

The Opportunity Survey Tool - Pet owner survey

Please enter your survey code (five digit code provided):

Thank you for giving us the opportunity to better serve you and your pet. Please help us by taking a few minutes to tell us about the service you received for your pet during your most recent preventive pet healthcare visit to our office. This survey will provide us with your insight regarding our practice of preventive care. For the purpose of this survey, "preventive pet healthcare" is defined as the assessments and services your pet received as part of your most recent preventive care visit to our practice. Common "preventive pet healthcare" services may include a regular physical exam and checkup, vaccinations, and consultations or recommendations regarding general pet care and health maintenance. Your responses are completely confidential and will remain anonymous. Thank you for helping us improve our efforts to keep your pet healthy. We appreciate your candid feedback!

What was the reason for your pet's most recent visit to our veterinary practice?

- **O** Routine checkup/preventive care
- **O** My pet was sick
- Other _____

If Routine checkup/preventive ... Is Not Selected, Then Skip To End of Block

For the remainder of this survey, please think specifically about your pet's most recent routine checkup/preventive care visit to our office, and answer the following questions to the best of your ability.

What type of pet did you bring in for your most recent routine checkup/preventive care visit?

- O Dog
- O Cat
- O Both
- O Other

If Other Is Selected, Then Skip To End of Block

Although you recently brought in both a dog and a cat for a routine preventive care visit, we are interested in your cat for this survey. When answering the rest of the survey, please give answers as they apply to your cat only.

How frequently do you bring your pet(s) to see a veterinary professional for a routine checkup/preventive care visit?

- Frequently (every 6 months)
- **O** Regularly (once a year)
- Occasionally (once every 2 years)
- Rarely (every 3-4 years)

How satisfied are you with the overall level of service our healthcare team (veterinarian, veterinary technicians, office staff, etc) provides your pet(s) on an ongoing basis?

- **O** Very Dissatisfied
- **O** Dissatisfied
- **O** Somewhat Dissatisfied
- O Neutral
- **O** Somewhat Satisfied
- **O** Satisfied
- **O** Very Satisfied

Please briefly explain below.

More specifically, how satisfied are you with your pet's most recent routine checkup/preventive care visit to our veterinary office?

- **O** Very Dissatisfied
- **O** Dissatisfied
- **O** Somewhat Dissatisfied
- O Neutral
- **O** Somewhat Satisfied
- ${\bf O}$ Satisfied
- **O** Very Satisfied

Please briefly explain below.

During your pet's most recent routine checkup/preventive care visit, were you in the exam room with your pet and the veterinarian and/or veterinary technician?

O Yes

O No

Think about your cat's most recent checkup/preventive care visit to our office. Were the following discussed with you or provided as part of the visit?

	Yes	No / I don't remember
Physical exam	0	C
Retrovirus test (FELV, FIV)	0	Ο
Internal parasite testing (feces tested for worms)	0	O
Broad-spectrum parasite control (heartworms, intestinal, fleas, ticks)	0	О
Pain assessment	Ο	Ο
Dental exam and recommendations	0	O
Behavioral assessment	0	C
Heartworm test	0	Ο
Weight and nutritional assessment and/or recommendations	Ο	О
Vaccinations	Ο	Ο
Follow-up plan based on assessments and recommendations	0	О

How important is it for a routine checkup/preventive care visit to include the following services?

	Not at all Importa nt	Very Unimporta nt	Somewhat Unimporta nt	Neither Important nor Unimporta nt	Somewh at Importan t	Very Importa nt	Extremel y Importa nt
Physical exam	0	0	0	0	0	0	О
Retrovirus test (FELV, FIV)	0	О	О	О	0	0	O
Internal parasite testing (feces tested for worms)	0	0	0	0	0	0	О
Broad- spectrum parasite control (heartworms, intestinal, fleas, ticks)	0	O	O	O	0	O	Э
Pain assessment	0	0	0	0	0	0	o
Dental exam and recommendatio ns	0	0	0	o	0	О	о
Behavioral assessment	0	0	0	О	0	0	o
Heartworm test	O	Ο	О	О	•	Ο	Ο
Weight and nutritional assessment and/or recommendatio ns	0	0	0	0	0	0	Э
Vaccinations	0	0	0	0	0	0	Ο
Follow-up plan based on assessments and recommendatio ns	0	0	0	0	0	0	Э

