Our Practical Experience with the Computer

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Approximately three years ago visiting my family doctor's office and noticing a computer there, it occurred to me that if my doctor, practicing by himself in a little rural town, had a computer, I could certainly have one in a five man veterinary practice. Moreover, the machine intrigued me. Thinking about it, I came to the conclusion that it would enable me to get a "handle" on my practice. Actually our practice was out of control and "running itself." For good or for bad, that is what was happening. I thought a computer might be one good way to get control of the costs. This also might save me from getting a management consultant, whom I still may have to hire in any event. I concluded the computer would help me get the command for which I was searching.

Our inventory was just too big. Thus, I went out and looked at everything, read everything, asked questions, looked at hardware, read about software, inquired about software, tried to figure out which way to "go." The more I looked the more complex it appeared and the more confused I became.

Opportunely, I attended a computer meeting held by the Southern Illinois Veterinary Medical Association where Dr. Chris Jenkins from Arlington, Texas, was the speaker. He was there selling software. Lame Horse Enterprises had developed a software package, an integrated package, and Dr. Jenkins made a comparison of it to six or seven systems that were on the market at that time. Of course one has to keep in mind that all this took place back in the beginning. I felt as if I did not have time to learn any programming and I thought it best to settle on some system that would unify everything and make it all easy for me. I anticipated that all I would have to do would be to punch the buttons, and consequently everything would work out perfectly! After sifting all considerations, we bought the system known as an on-line cash register system. Make one transaction and the machine takes care of everything else. The computer makes out the client's receipt, records the treatments that are used, makes the charges, does the math work--so the secretaries do not have to make any errors in math--deducts the inventory, records the diagnosis, etc. You name it, the system does it.

Next, I decided that I needed a \dot{CP}/M operating system. This is a system that the machine uses in order to operate. I got this idea at one of these AABP meetings, and the reason that I have liked a \dot{CP}/M operating system is that there is probably more software written for \dot{CP}/M than for any other system. The universities--many of them--use a \dot{CP}/M for all their programs, and this is the main operating system of most business software. I ordered the software from Lame Horse. This eventually became Cardiopet's program. One of the reasons I chose this was that the screens were simple. One could look at the monitors, and there was not clutter. The

menus were simple, and it seemed as if much of the program could be used in a food animal practice. Of course, we have small animals, too, but we are 75% food animal practice. I wanted to keep it simple, because when the practice has three or four secretaries changing shifts, everything may end up in confusion. When I ordered the software from Lame Horse, I also ordered the hardware from the same source. We obtained an Apple II with two eight inch floppy disk drives, and an Epson printer: Epson 80--which I originally considered to be fast. It printed 80 characters per second. It was the fastest I had seen up to that point in time, but it later turned out to be fairly slow. All these items were sent to us as ordered. I thought then that the best thing to do was to buy the hardware from the same source as the software, and Lame Horse Enterprises guaranteed me that they could maintain the hardware and service the software via telephone. We also obtained a phone modem, so that we could hook right up with Phil Homberg's computer in Texas. Thereby, he could correct any software problems over the phone.

With this the fun started. When one gets a computer the first thing to do is put information into it. The operator has to tell it what to do. This takes time and extra labor. It took us at least a month of hard work. It forces one to think how to do things and what one wants out of the machine. One has to set up a treatment file and figure out how one is going to charge--example: by the mile or by the call, how long it takes the veterinarian to put a stomach tube down an animal etc. He has to break up things into the units in which he wants to use them. If he is going to sell penicillin in milliliters, he has to specify his milliliters. Every time he goes out and gives an injection of 15cc of penicillin, he has to put that number into the machine, and it has a category number (and so forth). This same process applies to his inventory. If he uses the treatment in milliliters, then it has to come off the inventory in milliliters. If he goes out and treats a milk fever, he does not treat it in milliliters but rather in or by bottles. Thus, the unit in this is the bottle. This process is probably the hardest part. It forces the veterinarian to really figure out what he has been doing, and sometimes he has to put it into the machine in a different way. Instead of just writing it out on a ticket and lumping it all off making a charge, everything is itemized. That is one thing the clients really like when they receive a bill, too. In addition, the secretaries must learn to do the very same thing. If the practice has more than one secretary, each does not always do everything in the same way. This circumstance causes a few problems, but with time and effort these matters all seemed to be solved.

