

# How This Veterinarian Would Choose a Veterinarian

by Paul Pomes, DVM

## Things to look for in general about a veterinarian, their practice, and what you should ask about during your first call and/or visit:

1. How many appointments are scheduled each hour? My opinion is that three (20 minutes per) is the maximum while two (30 minutes each) is better. One exception would be 15 minute appointments for updating vaccinations, general exams with no new issues, or rechecking a stable chronic issue (eg, diabetes, weight management, dry-eye, congestive heart failure, etc). A new puppy/kitten, sick pet, or pets with changes in their chronic problems should get an extended block. Since the veterinarian isn't in the exam room the entire visit, 30 minute appointments can still be profitable to the clinic by double booking clients in alternate rooms. What causes this schedule to fail are clients pulling the, "Oh, by the way doc, can you look at this (lump, rash, icky ear)?" card during a wellness exam. Don't be that client. Call ahead and let the staff know that you'll need more time or if a drop-off for a later workup can be fit in.  
  
15 minute appointments can work very well if the veterinarian can delegate the fetching and initial interpretation of data. Technicians that can pull and run blood samples, place catheters, induce anaesthesia, stain microscope slides from skin lesions, shoot radiographs (x-rays), follow-up and/or complement the veterinarian's in-room explanations, etc, leaves more time for the veterinarian to do what only he or she can do (diagnose, prescribe, surgery). Staff training to this level is a big investment usually found in multiple veterinarian practices to keep everyone busy. Your bill partly reflects the professionalism and teamwork behind the scenes.
2. Do you know which veterinarian you'll see? Once you've found a veterinarian you like, can you see that veterinarian on a regular basis? Are his or her notes clear and sufficient enough for another veterinarian to provide continuity of care if necessary? If a veterinarian has poor handwriting or writes/types an overly abbreviated medical record, that continuity will suffer. On the other hand, having multiple doctors present is also an advantage. See the next point. If the need is urgent, be willing to take whoever is available.
3. Are they professional if you want a second opinion? Every veterinarian I respect realizes that despite their breadth and depth of knowledge, what we don't know far eclipses what we do. Having a second set of eyes review a tough case should be cause for relief and not anxiety on their part. This is why I like to work in multiple veterinarian practices for that give and take in working up "interesting" cases.
4. What are their criteria for referral to a specialist? Can they offer some recent examples? The standard of care in my profession is evolving towards an ethical duty to offer referral when more expert care is both needed and available. The key word is "offer". Many times clients cannot afford a specialist. With informed consent from the owner it's perfectly acceptable in those cases for a veterinarian to do what they can with the tools available. My philosophy is to offer referral when I see a case that hasn't responded as I expected or is beyond my capabilities in the first place, e.g., a hit by car with complicated fractures. Older veterinarians began practice in an era when referral facilities were few and far between. Most have the experience to deal with many orthopedic cases themselves.

5. Speaking of older veterinarians, I have nothing but the greatest respect for most. One of the best I ever knew diagnosed a brain tumor simply on history and watching the animal walk. They've seen it all, done it all. The very best continue their education and change the ways they do things when the evidence shows it's time. A reasonable question to ask one is, "What was the latest thing you've changed in your practice from something learned in continuing education?" At the opposite end of the spectrum are the older veterinarians that should have retired long ago. "The Incredible Dr Pol" on National Geographic is a prime example.
6. Do they use VIN (Veterinary Information Network) on a regular basis? I can ask a question on VIN and have an answer within minutes on almost any topic. It's a huge lifeline especially when facing something new or a confluence of multiple issues. Even the old-time veterinarians get surprised now and then.
7. If dentistry is needed, especially for a cat, do they have a dental x-ray?
8. For feline patients, does the veterinarian have an easy, gentle, and confident manner with cats? Ask if they utilize the low-stress handling techniques developed by Dr Sophia Yin ([DrSophiaYin.com/low-stress-handling](http://DrSophiaYin.com/low-stress-handling)).
9. How much in written materials do they provide for later reference? An exam and consultation for the treatment of a new or sick pet may make you may feel like information is coming at you from a fire hose. Getting handouts and web references help address the overload.
10. Does the clinic have digital x-ray and/or anyone trained in abdominal ultrasound? These are "nice to have"s and the bill will reflect that. On the other hand digital x-rays have often shown me things that I would never have caught on film. For film x-rays the exposure technique has to be close to dead on and the chemistry system for development fresh and clean.
11. Does the clinic follow the AAHA vaccination guidelines? Do they use MLV (Modified Live Virus) vaccines for the core DHPP (dog) and FVRCP (cat) series? After the initial puppy/kitten series, these should be boosted a year later and then every **three** years thereafter. Yearly core vaccines have been proven unnecessary. The intranasal or intraoral Bordetella (kennel cough) vaccine gives full protection in three days and doesn't interact with other vaccines given at the same time. Depending on where you live and lifestyle risk factors (apartment cat vs camping and trail hiking dog, etc), annual vaccination of non-core vaccines for lyme, leptospirosis, rattlesnake, etc, may be warranted.
12. Are they up to date on best practices for socializing new puppies? Run far and fast from any clinic that recommends isolation at home until the initial vaccine series is complete. That is the recipe for a fearful and possibly fear-aggressive pet. New puppies and kittens need **controlled** and **positive** exposures to as many sensations and situations as possible before they're 12 weeks old. Dog parks: no; neighbor's homes with gentle and healthy pets: yes. Puppy classes on floors bleached between classes: yes. Socialization is **THE** most important thing you can do with your pet and it **MUST** be well-established before 12 weeks of age.