This next set of statements deals with how our healthcare team handled you and your cat's needs during your pet's recent checkup/preventive care visit to our office. Please rate your level of agreement or disagreement with the following statements:

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree
My healthcare team seems to enjoy handling and treating my cat.	O	O	O	0	O	О	о
My healthcare team appreciates the special needs of cats.	0	0	0	0	0	0	О
My healthcare team appreciates the special needs of cat owners.	0	O	0	O	0	0	О
My healthcare team makes a strong effort to reduce the stress experienced by my cat and me before office visits.	0	0	0	0	0	О	О
My healthcare team makes a strong effort to reduce the	О	O	O	О	О	О	о

stress experienced by my cat and me				
and me during office visits.				

Think about your dog's most recent checkup/preventive care visit to our office. Were the following discussed with you or provided as part of the visit?

	Yes	No / I don't remember
Physical exam	0	C
Heartworm test	0	С
Internal parasite testing (feces tested for worms)	0	O
Broad-spectrum parasite control (heartworms, intestinal, fleas, ticks)	0	О
Pain assessment	0	Ο
Dental exam and recommendations	0	O
Behavioral assessment	Ο	Ο
Weight and nutritional assessment and/or recommendations	0	О
Vaccinations (such as rabies)	Ο	О
Follow-up plan based on assessments and recommendations	0	О

How important is it for a routine checkup/preventive care visit to include the following services?

	Not at all Importa nt	Very Unimporta nt	Somewhat Unimporta nt	Neither Important nor Unimporta nt	Somewh at Importan t	Very Importa nt	Extremel y Importa nt
Physical exam	0	0	0	0	0	0	0
Heartworm test	0	Ο	О	Ο	Ο	О	Ο
Internal parasite testing (feces tested for worms)	0	0	o	0	О	О	о
Broad- spectrum parasite control (heartworms, intestinal, fleas, ticks)	0	0	0	0	0	0	Э
Pain assessment	0	O	0	0	0	0	O
Dental exam and recommendatio ns	0	0	0	0	О	О	o
Behavioral assessment	Ο	О	О	О	O	О	О
Weight and nutritional assessment and/or recommendatio ns	0	0	0	0	О	0	о
Vaccinations (such as rabies)	Ο	О	О	О	O	О	О
Follow-up plan based on assessments and recommendatio ns	0	0	0	0	0	0	Э

This next set of statements deals with how our healthcare team handled you and your dog's needs during your pet's recent checkup/preventive care visit to our office. Please rate your level of agreement or disagreement with the following statements:

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree
My healthcare team seems to enjoy handling and treating my dog.	0	0	0	0	0	0	О
My healthcare team appreciates the special needs of dogs.	0	0	0	0	0	0	Э
My healthcare team appreciates the special needs of dog owners.	0	0	0	0	0	0	О
My healthcare team makes a strong effort to reduce the stress experienced by my dog and me before office visits.	0	0	0	0	0	O	Э
My healthcare team makes a strong effort to	O	О	О	O	O	О	о

reduce the				
stress				
experienced				
by my dog				
and me				
during				
office visits.				

This next set of statements deals with your opinions and perceptions related to routine checkups and preventive care for your pet. Please rate your level of agreement or disagreement with the following statements in regard to your pet's most recent preventive care visit to our office:

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree
Preventive pet healthcare is necessary in order for pets to live longer and healthier lives.	0	0	0	0	0	0	о
My healthcare team was effective at communicating the importance of routine checkups/preventive care for my pet.	0	0	0	0	0	0	Э
My healthcare team explained to me what is being done during the routine checkup/preventive care visits in a way that I can understand.	О	0	O	0	O	О	о
My healthcare team is effective at helping me understand the benefits of preventive pet healthcare.	0	0	0	0	0	0	Э
I follow my healthcare team's recommendations in regard to how often I should bring my pet in for a routine checkup/preventive care visit.	•	0	0	0	0	•	Э

This next set of statements deals with your most recent experience at our veterinary office. Please rate your level of agreement or disagreement with the following statements:

