



TRENDS IN VETERINARY NURSING

Mastering the Art of Veterinary Nurse Communication

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Generally, veterinary technology programs effectively prepare veterinary nurses to perform their daily duties in all of the different work environments in which they practice their profession. These professionals are duly trained by existing programs from a scientific perspective to try to alleviate the illnesses of patients that are presented to a veterinary clinic every day. Veterinary nurses have proven their importance as part of the veterinary team in the performance of these daily tasks. Kogan et al say “the tasks and communication performed by veterinary technicians are vital for the successful operation of veterinary practices.”¹



However, many of these programs, by giving greater emphasis to the veterinary-medical aspect, do not capitalize on administrative aspects or on the management of situations that may develop between employees and clients. Skills such as communication between veterinary nurses with their coworkers, supervisors, employers, and clients are topics that need to be developed among these professionals. This article presents the differences between verbal and nonverbal communication in transmitting messages sent and received by veterinary nurses. In addition, there are specific strategies that veterinary nurses can use to communicate effectively with their supervisors, coworkers, and pet owners.

VERBAL AND NONVERBAL COMMUNICATION

Communication may vary depending on how information is transmitted and received.² The human being uses both verbal and nonverbal communication techniques to convey a message. One technique must be complementary to the other in such a way that the message that is carried is congruent. Veterinary nurses must be trained to be consistent in the messages they send to the individuals with whom they interact daily as part of their professional duties. It is essential to differentiate both concepts.

- **Verbal communication** is where the message is verbalized using words, either orally or in writing. Veterinary nurses use verbal communication in conversations, interviews, books, letters, and emails, among other expressions.
- **Nonverbal communication** occurs without the use of words, including gestures, looks, or body movements, among other expressions.² The use of gestures, looks, posture, emoticons, facial and body expressions, etc., implies the use of nonverbal communication techniques.

Verbal Communication

For verbal communication to be a useful tool for veterinary nurses in transmitting the message that they want to convey to others, it is vitally important that they know and pay particular attention to their choice of words. Critical or accusatory words tend to create a resistant and defensive mentality among the veterinary team and clients and should not be used in the work environment. The author recommends that veterinary nurses use words or phrases such as “in some situations” or “usually” in order to normalize problems and reduce

resistance. It is also recommended to avoid using the word “but” to join sentences and use the word “I” in messages rather than “you,” both of which may put people on the defensive. The use of proper rhythm, volume, and tone will also help veterinary nurses convey an appropriate message. **BOX 1** presents the applications of these characteristics of the voice that facilitate communication.

The veterinary nurse must know basic medical terminology and when to use it properly, and at the same time choose the words that accurately describe the situation faced. Although veterinary technology programs develop this skill among their students, veterinary nurses have an inherent responsibility for their professional development that requires them to continually acquire and use new medical terminology. This can be achieved through the continuing education that this profession requires.

When taking a patient’s history with the owner, a veterinary nurse should be able to use verbal communication with its owner to obtain as much information as possible to procure the most accurate picture of the pet’s situation. Gathering information through questions is effective for learning, problem solving, aiding in decision making, and more clearly

BOX 1

Characteristics of the Voice That Facilitate Communication

Tone It can imply disinterest, enthusiasm, or commitment on the subject. In an inconsistent message, it can imply incongruity.

Rhythm When sending a message or speaking at a fast or slow rate, the receiver can lose the idea of the message that is being transmitted.

Volume Lack of volume may indicate tension. There is insecurity and lack of commitment to the message. Having a moderate volume can better illustrate the message and at the same time forces the receiver to listen more carefully. A volume that is too high can indicate enthusiasm, although depending on the situation it could also indicate tension and insecurity.



understanding the message that the client wants to convey. The use of closed, “yes” or “no” questions should be discouraged, even if the client is not sure of the answer. These questions are not used to link a conversation between the veterinary nurse and the client. The use of open-ended questions, including the words “what,” “how much,” “where,” “when,” and “why,” will allow for more detailed answers. For example, when the veterinary nurse asks the pet owners, “Did Sussie eat today?” the pet owners will reply with a simple “yes” or “no” without giving any further details. However, by asking “What and how much food has Sussie eaten in the last 24 hours?” we are allowing the clients to be more specific in their responses, which will help the veterinary nurse have more information at hand and continue to develop more effective questioning. These types of questions encourage self-expression and participation in the conversation. Other strategies veterinary nurses can use are listed in **TABLE 1**.