### **Other guidelines:**

What is the **general** reputation of the clinic on Yelp and Google? I emphasize general as there will always be folks with an axe to grind because they didn't like the outcome. Poor spelling and grammar go with unrealistic expectations. Take a look at the number of reviews. A 1 or 2 veterinarian practice with 100+ reviews is either writing their own reviews or rewarding 5-star reviews with discounts, free services, etc.

What's your first impression of the waiting room? Is it clean? What are the other clients like? A turn off for me when I visit clinics is a room filled with scruffy owners with their pit bull at the end of a chain who are there only because animal control ticketed them for a lapsed rabies vaccination.

The reception staff can make or break a practice. Are they courteous, friendly, and professional? Remember that their job, partly shared with the technicians, is to cover the issues the veterinarian is ill-suited or lacks the time to do. Things like money, flea control, simple behavior instructions, after-care, how/when to give meds, things to watch out for, etc.

Veterinarians (and MDs for that matter) are generally aware of how much things cost but usually not specific numbers. Our obligation and veterinary oath requires us to be the animal's advocate. A veterinarian should be willing to work with you to triage what they feel are the most important steps to try first. Oftentimes, however, I cannot begin to narrow the scope of a problem with vague signs like lethargy, inappetence, vomiting, etc, without a database of blood work (complete blood count and serum chemistry), urinalysis, fecal analysis, and radiographs as a starting point. For small dogs I usually do blood work first, for large I opt for radiographs.

If you're concerned about the cost of medications, ask for a written prescription. Keep in mind, however, that most clinics use the profit from in-house pharmacy sales to keep the cost of exams and surgical procedures lower than they should be. Many of the drugs we sell don't have human equivalents. For others the Internet pharmacies are cheaper. If it's a one-off purchase to handle a skin infection, the convenience of getting medication in the same visit outweighs the cost savings of ordering them. For chronic and stable conditions (hypothyroidism, hyperthyroidism, osteoarthritis, congestive heart failure, diabetes, etc), by all means buy your drugs from the cheapest and most reliable source. Use those savings for the twice a year testing and assessment these conditions need. I recommend [www.goodrx.com](http://www.goodrx.com) for finding good values at local pharmacies.

Can the veterinarian talk your language? In school we're taught hepatic shunts and renal insufficiency. To clients we should switch gears and say a vein from the intestines that bypasses the liver and kidneys that aren't totally up to the job. Is the veterinarian familiar with local circumstances, plants and animals (particularly snakes) to be wary of?

At the end of the visit do you feel that your questions were answered and your needs met? If this answer consistently comes up "no" with a number of different veterinarians, then the problem is likely on your end. Try writing down all of your concerns ahead of time, even better include a history and timeline of symptoms and events. If your pet only shows the issue at home, make a video of it with your cell phone. If the answer is "no" with a second visit to the same veterinarian, then a change is indicated. This doesn't say that he or she is a bad veterinarian. Much more likely is too great a difference in treatment philosophy and/or communications styles.

I'll be happy to answer questions about this article as time allows. Send email to [Dr.Pomes@FurryFriendsVet.com](mailto:Dr.Pomes@FurryFriendsVet.com).

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Dr Paul Pomes is a full-time veterinary relief provider licensed in California, Guam, Hawaii, Illinois, Maryland, and Virginia. Availability, recent engagements, references, and booking information can be found on his web site at [www.FurryFriendsVet.com](http://www.FurryFriendsVet.com).