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree
I have a clear understanding of the importance of the care and services received at my pet's most recent routine checkup/preventive care visit.	O	O	0	O	0	O	о
My healthcare team clearly explained the services performed during the most recent routine checkup/ preventive care visit.	O	O	0	O	0	O	O
My vet team did a good job at helping to reduce my pet's stress during the most recent routine checkup/preventive care visit.	О	О	O	О	O	O	О
My vet team did a good job at helping to reduce my stress (as a pet owner) during the most recent routine checkup/preventive care visit.	О	О	O	О	O	О	O
My vet team explained what my pet's NEXT visit will entail.	0	0	0	0	o	0	o

This next set of statements deals with the perceived value of the services you paid for at your pet's most recent checkup/preventive care visit to our office. Please rate your level of agreement or disagreement with the following statements:

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree
I have a clear understanding of the services I was charged for during my pet's most recent routine checkup/preventive care visit.	O	O	0	0	O	0	Э
The price I pay for routine checkups/preventive care for my pet is reasonable.	o	0	0	О	0	0	о
The value of routine checkups/ preventive care for my pet is worth the cost of the services performed.	О	О	O	О	О	О	О
I feel like the healthcare team recommends only preventive care for my pet (eg, tests, exams, etc) that is really necessary.	0	0	0	0	0	0	Э
My healthcare team cares more about the well-being of my pet than the money being charged for treatment.	•	•	0	0	0	0	О

This next set of statements deals with how you would prefer to pay for preventive care for your pet. Please rate your level of agreement or disagreement with the following statements:

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree
I would be interested in a "preventive healthcare package" for my pet that would include a variety of essential preventive care services throughout the year for a single fee.	0	О	0	0	0	О	O
I would prefer to pay for my pet's preventive care in installments (ie, monthly payments) rather than all at once.	О	О	О	0	О	О	о
I would be more likely to schedule my pet for routine checkups/preventive care visits if my healthcare team offered more flexibility in how I could pay for these services.	•	0	0	0	0	0	Э

When you have a question about your pet's health, what is typically the FIRST source you consult?

- **O** Healthcare team
- **O** Internet
- **O** Pet stores
- **O** Pet shelters
- **O** Dog or cat breeder
- **O** Friends/family
- O Other _____

How credible do you perceive each of the following sources to be when it comes to knowledge about your pet's health and what your pet needs to stay healthy?

	Not at all Credible					Extremely Credible
Healthcare team	O	О	О	О	О	O
Internet	Ο	Ο	Ο	Ο	Ο	O
Pet stores	Ο	Ο	Ο	Ο	Ο	0
Pet shelters	Ο	Ο	Ο	О	Ο	О
Dog or cat breeder	О	О	О	О	О	O
Friends/family	Ο	Ο	Ο	Ο	Ο	О

Which of the following is most likely to negatively impact the possibility that you would take your petin for a routine checkup/preventive care visit? (Check all that apply.)

- □ The cost of preventive care
- □ Routine checkups/preventive care is not essential for my pet
- □ My pet does not like to go to the veterinary office
- □ Transportation (ie, lack of transportation or veterinary office is too far away)
- □ I forget to schedule an appointment
- □ I forget about my scheduled appointment
- Other ______

What are your preferred methods of communication when receiving information from our veterinary practice (ie, appointment reminders, pet health information, etc)? (Check all that apply.)

- Phone
- 🛛 E-mail
- Text message
- Regular mail
- □ I would prefer not to receive information from your practice

What is your gender?

- O Male
- O Female

What is your current age?

- O Less than 20
- 20 to 24
- **O** 25 to 34
- **O** 35 to 44
- **O** 45 to 54
- O 55 or over

If you had it to do over again, how likely would you be to take this survey?

- **O** Very Unlikely
- **O** Unlikely
- **O** Somewhat Unlikely
- $\mathbf{O} \ \ \mathsf{Undecided}$
- **O** Somewhat Likely
- O Likely
- Very Likely

Thank you very much for participating! Your responses will provide us with important insights into the preventive healthcare services we deliver to your pet and will help us enhance the way we serve you in the future. Our focus is to ensure that all of the pets in our practice receive the best preventive care possible to help them live longer and healthier lives. We appreciate you placing your trust in our veterinary practice and giving us the honor of caring for your beloved pet!