Nonverbal Communication

Nonverbal communication includes those unspoken elements of the conversation between the veterinary nurse and a pet owner or colleague that replace, reinforce, or contradict verbal communication. These include principles related to posture, facial expressions, eye contact, and hand gestures.

Posture is the easiest element to observe and interpret within the nonverbal communication of a veterinary

nurse. This gives key signals about the character of the speaker and displays a lot about the attitude adopted in the particular situation.³ An upright posture during a conversation increases self-confidence, while it makes the veterinary nurse feel more secure in the information shared. In turn, the client will feel that the data received from the veterinary nurse comes from a well-informed person. Therefore, the information will be better received. Opposite to this position, a hunched posture may indicate insecurity and mistrust on the part of the veterinary nurse regarding the message being conveyed. The client will perceive this lack of security and trust and question the information being shared. This could affect the client’s relationship with the veterinary team and the veterinary practice in general.

To demonstrate to the client that the veterinary nurse is genuinely interested in their conversation, direct eye contact is important. This contact indicates and promotes an open communication channel between the parties, which will facilitate the exchange of ideas. The veterinary nurse should promote this type of contact and avoid the use of indirect eye contact, which may imply concern or the closure of the communication process. If a person avoids looking another in the eyes, it is usually because they feel threatened, insecure, or ashamed.⁴ The author recommends that any conversation between a veterinary nurse and a client should always be terminated by the latter.

Another important factor that every veterinary nurse must take into account when communicating is the

TABLE 1 Verbal Strategies That the Veterinary Nurse Can Use to Effectively Communicate With Pet Owners

STRATEGY	DEFINITION	EXAMPLES
Word recognition	Use a word with eye contact and voice inflection that implies that you understand what the pet owner is saying.	<ul style="list-style-type: none"> ● I HOPE you call me (I doubt you will, but I'd like you to) ● I hope you call ME (don't call anyone but me) ● I hope you CALL me (don't text me, just give me a call)
Use of accent questions	Repeat 1-2 words or points used by the client in a questioning tone, so that they elaborate the description of events or signs.	<ul style="list-style-type: none"> ● Did you mention that your pet hasn't eaten for the past 3 days? Correct?
Paraphrase	Repeat the client's statements to check if you understand what the client is trying to say before continuing with the interview.	It's the same to say: <ul style="list-style-type: none"> ● The dog walks on the lawn ● The canine walks on the grass
Recapitulate	Repeat the main point at the end to emphasize the key point and inform the client of what will happen next.	After explaining the treatment in detail to the pet owner: <ul style="list-style-type: none"> ● In short, you must apply the treatment for 10 consecutive days and return to the clinic for reevaluation in 2 weeks.



time of day the message is received. This will signal the speed to which a message should be responded. Only when clients and coworkers perceive that their messages are attended to promptly will they be able to promote an effective communication environment with and within the veterinary care team. Generally, a message that is received when arriving at work tends to indicate some urgency. In the same way, by sending a message at the end of the day, for example, “See you at your convenience tomorrow,” the veterinary nurse is indicating the same level of urgency. A timely response indicates a genuine commitment on the part of the veterinary nurse to the message and the sender.

