



Focused
on *felines*

Communicating with clients about
how to be cat friendly

by Roxanne Hawn



EVEN THOUGH CATS OUTNUMBER DOGS AS PETS in the United States, they often don't receive as much veterinary care as dogs do. However, veterinary hospitals earning certification through the Cat Friendly Practice (CFP) program work every day to change that.

It isn't just feline-only practices that seek CFP certifications. Ken Lambrecht, DVM, medical director of West Town Veterinary Center in Madison, Wis., jokes about having a "mixed" practice since his CFP-certified center sees both dogs and cats.

Famous as a cat guy, Lambrecht takes one of his four cats pretty much everywhere with him—high school reunions, veterinary conferences overseas, camping, stand-up paddleboard races. Aware of these strong feline leanings, Lambrecht regularly reminds his team to post dog pictures and information on their social media channels. Those visuals, with equal exposure for both species, are important.

As other veterinary practices begin to increase their feline focus—whether earning CFP certification or not—it's good to remember that every conversation, appointment, and electronic contact represents another opportunity to "talk up" cats and their different medical, environmental, behavioral, and handling needs.

"The whole focus on being a cat-friendly practice is critically important because the easier it is and the less stressful it is for both cats and their owners to visit the practice, the more likely it is that cats will get the care that they clearly need and are clearly often not getting," says Karen E. Felsted, CPA, MS, DVM, CVPM, CVA, from PantheraT, a veterinary management consulting firm in Dallas, Texas.

"I think cat owners, clients, see that you, as a practice, understand and like cats, and I think they pick up those cues in a lot of different ways," Felsted notes.

Not small dogs

Cats have different nutritional needs, various medication differences, and propensities toward certain conditions and diseases seen less frequently in dogs. In addition, Felsted points out that certain personality and behavioral differences often result in less care or delayed care for cats.



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For example, cats freak out more at the veterinary practice and during the whole process of getting them there, and cats often hide at home when they don't feel well, which may be misinterpreted by clients as normal behavior, when it's not.

That's why being cat friendly means doing client education or re-education about the latest information on cats' health and needs. "We find that even some 'cat clients' don't truly understand their cat and their behavior," says Christen Lynch, practice manager of CFP-certified Animal Hospital of Rowlett and Diagnostic Center in Rowlett, Texas.

"They will say things like, 'Oh, he likes you. He's wagging his tail,' when, as a veterinary professional, you are looking at a stressed cat that might bite you if you keep touching it. We know cats age differently than dogs. We know cats mask illnesses differently than dogs. We know cats have different nutritional needs than dogs. We know that cats have different environmental needs and stimulation than dogs. We have different recommendations for our feline patients when it comes to these topics."

Lynch's practice recommends feeding canned food, using catios, supplying at-home enrichment opportunities, and providing feline-specific pre-sedation bloodwork, among other advice.

As the only CFP hospital within 20 miles, Animal Hospital of Rowlett and Diagnostic Center explains to

prospective clients how their cats' experiences here will be vastly different, starting with the cat-only entrance, lobby, and exam rooms. Lynch's practice also developed the following functional protocols to help the feline patients better adjust to the hospital environment:

- Educating clients about acclimating cats to their carriers, prior to appointments
- Letting cats stay in their carriers if that's what they prefer
- Using Feliway-scented, warm towels to help cats feel safer and more secure
- Doing as much of what needs to be done in the exam room, including blood draws, vaccinations, acupuncture, and ultrasound
- Checking out clients inside the exam room so that cats don't need to wait unnecessarily in the lobby or car

And, for those feline patients who just can't make it to the hospital, Lynch's team does home visits.

Narrating the experience

It isn't enough to implement CFP elements into daily practice. Felsted recommends explaining what you're doing and why. "A cat owner has come to the veterinary practice for years and always sat out in the reception area, with all those barking dogs. They may not think about that as being a hard experience for their cat, so part of what we have to do is start introducing these CFP ideas," she says. "We need to tell clients what we're doing [and why], so we may need to say, 'We're going to go ahead and put you and Fluffy in the exam room because it's calmer there. It's quieter. She can get used to the space before the doctor comes in. She'll be less stressed.' This, instead of just putting her in the exam room, and the client doesn't understand what you're doing."

