Patient or client? If in doubt, ask

The simple answer to Dr. Peter Wing's question (Patient or client? If in doubt, ask. Can Med Assoc J 1997;157:287-9) was provided by a senior consultant in medical school. “Doctors treat patients; clients are found in lawyers’ offices and brothels.”

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A message for the “human medical community”

The brief article “Veterinarians’ suggested fees may leave physicians feeling ill” (Can Med Assoc J 1997;156:1689) deserves comment. Because we acknowledge the media’s appetite for controversy, real or perceived, we ignored the original article, written for the Ottawa Citizen. However, when an excerpt from this article, with commentary, is printed in a human medical journal, we take serious exception.

Veterinarians are health care professionals and businesspeople who administer our own hospitals while maintaining standards required by the College of Veterinarians of Ontario: there are no publicly funded facilities. We provide complete anesthetic, radiologic, laboratory, dental and surgical services, and many of us provide specialized care such as endoscopy or diagnostic ultrasonography. We must maintain an inventory of all supplies that may be required for a procedure. How many physicians know the cost of an 8-cm endotracheal tube or a bottle of isoflurane? Our fees must reflect these overhead costs and pay for nursing, technical and other support staff while ensuring an adequate standard of living for ourselves. The Ontario Veterinary Medical Association employs an economist to examine the real costs of veterinary medicine. Our suggested fee schedule is based on this work.

When we perform a double-contrast urinary-tract study (usually a cystogram), we must cover the cost of tranquilizing agents, contrast media and delivery instruments, rare-earth screen radiographic plates, processing chemicals and equipment, radiologic equipment, a designated room for performing the procedure, dosimeters, view boxes and technical staff to assist. The animal must also be kept in hospital for the day. After these costs are covered, our fee pays us for performing the procedure, interpreting the film and advising the client. What does the fee paid to a physician cover? If it merely reimburses the physician for performing a procedure and interpreting film at a publicly funded facility, comparison of the 2 fees is impossible.

We can empathize with the human medical community’s frustration with health care funding. However, to take that frustration out on another group of comparably educated health care professionals without examination of the facts is inappropriate. That such statements appeared in a national medical journal verges on the unprofessional.

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I was dismayed to see once again another apples-and-oranges comparison of fees charged by veterinarians and physicians, which seems to imply that veterinarians’ fees are excessive when compared with those charged by physicians who deal with the human species. These across-the-board comparisons fail to mention that most veterinarians must cover substantially higher overhead costs than any general practitioner and many specialists. Our professional education and training is perhaps even more comprehensive and arduous than a medical student's, for we are trained to be the GP, internist, surgeon, radiologist, anesthetist, pathologist, dentist, pharmacologist and psychiatrist, and not just for one species! This means that most of our practices must stock a full dispensary, have a surgical suite with instruments, anesthesia and monitoring equipment, an x-ray machine with automatic developer, blood-chemistry analysers and a staff of certified animal-health technologists.

Each veterinary practice is a hospital unto itself, and running a hospital is not cheap. How many Canadian radiologists have their own x-ray machines, own their own facility and employ the staff needed to run it? How many GPs have a full surgical suite in their little, 2-exam-room office?

It would have been more appropriate for CMAJ to compare the amount veterinarians keep after paying overhead costs with the payments physicians receive for providing a specific service. Try examining the fee breakdown for a specific procedure, such as an oophorohysterectomy, performed on a large dog versus the same procedures performed on a woman. The average fee for this operation at a veterinary clinic, which would include a pre-anesthetic examination, anesthesia, surgery, surgical materials, nursing care and an overnight stay in the hospital, is approximately $120. Do physicians honestly believe the same procedure