Personal Space

One particularly important aspect of nonverbal communication that requires a more detailed discussion is the concept of personal space. The veterinary nurse must ensure the integrity of the personal space that must exist between them and the pet owner, coworkers, and supervisors. This personal space is defined as the area that individuals maintain around themselves that others cannot break into without causing discomfort. It is a distance that is established between individuals that is highly influenced by culture. Sommer, who extensively researched the concept, defined personal space as an area with “invisible boundaries” that surround the person and is vital for effective communication between parties.⁵ When this space is violated, the message you want to send may not be received effectively. This distance is inversely proportional to the trust that exists between the communicating parties, which implies that the greater the trust between individuals, the lower the personal space between them.

A transgression of personal space could imply the deterioration of communication between the veterinary nurse and their coworkers or client. Many scientific studies have shown that when individuals do not respect prudent distances with the people they communicate with, they can feel intimidated and react with negative emotions.⁶⁻⁹ Therefore, it is the inherent responsibility of the veterinary nurse to ensure correct personal space so that these negative perceptions do not affect communication. The veterinary nurse must ensure at least a 4- to 9-foot distance when communicating.¹⁰ This distance will respond to the context of the conversation, the environment, and the trust that exists, among other considerations.



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SUMMARY

Multiple investigations have confirmed that veterinary nurses play a very important role in the different fields in which they perform their functions.^{1,11-14}

Communication is essential between all members of the veterinary team so that the message to be transmitted reaches its recipients effectively. Veterinary nurses must develop techniques and strategies that allow them to deliver a coherent, congruent, and complete message to their interlocutors. In this way, they will be able to continue to demonstrate the effectiveness and necessity of their presence in the workplace. Therefore, it is the responsibility of all veterinary nurses to develop the skills that enable them to understand and apply the concepts of verbal and nonverbal communication when interacting with other individuals. The entire veterinary team must assume responsibility for the communication that takes place in the workplace; however, the veterinary nurse, being the main communication bridge between clients and veterinarians, has a greater responsibility to develop effective skills that allow them to carry out this important function effectively and efficiently.

While it is recognized that other techniques available could result in similar benefits, the strategies suggested in this article may prove to be essential tools that the veterinary nurse can implement immediately and use at any time. The important thing is the application of verbal and nonverbal communication techniques, be they these or others, on any occasion we can do so.

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Zenalpha®

(medetomidine and vatinoxan hydrochlorides injection)
Sedative, Analgesic
For Use in Dogs Only

CAUTION: Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian.

BRIEF SUMMARY: (for full prescribing information, see package insert)

DESCRIPTION: Zenalpha is a combination of medetomidine and vatinoxan hydrochlorides. Each mL of Zenalpha contains 0.5 mg medetomidine hydrochloride, 10 mg vatinoxan hydrochloride, 32.5 mg mannitol (USP), 4.16 mg citric acid monohydrate (USP), 1.8 mg methylparaben (NF), 0.2 mg propylparaben (NF).

INDICATION: Zenalpha is indicated for use as a sedative and analgesic in dogs to facilitate clinical examination, clinical procedures and minor surgical procedures.

CONTRAINDICATIONS: Do not use Zenalpha in dogs with cardiac disease, respiratory disorders, shock, severe debilitation, that have hypoglycemia or are at risk of developing hypoglycemia, or are stressed due to extreme heat, cold or fatigue.

Zenalpha is contraindicated in dogs with a known sensitivity to medetomidine or vatinoxan.

WARNINGS:

Human User Safety Warnings

Not for use in humans. Keep this and all medications out of reach of children and pets.

Avoid skin, eye or mucosal contact. Use caution while handling and using filled syringes. Absorption of the active ingredients is possible following exposure via the skin, eye or mucosa. In case of accidental eye exposure, flush eyes with water for 15 minutes, remove contact lenses then continue to flush. In case of accidental skin exposure, wash with soap and water and remove contaminated clothing. If symptoms occur, seek the advice of a physician.

In case of accidental oral intake or self-injection, seek medical advice immediately and show the package insert to the physician. DO NOT DRIVE as sedation, loss of consciousness, and changes in blood pressure may occur.

Persons with cardiovascular disease (for example, hypertension or ischemic heart disease) should take special precautions to avoid any exposure to this product.

