot tesz, ami szerintem indokolt amikor láttam, hogy a kutyus sokkal jobban van, nem tartottam már be pontosan a diétát (nem lett baj belőle)
Amiőta ÖT megtaláltam, mindig követem az instrukcióit! Rengeteg kókerrel találkoztam sajnos, mielőtt megtaláltam az igazit...
As a future vet I feel that I can make the best decisions for my dog and cat. Some vets that I met advised me to do unnecessary surgeries or treatment because they want to earn money or make a quick and wrong diagnose.. I use the vet more as a consultant to check if I am on the right path, if I am not sure or if I need medication or there is something urgent.
As a vet I have my own opinion about some things...
A kutyámnak sajnos nem volt olyan sok jövőhely, de amikor beszélünk a kutyámról, sokkal jobban van, nem tartottam már be pontosan a diétát (nem lett baj belőle)
Az állatorvosom egy barom, fiatal önelégült és pénzre hajt. De ez jellemző Eddig öt állatorvosunk volt mindegyiknek a pénz volt fontos... Az egyik műteni akarta pénz miatt, miközben csak meghúzta a kutyám a lábát. Új állatorvos keresem egészen addig amíg csak oltás kell addig itt van ez , de komolyabb baj esetén biztos hogy nem viszem ide akkor korházba megyünk. Egy normális kutyabarát állatorvost nem ismerek. mindegyik csak a pénz miatt csinálja...
Az állatorvosom egy barom, fiatal önelégült és pénzre hajt. De ez jellemző Eddig öt állatorvosunk volt mindegyiknek a pénz volt fontos... Az egyik műteni akarta pénz miatt, miközben csak meghúzta a kutyám a lábát. Új állatorvos keresem egészen addig amíg csak oltás kell addig itt van ez , de komolyabb baj esetén biztos hogy nem viszem ide akkor korházba megyünk. Egy normális kutyabarát állatorvost nem ismerek. mindegyik csak a pénz miatt csinálja...
Az általa ajánlott és forgalmazott táptól jobbat adok a kutyáknak. Because I trust him.
Bízom benne és hogy segíteni akar
Busy schedule sometimes forget
Cicám egészségének romlása.
Convenience, time, spoiling
Cost
Drága táp
Eddig mindig követtük az állatorvos instrukcióit. A kivétel akkor történt, ha a kutyánknak jelentős fájdalmat okozna a kezelés és/vagy nem használna. Ezt esetben valószínűleg visszamennénk az állatorvoshoz és arra kérnénk adjon más megoldást.
Egy előző kezelésből adódó más tapasztalat.

Egy eset volt. Gallér kellett a kutyámra hogy ne nyalja a sebet. Mivel nem jól viseli (nem tud közlekedni vele, felakad mindenhol) ezért levettem róla de csak akkor amikor otthon voltam és figyeltem rá.

Egyéb személyes tapasztalat

elfeledkezem rola :) 
Elfelejtettem dolgokat, pl. ha bizonyos időközönként kell beadni gyógyszert.
Elfelejtettem valamit.
elfelejtettem
Elfelejtettem vagy problemak lepnek fel
Elfelejtettem, hogy mi volt az.
Elfelejtettem, időhiány
Elfelejtettem.
Elfelejtettem.
elfelejtjük

Ennek egyetlen oka van, ha nem tudom követni. Pl. nőstény macskámnak ivartalanítása után 2 hétig nem szabad lett volna felugrani magasabb helyekre, de ezt csak részben tudtam megoldani, ahogy jobban érezte magát, egyre többet ugrott...

Ez nem fordul elő.
Ez nem fordult még elő.
Félelétem, vagy nem értem, mi az instrukció oka.

forget lengthy instructions, timing of flea treatments etc
Forget sometimes
Forget to give tables at times
Generally forget during routines

Gyakran nem érzem, hogy a kezelés szükséges lenne (nem győz meg erről), sokkal inkább érzem, hogy kizárólag a pénz motiválja.
Ha a cicám a kezelésre rosszul reagál, pl. előre nem ismertetett tüneteket produkál (habzik a szája)
Ha a kezekes egyáltalan nem hízza mwg a kivant javulast..inkább jelzem harom nap mulva es visszamegyek
Ha a kutyám rosszul reagál egy gyógyszerre, rögtön abbahagyom az adagolást és felhívom az állatorvosunkat.

