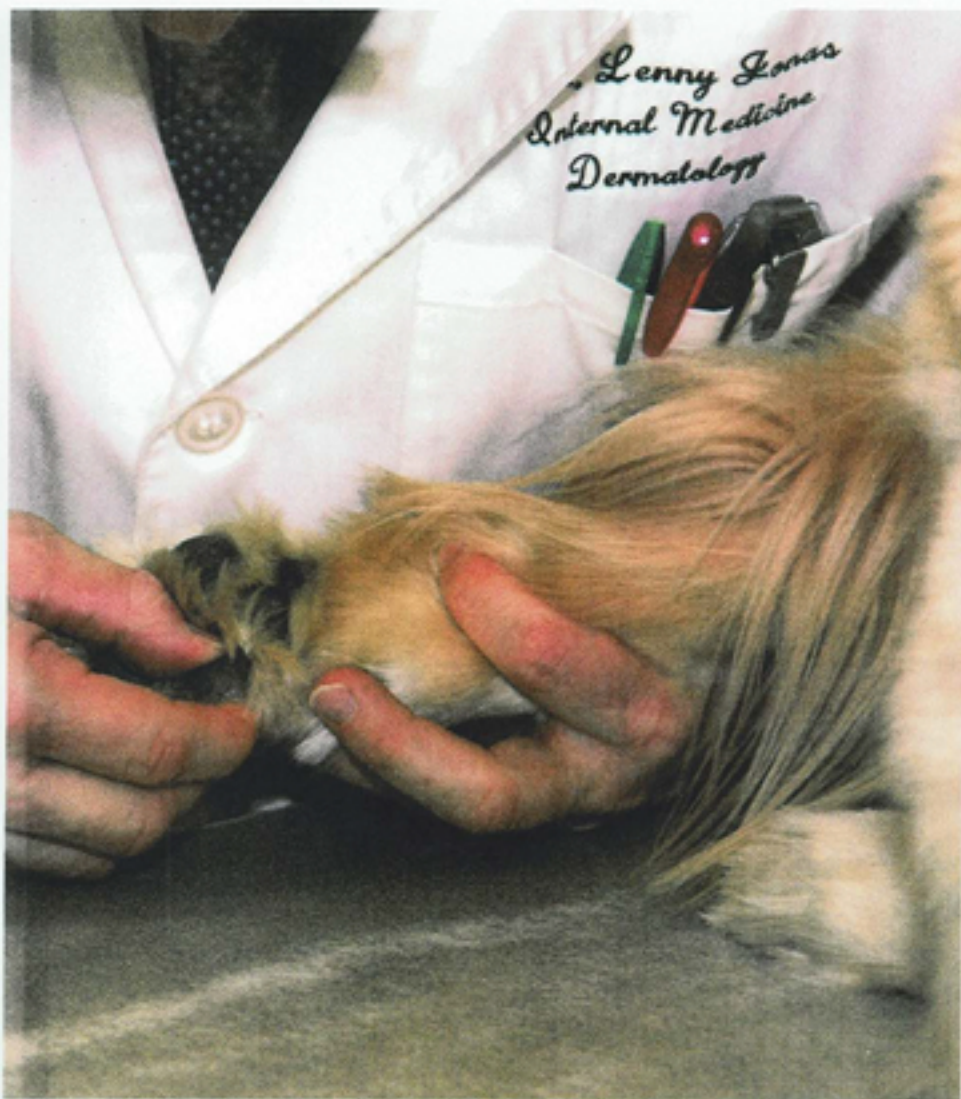


Practical Dermatology



Knowing how to educate your team in a way that maximizes client acceptance of dermatologic therapeutic recommendations can result in a win-win for your circle of care.

Merging management and medicine in private practice

By Patricia White, DVM, MS, DACVD, and Louise Dunn

The veterinary profession has begun to realize that good medicine benefits the financial health of the practice. Likewise, sound business practices allow teams to offer clients exceptional medical care. We believe that integrating the discussion of medicine and management with team members is critical to improving client compliance and patient care.

The integumentary system is the largest organ in the body and one of the systems evaluated during a routine physical exam. It is also the organ that presents with a problem most commonly on an average day.

You know that good dermatology practices take time. In the small amount of time allocated for an exam, moving from a "routine" exam to a dermatological treatment plan must be smooth, consistent and clear. Your team must have the knowledge and skills to not only handle the treatment and/or referral, but also to inform and educate the pet owner. How these small complaints and the inciting cause(s) are handled will affect all aspects of your practice, from patient care to staff morale, from client compliance to practice profitability.