Explain why the lights are dimmer, the room warmer, and the feline pheromones diffused in a cat-only exam room. Tell clients how low-stress handling techniques keep feline patients as calm as possible.



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And, if things aren't going well, stop and try again another time with calming meds on board. "If they get to that stress point, we don't keep pushing," says Danielle Treadway, one of the hospital managers and veterinary technicians at CFP-certified Animal Hospital of Waynesville in Waynesville, N.C. "There is no reason to hold that animal down and make it do what it doesn't want to do. It's much better with something that's going to take the edge off and try again tomorrow."

Treadway's team has had good experience using gabapentin, typically used for neurological pain. Clients open the capsules and mix the powder into a tablespoon of wet food before coming to the practice. Animal Hospital of Waynesville typically recommends using half of a 100 mg capsule, while Lambrecht says he sees better results with using the full 100 mg.

"It doesn't make them a happy cat," Treadway explains, "but if you can get them down one or two notches, you've done more than you could have if you forced the issue."

As required for CFP certification, Animal Hospital of Waynesville has "cat advocates" on staff who can be called into an exam room at any time to help feline patients have the best experience possible.

Show and tell also works well at West Town Veterinary Center. All first-time feline clients get a tour. "We show the two cat rooms on one side of the building, a special entrance, that's all about the Gold-Certified CFP," Lambrecht says. "Then we show them the shared area—dentistry, X-ray, treatment, surgery, etc. Next we take them upstairs to the cat gym. That's a pretty nice way to introduce them to CFP. Then, when they leave, we tell them about Cats' Night Out [a regular evening gathering of feline clients and patients]. When they leave, they pretty much know not only are we cat friendly, we're kind of cat crazy."



Feline Obesity: Cat-Friendly Technology and Beyond

“Nutrition is the big one,” says Ken Lambrecht, DVM, medical director of West Town Veterinary Center in Madison, Wis., when asked about the most important medical differences in feline patients and where practices—CFP or not—can make great strides.

The West Town team starts talking about good nutrition and ideal weight during kitten visits—not only body condition score but also muscle condition score as well.

Whether a cat client is just now choosing a diet or perhaps the cat needs a revised diet for weight loss, Lambrecht enthusiastically recommends the new Nutritional Calculator for Cats from the Pet Nutrition Alliance. (There is a calculator for dog diets, too.)

“As a practitioner, I use this calculator every day. It’s got a beautiful reporting function,” he says. “It’ll give information per gram, per can, or per number of cups based on the number of calories we input. . . . Our nutritional game has been seriously upped with the CFP, and I’d have to say not only crunching calories and determining protein, but also because 58% of cats are overweight, we address weight management much more now than we did in the past.”

In addition to hosting regular Cats' Night Out events, where feline patients and rescue group kitties get weighed and get to play in the center’s cat gym, Lambrecht’s team pilots other technologies for kitty fitness:

- Scales that go under the litterbox that can differentiate between four or five different cats in a household and track weight trends
- Microchip feeders that ensure the right cat gets the right amount of the right food in a multi-cat household
- Activity trackers (not perfect for cats yet, but getting there) that help cat owners monitor activity levels

Lambrecht first tests these tools as part of his annual “Pets Reducing for Rescues” ideal weight contest, where local rescues receive money based on how much weight canine and feline participants lose during the contest. The contest generates a lot of buzz online, with cross promotions between the practice and benefitting rescues.

“We’ve had people come in and say, ‘I hear you do a lot of weight management. I’m here to work on that,’” he says.

Lambrecht notes that each element, taken together, “makes a statement that we believe in fit cats.”

Communication style

There's a certain strategy and vibe for talking with cats and clients in the exam room, too. Moving slower, speaking more softly, not squealing too much—even about teeny-tiny feline patients—can all help.

Lambrecht describes his history-taking conversations as more gestalt than probing. “Always ask open-ended questions. That’s pretty much an absolute,” he says. “How is she doing? How is she feeling? It brings out the subtleties. It brings out the behaviors right away. I think it’s a mistake to ask direct questions. It’s a feel. It’s based on where the cat is sleeping, how it’s interacting with family members. You could say, ‘Is there anything unusual with her activity?’ But I don’t usually drill down that far.”