Ha anyagilag nem tudom teljesíteni (pl. számomra drága táp vásárlása), megfizethetetlen orvosi kezelések, beavatkozások (allergia vizsgálat).

Ha drága oltásokat ajánl, amielyekre úgy érzem nincs szüksége kutyámnak.

Ha egy gyógyszere kezelésre több időt ír elő, mint, ahogy az állatom jobban lesz egészségügyileg. Akkor vannak esetek, amikor előbb befejezem a kezelést.

Ha elkezdem a kezelést és azt látom, hogy nem válik be

Ha házíállatom rosszul reagál a kezelésre.

Ha már elmúlt a probléma / alternatív megoldást találunk / korábban nem vált be a javaslat

Ha mas, szamomra megbízható, kompetens szemely (szerencsére sok tapasztalt kutyas van a kornyezetemben) mast tanacsol, elkezdelhető, hogy hallgatok rá, de olyankor is inkább konzultalok az állatorvossal.

Ha mégsem követem akkor az azért történhet meg mert az állat jelzéseit, igényeit követem.

Ha nagyon drága eljárást, vagy kezelést javasol

Ha nehezen kivitelezhető az állatorvos kérése, akkor nem biztos, hogy követem a kérését, bár minden tölem telhetőt megteszek.

Ha nem tudom a haziállatommal kapcsolatosan kivitelezni.

Ha sokáig tart egy kezelés és nincs változás.

He's been rated very highly among other pet owners, which indicates that he's professionally good. Hence, I see why wouldn't anyone not want to follow the instructions given by the vet.

I almost always follow his advice. He has been right in all the cases so far so I have no reason to doubt what he says. Also I feel that he genuinely cares for the animals he treats and wants to help them in the best way possible.

I almost always follow my vet's instructions.

I always do.
I always follow
I always follow his instructions.
I always follow instructions
I always follow it.
I always follow the instructions
I always follow them, they know best
I always following his instructions
I am always following.
I am searching for homeopathic alternative prior to give normal
medicine to my cats, and I search on cat behaviour a lot to avoid
medicine and usually it works better
I believe I knew my pet would be fine anyway (being outdoors when
young)
I can’t really see that I wouldn’t.
I do everything she tells me to do!
I do follow
I do follow instructions this survey is awful
I do follow my vets instructions
I do follow my vets instructions not sure why survey is asking me
this
I do follow my Vets instructions.
I do follow them
I do follow them?
I do following
I follow all the medication he gives me but I would not follow a
nutritional advice as he just has no idea about alternative diet and
just says no as he has no idea about it.
I follow everything what’s possible. If I can’t follow the instructions,
it’s due to very far away or too expensive extra treatment. (Until
now at least).
I follow instructions
I follow my vets instructions to the best of my ability :).
I follow the instruction
I follow them
I forget them.
I forget to give medicine on time
i pity the fool ;)

1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 COMPLY
1 2 FORGETFULNESS
1 2 FORGETFULNESS
1 2 HARD TO EXECUTE
I think time to complete what is needed and cost in returning to the vet.

I try to follow always. Except when she told me not to kiss my cat. That I refuse to follow :D :/ :) I usually do.

I usually follow her advice because if I am insecure we discuss about it and she explains me why to do so or so.

I usually follow the instructions. I would always try to follow my vet's instructions. I would only not follow them after extensive research and alternate opinions to see what seems to work best for and be in the highest interest of my pets.

I've followed my vet's instructions the majority of the time, I have tried my cat on a different diet i.e./mainly wet fish food instead of dry, as it seemed to help stop his diarrhea. After fecal tests, it came back he has coronavirus so it's possible the stools got firmer from the virus stopping shedding after about 4 weeks and not the duet itself, it's hard to be sure.

