Small animal consultations:
Is a diagnosis always reached?

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CENTRE FOR EVIDENCE-BASED VETERINARY MEDICINE
Putting research into practice

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What is a diagnosis?: "The label given to a disease with certain clinical or pathologic characteristics applicable to a particular case" (Radostits et al, 2000). However in first opinion practice a definitive diagnosis may not always be reached, yet decisions on how to proceed still have to be made. Determining where in the diagnostic process between presenting complaint and final diagnosis decisions are made may help to focus future research.

Aims: The aim of this study was to conduct practice-based research in order to collect data on commonly encountered conditions and presentations in small animal practice. In particular, the aim was to look at the type of diagnosis made and factors which influenced this.

Methods:
- Development of diagnosis definitions, data collection form and network of 8 sentinel practices
- Collection of data by direct observation of consultations
- Presenting complaint for each animal assigned only one diagnosis type
- Total of 16 weeks data collection over a 15 month period following a pilot study

Definitions of Diagnosis Type:
- **Open Diagnosis:** Multiple differentials being considered at the end of the consult
- **Presumed Diagnosis:** Based on minimal clinical suspicion
- **Working Diagnosis:** Based on early evidence, pending the results of diagnostic tests
- **Definitive Diagnosis:** Based on a high level of confidence, where any necessary diagnostic s e.g. 'gold standard' tests have been completed
- **Previous Diagnosis:** Made during a previous consultation/ diagnostic work-up
- **No Diagnosis Required:** Problem/complaint relates to preventive medicine
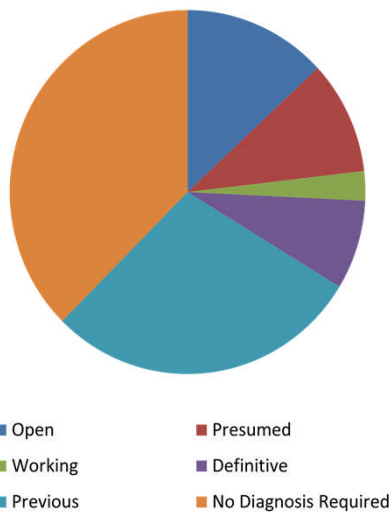
Results:

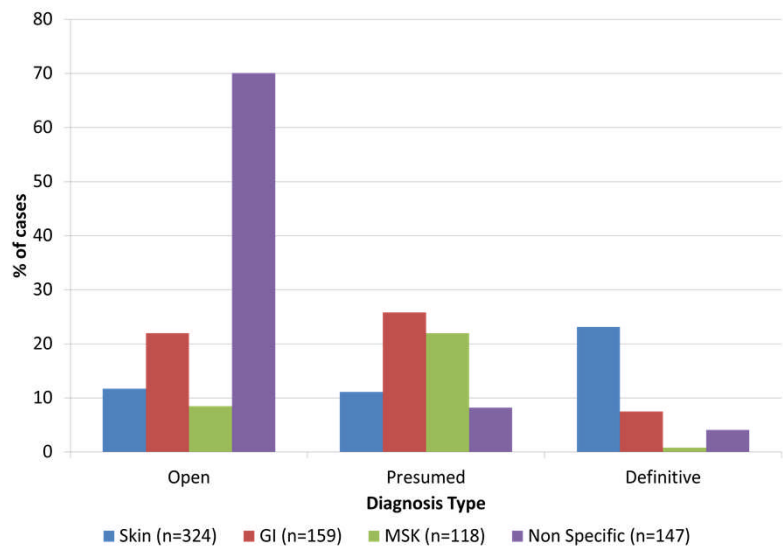Chart 1. Diagnosis type reached for presenting complaint for each animal (n=1187)

Legend: ■ Open ■ Presumed ■ Working ■ Definitive ■ Previous ■ No Diagnosis Required

Results 2:

Chart 2. Comparison of diagnosis types reached for most frequently affected body systems

Legend: ■ Skin (n=324) ■ GI (n=159) ■ MSK (n=118) ■ Non Specific (n=147)

Conclusions: Diagnosis is a difficult term to define and the consideration of different types of diagnosis may be useful when interpreting data from first opinion practice. The results suggest that definitive diagnoses are made infrequently in the consult room (7.9% of cases), with a presumed diagnosis being made more frequently (10% of cases). Vets spend much of their time (28.6% of cases) dealing with previously diagnosed conditions which may reflect the proportion of time spent managing chronic disease. The proportion of cases where no diagnosis is required reflects the high percentage of caseload involving preventive medicine. Open diagnosis accounts for 13.0% of cases, showing how frequently decisions need to be made during a consultation despite a diagnosis having not been reached. Diagnosis type made also varies considerably between body systems affected. However, further investigation is needed to make more meaningful conclusions from this and to determine which factors influence the likelihood of a particular diagnosis type.

References: Radostits, O.M. Et al (2000). "Making a diagnosis" In: Veterinary Clinical Examination and Diagnosis, W.B. Saunders, London, p11-52