Lambrecht adds, “Never be in a hurry.”

When it comes time to make diagnostic, treatment, or other recommendations, however, Felsted advises being “unambiguous” with your language.

“So, it’s not saying, ‘You might want to think about having her teeth cleaned,’ but instead saying, ‘It’s very important that Fluffy get her teeth cleaned in the next month. She’s got a lot of infection here. Her mouth is painful. We can make that go away.’ But that’s going to be true if it’s a dog or a cat owner. You want to make a clear recommendation.”

Wishy-washy words, Felsted adds, may leave clients thinking the recommendation is optional rather than what you think is best for the cat.

It’s also important to be prepared—team-wide—to answer clients’ questions about why you’re recommending certain things. Don’t just recommend an ultrasound, for example. Be able to explain how details you may see on ultrasound will help in the pet’s case.

In some situations, you may be able to point to AAHA or American Association of Feline Practitioners guidelines for things like vaccination, pain management, fluid therapy, or life stage as a source or citation for the recommendations you make.

It’s important, though, to discern which clients require more—sometimes a lot more—information and consultation.



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As an example, a friend of mine recently felt frustrated about three additional medicine injections her cat received overnight at the hospital. While the overall cost fell within the written estimate, they had not been included in the estimate, which she interprets as both a treatment plan and financial document. One of the injections was contraindicated for cats with possible liver issues, and all three were not, in her opinion, evidence-based.

Having been a client at the hospital for more than 20 years, my friend had a productive conversation with the hospital’s medical director about the miscommunication. Better understandings are now in place on both sides.

Sometimes your answer to “why?” may come down to experience and a gut feeling. “There are a lot of things

people do where there isn't specific research supporting it, but it's years of clinical experience," Felsted says. "I think you can say that as well."

What not to say

Good communication often hinges at a point between what you mean to say and what slips out.

"I think one of the things that staff should never say to a cat guardian is, 'Cats are difficult.' To me, that says they don't understand cats at all," says Ingrid King, publisher of the award-winning website *The Conscious Cat*.

"Yes, most cats will be 'difficult' in a veterinary clinic," she notes. "How could they not be? They've been taken out of their familiar territory and into a space where they smell other cats and the fear pheromones of other cats. They're being approached and touched by strange humans, often without warning."

Many people believe all sort of myths and misconceptions about cats—often based on their sense of cats' independence. "You certainly wouldn't want someone to say, 'Oh, cats can take care of themselves,'" Felsted says. "I suppose a veterinary team member might say that to a cat owner within a certain context, and then have the cat owner extrapolate that into, 'Oh, they don't need any veterinary care.'"



About the Cat Friendly Practice program

The American Association of Feline Practitioners created the Cat Friendly Practice program to provide clinics with the tools to integrate a feline perspective in both the physical environment of the practice and the way medical care is delivered. Created by expert feline practitioners, the CFP program equips practices with the tools, resources, and information to elevate the treatment, handling, and overall health care of cats, as well as emphasizes ways to reduce the stress associated with the visit. To learn more, visit www.catvets.com/cfp.



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Learning more, doing better, together

On so many CFP fronts—medical, environmental, behavioral—veterinary continuing education plays a tremendous role. Continuing education is also a CFP requirement. Learning and working together to improve the feline veterinary experience, teams can share continuing education in a variety of ways:

- Required reading
- In-house workshops and quizzes
- Seminars by visiting experts
- Offsite conferences or online learning

It's going to take practice-wide, profession-wide efforts to get the quality of feline visits up to where they should be. Understanding what cat friendly really means and then implementing it in daily practice is a good start. Imagine a day when whole generations of kitties will have never known anything other than low-stress veterinary visits. ✨



Roxanne Hawn started writing about veterinary medicine and pet care nearly 20 years ago. She is the author of *Heart Dog: Surviving the Loss of Your Canine Soul Mate* and an award-winning dog blog called "Champion of My Heart."