Well, what happened? I want to give you the pluses and the minuses--and I want to give you the minuses first. The

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first thing we found out was that there were too many owners for the disks. In other words we had a whole series of disks dividing up the alphabet, and every time there was a different transaction for a new client--example: changing the "A" disk to the "M" disk etc., the secretaries spent an inordinate length of time changing disks. The system simply did not work well with so much traffic through the office. There were impatient people waiting in line, and the secretaries were frantically trying to change disks. Also, the secretaries did not take good care of the disks, which proved to be unreliable in some instances. I thought we had a clean clinic, but the dust, the cat hair, and everything else would get into those disk drives, and the result would be disk errors. Although this method did not work out well, we were learning all the time. Another problem was that we had one terminal and one printer, so that this one terminal and this one printer were tied up all day long making transactions, recording the business, and making receipts for customers. If one wanted to print a treatment report or other items, or get out some information, one had to come in after work and get this done. Accomplishing any of these necessary tasks during the day was impossible, because all were in use.

There were pluses. It took two hours to get the statements out, whereas it had taken two and one half days before. Another advantage was uniformity. Everybody was charged the same. This was the first time that had ever happened. One can say he does not need a computer to get everyone charged. That is easy to say, but we never could get everyone to charge the same, and the farmers or other clients soon became aware of what each veterinarian was charging. The computer stopped that difference in charging--and quickly. We also found that by having this arrangement in our treatment files, we charged for everything. We had been giving many services away free. With this new computer system the gross earnings went up almost immediately. On the surface our inventory stayed the same or much the same, but we had expanded and hired another veterinarian. This fact caused more drugs to be purchased and used than in the period before his hiring. Considering all the many factors, our inventory actually went down. This has pleased me, and I think we now are getting good control on the inventory.

The next thing that happened was that we were sending out reminders for everything. We can send out reminders for large animals, too--not just for small animals as in the case of rabies and distemper reminders. Examples of large animal reminders are notices of the proper time to worm horses, the proper time for anaplasmosis injections, in fact, the proper time for a wide spectrum of necessary large animal services. We have found that we have received almost a 50% response to these reminders. The reminders can be printed and sent out at the first of every week. The machine can print the labels, and the whole operation is better organized than through the old card system.

Considering the pluses and the minuses, we could not use this kind of system. Who could? A veterinarian in a single practice, having eight or nine calls a day, dispensing some items, having a secretary in the home or at the office could use this system. For a larger practice--a five veterinarian practice, for example--it just was not adequate at all. I would still think about an on-line cash register software system. However, if one wanted to get a computer with just a spread sheet system on there, it would help keep track of inventories, and speed things up. Although I believe there is a place for this type of system, for the same amount of money, a veterinarian can get a 10 or 20 megabyte hard disk This is the best course of action to undertake.

Thus, we had to change, and what did we change to? We went to two terminals with one floppy, a 20 megabyte hard disk, two printers, and a phone modem. Basically, it worked much better, and I was pleased with it. We bought a TeleVideo system, which is a multiterminal system with a multiterminal switching software system. In other words, we could use more than one terminal--and we could expand that to six terminals if we should ever so desire.

Of course with this system also, there was good news and bad news. I'll start with the bad news. There was bad news in the backing-up. We backed-up this system with floppies. It was necessary to back up every night, and it took us two hours to put in the floppies, because there was so much to back-up. From a practical standpoint this was just impossible to do, so we were not backed-up as we should have been. We also had other difficulty occasionally. We found that when we put one terminal in the old part of the clinic that we had aluminum wire in it, and the grounding system and electrical system were terrible. There were many fluctuations in the power. We put in a dedicated line then, and we had troubles with the power company, whom we had checking. Every time there was a windstorm, the next day the power was unstable. We have put in a line cleaner to help this situation. It has been necessary to pull the plugs in our system when there is lightning. The biggest single unfavorable discovery was that we have 6,700 clients. Because of this we ran out of disk in a year and one half. I just did not have any idea that we had that many clients. They all had a yard cow, a cat, a dog, a fish, and everything else--and that all takes up space on the computer. Thus, we had to "bite the bullet" again and ordered a 40 megabyte hard disk-which we now have. We kept the two terminals--they were good and they had worked with this system--and we added an 803 with two floppy drives in it. The 40 megabyte disk came with a tape back-up disk, but the only way one could get software programs onto the hard disk was with a tape. That is the reason we went to the 803 with floppies. We can now take some software that is on floppies and put it on hard disks through these floppies in the 803. We also bought an Epson LQ 1500 Printer. This is really fast. It prints 300 characters a second. It uses sheets and has a modem on it so that one can change it to an IBM letter quality for sending out client communications and various forms. In printing reports, one can put them in a fast mode and quickly move

these items "out". We can still have the Okidata printer up in the client area, and all it now does is print receipts. We have three terminals. Now, one is in the client area, one is in the back of the small animal pharmacy, and one is in the business office. We are going to get another terminal and put it in the small animal ward at the back of the clinic. A veterinarian in the back can then punch in the treatment. By the time the client will get up to the front, the printed statement will be there.