Pregnant women should exercise special caution to avoid exposure. Uterine contractions and decreased fetal blood pressure may occur after accidental systemic exposure.

Persons with known hypersensitivity to any of the ingredients should avoid contact with Zenalpha.

Caution should be exercised when handling sedated animals. Handling or any other sudden stimuli, including noise, may cause a defense reaction in an animal that appears to be heavily sedated.

Note to physician: Zenalpha contains medetomidine, an alpha₂-adrenoceptor agonist, in combination with vatinoxan, a peripherally selective alpha₂-adrenoceptor antagonist. Symptoms after absorption or accidental self-injection may include dose-dependent sedation, respiratory depression, bradycardia, tachycardia, and hypotension.

Animal Safety Warnings

Zenalpha should not be administered in the presence of pre-existing hypotension, hypoxia or bradycardia. Due to the pronounced cardiovascular effects of alpha₂-adrenoceptor agonists, only clinically healthy dogs (American Society of Anesthesiologists [ASA] classes I and II) should be administered Zenalpha. Dogs should be monitored frequently for cardiovascular function and body temperature during sedation.

Zenalpha is not intended for use in cats. The use of Zenalpha in cats has been associated with hypotension.

PRECAUTIONS: Dogs should be monitored frequently during sedation for changes in heart rate, blood pressure, respiratory rate and body temperature. Tachycardia may occur in some dogs after recovery from sedation.

In the event of hypoxia or apnea, supplemental oxygen should be administered.

Following administration of Zenalpha, a decrease in body temperature may occur and an external heat source may be needed to maintain body temperature. Hypothermia may persist longer than sedation and analgesia.

The analgesic effect of Zenalpha will not last longer than the sedative effects. Additional analgesic(s) should be administered as needed.

Nervous, excited or agitated dogs with high levels of endogenous catecholamines may exhibit a reduced pharmacological response to Zenalpha (ineffectiveness). The onset of sedative/analgesic effects could be slowed, or the depth and duration of effects could be diminished or nonexistent. Therefore, allow the dog to rest quietly for 10 to 15 minutes after injection.

With the alpha₂-adrenoceptor agonist drug class, including Zenalpha, the potential for isolated cases of hypersensitivity, including paradoxical response (excitation) exists.

Repeat dosing with Zenalpha has not been evaluated.

Zenalpha has only been evaluated in fasted dogs; therefore, the effects on fed dogs (for example occurrence of vomiting) have not been characterized.

The concurrent use of anticholinergic medications and Zenalpha has not been evaluated.

Zenalpha may decrease serum glucose in healthy dogs and this effect may persist longer than sedation.

The safe use of Zenalpha has not been evaluated in dogs with hepatic or renal impairment, dogs younger than 4.5 months old, or dogs that are pregnant, lactating, or intended for breeding.

ADVERSE REACTIONS: The most common adverse reactions observed in the field study were decreased body temperature (not requiring external heat support), reduced respiratory rate, diarrhea, muscle tremor, signs of colitis, hypothermia (requiring external heat support).

To report suspected adverse events, for technical assistance or to obtain a copy of the SDS, contact Dechra Veterinary Products at (866) 933-2472. For additional information about adverse drug experience reporting for animal drugs, contact FDA at 1-888-FDA-VETS or online at <http://www.fda.gov/reportanimalae>.

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Dr. Osuna León completed his bachelor's degree in veterinary technology at the University of Puerto Rico Medical Sciences Campus. Years later, he completed 2 master's degrees and a doctorate in education with a concentration in educational leadership. For 28-plus years, he worked as a licensed veterinary technologist in veterinary clinics in Puerto Rico, while also teaching at Universidad Ana G. Méndez (UAGM). In 2015, he became the director of the department of veterinary technology, and from 2018 to 2020 he was the associate dean of the School of Health Sciences of UAGM. Currently, Dr. Osuna León is a regular faculty member of the department of veterinary technology at UAGM.