Merging medicine and management leads to the development of specific

steps you can take to prepare your team and your client to navigate the complex world of veterinary dermatology. Knowing how to educate your team in a way that maximizes client acceptance of dermatologic therapeutic recommendations can result in a win-win for your circle of care. We will use pruritus as our model, but the same principles can be applied to pyotraumatic dermatitis (hot spots), otitis or almost any crusty/bumpy dermatitis!

The basics = good medicine

All of this starts with good medicine. After all, the desire to treat the patient in a way that leads to the best possible outcome is one of the reasons we do what we do.

Standard Operating Procedures

Chronic conditions can become frustrating, relationship-busting conditions if not handled properly. Clients can easily become frustrated and compliance falters, even to the point that the client-patient-doctor relationship is broken. Team members can become confused regarding tests and progress exams, resulting in medical charts being placed in bins for "someone" to call the client with an answer. The delay in response not only frustrates the team and the client, but also compromises patient care. If medical documentation is lacking or haphazard, the risk of legal action increases, especially if the condition becomes severe or life-threatening.

One way to mitigate many of these situations is to implement standard operating procedures (SOPs) for dermatologic services. The level of detail can depend on the condition and the culture of the practice. In some cases, checklists, or specific

areas for recording examination and testing results in the medical record itself, are all that is needed to keep the team informed.

Consistent, detailed SOPs will guide the team through testing procedures, documentation, therapeutic recommendations and client education. During the follow-up visits, the medical personnel reviewing the progress will have a clear picture of what the previous team was thinking and doing, thus making the next visits succinct and valuable to the client.

The exam, otoscopic exam and cytology can be bundled and charted as Ear Eval 1. Deep ear flushes can be bundled separately. You can teach your team how to read the cytologies. It is important that everyone assigns the same number to a subjective evaluation of the cytology (1–4+) and that the doctors agree on the severity of erythema, edema and stenosis. Save some slides for your techs to practice with.

To develop a reasonable SOP, develop a list of common conditions seen at the practice, testing procedures needed, and consistent medical documentation helpful to the team and the referral specialist. This list will help you develop an appropriate structure for the bundled work.

Some data sources for developing your SOPs include:

- Practice management software (conditions commonly coded into the system)
- Review reports from veterinary insurance providers (regarding common dermatologic cases covered by pet insurance)
- Common rule-outs

Once you review your data, you may see opportunities to enhance the services delivered by establishing certain benefits for bundled services. Bundling may include monitoring, progress exams, certain tests, pain management, therapeutic management and medications. There are potential weak links in an SOP chain. These include:

- Not going over the treatment plan with the client
- Jumping to treatment and skipping the work-up steps in the SOP
- Not educating the client on how the plan you have outlined will move the pet toward sustained relief
- Not communicating the value of a service even if the test is negative

Communication—within and without

Even with the most advanced methods to diagnose and treat dermatologic conditions, poor communication will inhibit successful treatment of the patient, either because of lack of client compliance or because of failure to follow an SOP. Your circle of care depends on communication.

Within: A Team Approach

Having a pet with a chronic medical condition requiring multimodal therapies can be confusing even to the best of us. Clear and consistent communications based on common understanding of dermatologic principles are necessary for all-star management performance.

Doctors:

- Assess, diagnose, prescribe
- Discuss the value of the diagnostic or treatment plans and timely follow-ups



Dermatology is a time-hungry specialty.

- Ask clients about their needs, expectations and concerns
- Communicate with team members regarding client concerns and pet health conditions
- Are ready and willing to recommend referral if what should be working isn't

Technicians:

- Follow doctor's orders and help clarify orders to client
- Communicate with doctors, clients and other team members about the pet's condition
- Ask clients about their concerns related to their pet's treatment
- Perform follow-up phone calls to inquire about the pet's condition and client compliance
- Communicate client's concerns regarding the pet's condition to the doctor
- Act as a liaison between doctor and client to help ensure that medication and treatment instructions are understood and followed

- Ensure that appropriate follow-up appointments are scheduled in a timely manner
- Facilitate the referral process

Client service representatives:

- Ask clients about their concerns related to their pet's treatment
- Perform follow-up phone calls to inquire about the pet's condition
- Communicate the client's concerns regarding the pet's condition back to the doctor and medical team
- Schedule timely follow-ups and reschedule cancellations when they occur
- Act as a liaison between the general practice and the specialty practice to help the client with treatment and scheduling concerns
- Facilitate the referral process

Groomers, bathers and walkers:

- Bring to the attention of the doctor and/or technician any signs of

hair loss, dermatitis or discomfort as soon as it is noticed

Since many of the tasks associated with the care of a dermatologic patient are shared, it becomes easy to "assume" that someone else is covering the task. One way to mitigate the risk of dropping the ball and failing to follow through on a task is to provide medical records checklists.