This is where we are, and I would like to tell you what we are doing now and what I expect. The first positive finding is that the inventory control is good. I think this is one of the best features of our system, and all the control is done automatically. In setting up inventory and treatment files-and subsequently--there may be m adjustments. Periodically, therefore, we take a spot check, and at the end of the year, we take a spot check and make counts. More and more large animal reminders are going out. Itemized statements are sent out on time. Everything is itemized. I thought at first there would be a few derogatory remarks about the computer from the clients, but we have found they really like what the results are. We can get a record of the aged accounts. This system gives one a quick perception of the money that is "out"--how much, where. All the labels in the pharmacy are printed by the machine. I think that if the FDA gets its way, we will have to make a record of these. We can dispense a bottle of medicine, punch it in the machine, and a label will automatically be printed for that bottle of medicine. It will be recorded so that it will be on file--all of which will be important one day. The computer will print diagnostic reports. For example, we know how many cases of anaplasmosis we had through the second quarter or through August, how many blackleg cases we had, etc. A treatment report can be prepared. The clinic can gather a wide variety of useful facts--such as how many doses of seven way blackleg vaccine we used, how much vaccine of all types we used, how many cattle vaccines we used, how much money we generated in cattle vaccines and herd work, how many implants we used, what time of year all these uses occurred, etc. All this information is useful in ordering drugs. The computer tells us how much each veterinarian's gross income has been. We can learn from this system separate information about each facility--the main clinic at Anna and the outpatient at Vienna. Receiving from this machine a daily summary, the computer makes out a bank deposit, so that the money we actually have matches up with what we are supposed to have. There was not full control of this before the acquisition of this system. The deposit control is not now perfect, but we are getting it refined toward perfection. Summaries are received for the day, the month, and the year. The computer tells us what is the average client charge. Much information on the machine can be used in the accounting system. At the end of each day, the number of new clients can be ascertained. The computer gives me added confidence in controlling the practice.

We also have a Word Star Program with our computer. This software is a word processor. This has done away with the typewriter. We will be using the Word Star almost exclusively. Teaching the secretaries how to use it, the veterinarians will first have to learn to use it well. The clinic will use this program for client letters. For example, a communication will be sent out on bangs vaccination--why it is becoming more important, the fact that many states will not take female animals now unless they are bangs vaccinated. We anticipate that the response to this undertaking will be excellent. By typing up a letter with the MailMerge portion of the program, our veterinary clinic can send a letter to every dairy client with Holsteins, for example, or every Angus breeder, or all the cow-calf men, or all the livestock owners with feedlots, etc. Pertinent information sent out can thus be tailored to the interests and needs of a variety of groups.

We can print up form letters. When a new client comes in, we now use a form letter that we prepared with our computer. We give the client a Meller and James pencil and ask him to fill in this letter. This information is what the computer asks for when the clinic puts a new client into it. We receive the information correctly written by the client himself, instead of through questioning by the secretariesthrough which process errors can be made in pertinent information. It is absolutely imperative to get all the information and to get it correctly into the computer upon the first contact with the client. This is something I soon learned. The computer does just exactly what it is told, and if it is told wrong, everything is wrong.

Another thing noted pertains to client reports. Going out on retainer calls, we will have little forms made up that will be filled out and subsequently brought into the clinic. With portable dictaphone machines, we can make out a report on the recording machine. We can take that electronic dictating machine and the word processor, type a report, and send it to the client. This process can put the finishing touches on a practice.

We have Super Calc² on our computer and can prepare, thereby, an electronic spreadsheet. Our semen inventory can be kept by this method. To further explain, we are the distributor for the American Breeders' Service in approximately twenty-one counties in Southeast Missouri and Southern Illinois. In this way we can keep track of twelve tanks and all the semen in them. There is \$12,000 worth of semen in these tanks. The sales slips and purchasing orders are put in a tray. At the end of the week there is one secretary who puts this all into the machine. She takes it off the inventory. If we buy some semen, a record goes into the computer, and we have a running account of how much money is involved in that inventory--just as we do in our regular veterinary program on our hard disk. These Super Calc² and other programs are what we use on the floppies. We try to keep just the veterinary program on the hard disk. All the other little "goodie" programs are kept on the

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floppies. The 803 runs these floppies, but it is also a terminal for the hard disk.