If I can find an alternative treatment for an ailment for one of my pets which does not include strong chemicals I will follow my own instinct and not the vet's instructions. Obviously, only in non life threatening or very serious cases.

If I find cheaper pills for treatment.

If I on some occasions learned something else/got another treatment from another vet that I have more faith in.

If I would not follow it would be because I have gotten an other opinion.

If there is going to be a time where I don't follow the vet's instructions it would be because of financial ability.

If they are impractical, e.g. timing 3 times a day (when we work full time - only have morning and night options)

If things heal faster than anticipated I tend to relax a bit on the instructions on "go easy, be careful, keep clean", etc.

Igyekszem követni, de néha elfelejtek 1-1 dolgot (a saját gyógyszereimet is elfelejtem néha, mivel nem szedek gyakran), nincs benne a megszokott napirendben.

Ilyen még nemvolt.
ilyen nagyon ritkán fordul elő, és az oka általában az, hogy úgy lárom a kutyámon, hogy jobb neki úgy, ahogyan én gondolom - ilyen esetekben mindig egyeztetünk is az állatorvossal.
in general any non following is based on missed medications, not because of any issues.
It depends on what it is, sometimes I know my cat better... When it's about food for instance, I know what she will eat or not. It's mostly the animal who won't follow the instructions... Regarding e.g. wearing a collar, bandages etc...
it's not always possible to follow them. the vet said to keep the cat indoors for two weeks and after one he was better and more agitated to be indoors then been let out suring the days.
Jaahhhhh
Jobban ismerem a kutyám :) De ez általában ritka, hogy nem tartom be.
Kezelések anyagi oldala
Kivételes esetekben anyagi okok vagy időhiány miatt. Például: állatpatika nyitvatartása egybeesik a munkaidővel, így csak pár nappal később szerezhettem be a felírt fülcseppet.
Kutyámnak van egy kis tülsülya, így nem ajánlott neki a nasi falatok. Viszont én ezt nem tudom megállni. lazyness
Macska eü. problémákkal kapcsolatban nem követem mindig az állatorvosom instrukcióit, mivel alapos utána járást követően úgy érzem, hogy nem feltétlenül az a kezelés az ideális a cicának, amit ő ajánl.
Mást diktálnak az ösztöneim Mast hallottam mas állatorvostol May forget by the end of treatment (+ see improvements) or understood directions and decided to not go ahead. maybe because they are lengthy, expensive and complicated
Maybe distinct improvement. I always consult.

Mert tenyésztői tapasztalattból sokszor jobban tudom nála mit kell csinálnom, egy egy fajtához a tenyésztő jobban ért sok esetben a fajtaspecifikus dolgok terén.

Mindig a lehető legegyszerűbb megoldást preferálom.

mindig követem
Mindig követem
Mindig követem állatorvosom instrukcióját
mindig követem az instrukciókat, már csak a kutyám érdekében is
Mindig követem az utasításait, mert MEGMAGYARÁZZA számomra érthető módon, hogy miért úgy kell cselekednedem.

Mindig követem!
Mindig követem.
Mindig követem. Ha esetleg mégsem követném, annak az lehetne az oka, hogy napközben nincs otthon senki, de ilyen még nem volt.

mindig követjük az instrukcióit
Mindig megteszem amit mondanak
miss the times to give flea treatment because of laziness
Mivel a macska kizárólag a lakáson belül él, ezért a féreghajtót nem feltétlenül évi 4, hanem néha kevesebb alkalommal kapja meg (kettő) - ellenőrizött és a lehetőségeinkhez képest minőségi mackaeledelt kap, ráadásul az állatorvos látogatása nagy stressz is számára.

My vet gave instructions about that I should make sure that the buyers had the kittens neutered. Only one of them had a medical reason for it (I told that buyer to check with a vet and that he would probably have to neuter the cat) but with the others it was her own personal opinion and she said that it was necessary that all cats are.