Without: Client Education

Any condition involving the skin, fur, nails, ears or anal sacs may be considered a dermatologic condition. Our client may give the impression of wanting that "quick fix"—that magic "shot" that stops the itching. However, the client is often unaware that the problem they see is simply a clinical sign, a symptom of something greater. This is where a well-trained team and good communication skills help bridge the gap in understanding.

Client compliance with your recommendations begins with communication. Important factors to consider as you formulate and communicate your plan include:

- The primary concerns of clients: If you answer their questions first, they are more likely to listen to the rest of what you have to say.
- The expectations of clients: Make sure they are realistic and in line with what you plan.
- Clients' level of commitment: There is no sense in outlining an elaborate diagnostic and treatment plan if it is unlikely the client will follow it. If you do, you are setting both yourself and the client up for failure. Devise something that you are sure the client will do and that will bring the client into your circle without a fight.
- Acknowledgment of the bond

the client has with you and his or her understanding of quality medical care.

The team: Well trained means empowered

You cannot assume that team members are going to assimilate all this information via osmosis. You will need to conduct training and regular updates. Being prepared and involving your team in the development of the dermatologic SOPs will bring out many weak links. In essence, you want to convey to your team that this is a "management by objectives" exercise. You must be certain that you are covering medical knowledge, giving them a means to communicate with one another and the client, providing a monetary comfort level in the service fees, delegating the care of the dermatologic patient to all members of the team and monitoring the effects on the business.

- **Designate a patient care coordinator:** Having a single "go to" person for the client who will answer questions, schedule appointments and coordinate communications between the general practitioner, specialist and client is a great way to help clients navigate all the recommendations for their pet's care.
- **Train at least one veterinary technician** in how to collect samples for ear and skin cytologies, dermatophyte cultures, and skin scrapings as well as in how to read the results: Make sure the technicians know what kind of sample to take for a thyroid hormone assay or serum allergy test and how much to get.
- **Develop forms:** Concise and specialized forms for communication—for your medical records,

for the client and for the team—not only ensure consistent and thorough attention to all important steps in a treatment plan, but also provide legal documentation of recommendations and a method of mapping out any follow-up care.

- **Develop checklists:** Include a standard checklist in the medical chart when a dermatologic condition is diagnosed. Team members will keep routine, standard notations throughout the treatment. Following the progress of the pet's condition becomes easier when all necessary medical notations are made at each visit.
- **Maintain ongoing education:** A knowledgeable team includes knowledgeable technicians and client service representatives who know the drill and can follow through.

The bottom line: How dermatologic services can become profit centers

What is the ROI of a dermatologic case? Consider the potential services involved with a dermatologic patient: skin scrapings, microscopic exams for bacterial and yeast infections, bacterial and fungal cultures, biopsies, surgical removal of tumors, allergy testing and immunotherapy, and specialized topical therapy, just to name a few. The truth is that the equipment and supply expenses needed to perform the basics are minimal. But you have to do the tests and use the information gained from these tests to move the process forward. If you have taken the steps to improve communication and your team is on board with learning and growing, the potential for a positive ROI can be realized.

Pruritic Ear Protocol

History: How long has it been going on, and what is the pruritus score (scale of 0 to 10)? Has it happened before, and if so, how was it treated and what was the response? Did it clear up or just get better? How long did it stay better before relapsing? (Record differential diagnoses.)

Exam: Examine both ears. Describe the medial pinnae and external canal in regard to erythema, alopecia, edema, stenosis and exudate. Perform otoscopic exam if ears are patent or if condition is unilateral.

Diagnostics: Cytology (every patient every time); score the findings: bacteria (rods, cocci, mixed) and (1–4+); Malassezia (1–4+); PMNs; epithelial cells.

Treatment plan: Medications should be chosen and dispensed based on your findings.

1st time: Treat what you see.

2nd time: Treat what you see and discuss diagnostic options for identifying the underlying cause.

3rd time: Treat what you see, follow up on response to appropriate diagnostics or treatment, insist on food trial, IDST, exam under sedation to assess status of tympanum, recommend referral for further evaluation.

4th time: Refer.