Another thing we will be doing is making a cash flow budget. I do not know how many of you farm, but one cannot farm without a cash flow sheet that goes across by the month. It is great to have a budget made up, so that one can anticipate expenses--for example: know when the insurance premiums are coming due. This will take a lot of the surprise element out of disbursements. Accounting packages, general ledger check writing, employee records, accounts payable-all these things can be put on the computer. The payroll can be figured out by punching in the hours and other pertinent information, the check is written, everything comes out, and this all goes into the general ledger. If you have an accountant, you might save \$1,000 a year by using this accounting package.

One of the useful things we have on our computer is a dairy ration formulation program. This works in conjunction with some of our dairy herd health programs. We use Loren Bennet's program from California, and I will say that it is a good one. I have used a TI calculator and liked it, but this Bennet program is the Cadillac. The veterinarian just cannot do these things by hand. He just does not have enough time, but it takes very little time after it is set up to really provide a good service for your clients. We do not have a dairy reproductive program, but there are many. Although we do not have many dairy accounts, I feel that in taking care of those we do have, eventually we will pick up a dairy reproductive program to go with some of our herd health programs. We now have a modem and use it to correct software, to talk to other computers, and to access to other veterinary data banks. If the veterinarian wants to do a little diagnostic work, I think there is an excellent place for one there. I understand there are going to be groups of veterinarians forming user groups to talk back and forth to each other on the telephone through their computers.

Another undertaking I am planning is putting together a beef cow nutrition program. We do not have many feedlots, but if a veterinarian has some small feedlot clients, nutrition work would help them. Although the veterinarian would render a service to some of these clients, the large operators will and do have their own computers--particularly out in the West. Colorado and other area states already have sophisticated nutrition programs that even include the windchill factor--for example. I believe that in the fall of the year we could get our clients in with a sample of their feed and have a meeting reviewing photographs of cows in different stages of condition, subsequently lining out a winter nutrition program for them.

I think there is a place for beef cow performance programs that might include beef cow record systems. The larger operations will have their own computers, but this will not be true of the more limited operations.

The universities have many, many little programs that appear to be very excellent. Most of these are on CP/M operating system. I have not had time yet, but we are going to investigate some of these programs. Although they are agriculture oriented, I think they would be suitable for some veterinarians who want to do some in depth thinking about certain problems their clients are having. I believe there are some budgets and some straight veterinary programs. There is no end to what can be done. We use Cardiopet's software, and I will say that I am satisfied with it. There may be some out there that are just as good or better. Our software maintenance has been excellent, and the service has been good. We did buy our last TeleVideo equipment locally from our Radio Shack distributor. I am referring particularly to the printers and like items. This local firm considered this equipment excellent, and they began to carry the line after we started using it. I believe the buyer needs to get his service locally. One can get his software and some of his hardware lined up on the phone, but I believe it best for the local service man to take principal care of the machine. This is quicker with less down time. We have more than one terminal, so that if a terminal goes out, we are not knocked out completely. We can send the terminal to town to have repairs make, and within one or two days that terminal is back in operation at our clinic. I do not think the computer has reduced labor--secretarial labor--but I feel we would have had to hire more personnel without it, and I believe that in the long run we are going to get a quicker handling of our clients through the front office. This situation seems to be working out better, and the traffic is going to be faster.

There were many mistakes and inefficiencies before we got the computer--mistakes and inefficiencies I had no idea previously existed. The computer has pointed out some of these errors. It has been up to us to make the corrections after they are pointed out by the machine. In spite of all the difficulties we have had--many, many--we are lost without it. When the system is down for even a day, it is as if the world is coming to an end. Feeling that as time goes by I have more and more command, the computer has definitely been a big plus. Although not in total control yet, I would very certainly "do it again".

The greatest thing the computer is going to do for us--who are in competition with the drug catalog, the feed store, etc. is to penetrate a vast new market for veterinary medicine. That is the name of the game--selling oneself and veterinary medicine. Many of our clients take pride in the fact that their veterinarians have a computer and are on the leading edge. As a large animal practitioner, I have always felt that there has been a danger of getting in a "rut". The computer has taken the monotony out of the practice. It is challenging to practice again--discovering new horizons and knowing there is an abundance of untapped veterinary needs out there locked up--if we can just find the key.