NA

Napi időbeosztás (napi sokszori kezelés pl szemcsepp nem mindig kivitelezhető) fogyókúra: család többi tagjával megértetni a fontosságot
Néha elfelejtem rájuk cseppenteni a küldő élősködők elleni cseppeket.
Néha kivitelezhetetlen.
Néhány esetben fordult elő, amikor a kutyám jelzéseit úgy éreztem jobban ismerem.
Nem megvalósítható

Nem nagyon van ilyen.
Nem szokott előfordulni, mindent érhetően magyaráz és kérdéssel bármikor fordulhatunk hozzá. Oltás esetében szokott a késleltetés előfordulni anyagi okokból.

nem szokott ilyen előfordulni

Nem szoktam felülni az instrukcióit. Olyan már előfordult, hogy utánaolvastam annak, amit mondott. Ilyen esetben, mindig megerősítést kaptam, hogy más állatorvosok is hasonlóan látják a kérdést mint ő.

Nem találom lényegesnek a kérdést, melyben eltérek a tanácsolttól, azonban minden fontos kérdésben az általa javasoltakra hagyatkozom.

nem történt még ilyen, de akkor nem követném, ha az nem lenne eredményes illetve ha nem lenne empatikus a köztem és a kutyám között levő kapcsolat vonatkozásában

nem tudom ki a jelenlegi lakóhelyemen az állatorvos életem során többször költöztet. Eleinte kutyám is és macskám is volt. Jelenleg csak macskám van. Vidéken minden évben új macskát kellett kéríteni a gyerekek könyörgésére, de sajnos ahogy telt az idő a macskák egyszer csak nem jöttek haza. Tehát jelenlegi lakóhelyemen nem jártam állatorvosnál.

Nem tudtam követni azt az utasítást, hogy beadjam a gyógyszert a cicának, mert lehetetlen volt. (Így visszavittem, és megkapta injekcióból.)

Nem volt még kifejezetten jellemző, de ha időközben változik valami és dönteni kell akkor meghozom a döntést a tapasztalataimra alapozva...

nincs
Nincs ilyen
Nincs ilyen eset
Nincs ilyen, kovetem, mert bizom a szakertelmeben
nincs ilyen.
Nincs ilyen.
Nincs ilyen. Ha az állatorvos pl. gyógyszert ír fel a kutyának, addig adom neki, amíg elő van írva. Nem bíralom felül. Ő a szakember.

nincs ilyen......................
Nincs különösebb oka
Nincs olyan
Nincs olyan eset
Nincs olyan, megfogadom a tanácsát
not enough time to do the instructions when they are to much time-
demanding
Olyan gyógyszerbevételei módot ír elő, ami a kutyám esetében
kivitelezhetetlen (szájba cseppentett olajos folyadék)
Other opinion
pénzügyi, időhiány,

pl. nem tudom beadni a macskámnak a gyógyszert, hiába
szeretném... :-) 
Pl.: ivartalanítás után kötelező lenne a gallér viselése, amit én
ebben az esetben ezt diktált a. Az orvos utasításának ellenére a
varratok a műtétek után mindig én szedtem ki, szintén azért, hogy
az állat nyugodtabb körülmények között lábadozhasson.
saját szétszórtsgom
Sajnos változások vannak a rendelőben. Mindég más orvos van, de
eddig csak ivartalanítás és kötelező oltás volt + combinált. Így nem
tudom a dokit véleményezni.
Seb kezeléshez a porcukros kezelést választom, de a Doktor úr

ebben az esetben nem vitázik velem!
She is not with my dog 100% of the time, unlike me
Simple forgetfulness
Small pieces of advice he offers that I may forget until the next visit.
I follow all main recommendations
Sometimes he showed clear unsureness of what caused my dog’s
illness and had to look stuff up in a book in front of me, which made
me want to Google his advice later when I got home.
Sometimes I think he is not very extensive, thats why I try to find
other solutions. In a lot of time, This is me who asked about a
probably problem, it is not him, who tell me. So, sometimes I think "I
know more” Than him...
Sometimes is easier to say then do.
Sometimes it just won't work out, not because I don't trust her but
because of my doggie
Sometimes my opinion conflicts with their opinion. Often times both
are acceptable professional opinions just a personal choice makes
the difference.
<table>
<thead>
<tr>
<th>Hungarian Alternative</th>
<th>English Alternative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Szeparalas megoldasa nehezkes</td>
<td>HARD TO EXECUTE</td>
</tr>
<tr>
<td>Szétszórt vagyok, és elfelejtem.</td>
<td>FORGETFULNESS</td>
</tr>
<tr>
<td>Szinte soha nem fordul ez elő.</td>
<td>COMPLY</td>
</tr>
<tr>
<td>Szoktam követni.</td>
<td>COMPLY</td>
</tr>
<tr>
<td>Szteroid kezelésnél fél adagot adok, mert láthatóan nem jó a kutyának az előírt mennyiség. Ha betegség után mindent rendben találok nem mindig viszem vissza kontollra.</td>
<td>OWN DECISION</td>
</tr>
<tr>
<td>Teljesen megbízok benne</td>
<td>COMPLY</td>
</tr>
<tr>
<td>There are two other cats in the household My cat hates being brushed My cat hates even more been teethbrushed They are to complicated.</td>
<td>HARD TO EXECUTE</td>
</tr>
<tr>
<td>They haven't given any instructions to follow or I felt they were not acting in the best interests of my pet in which case I would go to another vet for a second opinion. Too time-consuming and hard to brush the dogs teeth</td>
<td>COMPLICATED INSTRUCTION</td>
</tr>
<tr>
<td>túl bonyolultak, vagy idő előtt jobban lesz/meggyőgyul a kutya</td>
<td>COMPLICATED INSTRUCTION</td>
</tr>
<tr>
<td>Túl drága javaslatot tesz, vagy bonyolultnak tartom.</td>
<td>PRICE-SENSITIVITY</td>
</tr>
<tr>
<td>Ugy latom, hogy nem vezet eredményre,amit javasolt. Van amikor kéri, hogy hozzam be vizsgálatra a cicát,de nem mindig tudom megfogni űt(őket)</td>
<td>OWN DECISION</td>
</tr>
<tr>
<td>Vets have a tendency to prescribe antibiotics too fast too be on the safe side. My dog was experiencing loss of appetite (he usually eats anything and everything) and diarrhea (with some blood in it) and the vet prescribed a Hill’s gastrointestinal dry and wet food, my dog refused this food but would eat the cheap brand wet food bought from a grocery store and eventually his own dry food. In my opinion it was better for my dog to eat something than nothing at all. Being able to see your pet on a day-to-day basis gives owners a distinct advantage over vets, in addition I am a vet student.</td>
<td>OTHER OPINION</td>
</tr>
<tr>
<td>We following our vets instructions.</td>
<td>COMPLY</td>
</tr>
</tbody>
</table>
Well the only instruction I got was to keep the cone one for four days. Which was deceptively easy to follow. (The cat didn’t agree) Because of this I followed the instructions perfectly. I would imagine (and I say this based on earlier experience) that if I did not follow a veterinarian’s instructions is because they ask more than I/we could provide. For example something that would require too much time, when we’re at work. Naturally we try to do a conscientious choice here, with the cat’s best in mind. At one point we were asked to keep it away from other cats, which interfered with it’s ability to get outside and play.

When im not sure

When it goes against my understanding or when the treatment is from old times (only older vets still do it that way). Or when, in my opinion, not necessary vaccination is recommended

When my animal is suffering (cancer) and is old, when euthanasia seems to be a better solution than thousand of theathments

When offering things I don’t feel benefit my dog that much and that he is just looking for extra money

When the vet did not explain it well or did not insist on it

Yes

Total

| HARD TO EXECUTE | 1,2 |
| INSECURE | 1,2 |
| UNIMPORTANT INSTRUCTION | 1,2 |
| CURRENT STATE OF ANIMAL | 1,2 |
| MONETARY GAIN | 1,2 |
| COMPLICATED INSTRUCTION | 1,2 |

Total 568
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