| 1 | Title |
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| 2 | A scoping review of end of life decision-making models used in dogs, cats, and equids |
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4 Short Running Title

5 Veterinary end of life decision-making

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| 18 | Abstract |
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| 19 20 21 22 23 | Background End of life decisions for companion animals can be stressful for veterinarians and owners, and when delayed result in poor animal welfare. Delayed euthanasia has been identified as a particularly prominent issue for horses. This scoping review aimed to identify the available literature on veterinary decision-making models, which can support end of life planning. |
| 24 25 26 27 28 | Methods A protocol was preregistered, and a structured literature search performed on six electronic databases. Publications were reviewed against specifically developed eligibility criteria. Data from original studies and narrative type reviews were extracted separately, and the components of each model were charted. |
| 29 30 31 32 33 34 35 | There were 2211 publications identified, and 23 included in the final review. Eight were original research studies and 15 were narrative reviews or similar. Publications were not indexed uniformly, increasing the difficulty of discovering relevant sources. The end of life decision-making process comprised of three stages; (1) making the decision, (2) enacting the decision, and (3) aftercare. Twenty key components of decision-making models were identified, though no publication reflected all of these. |
| 36 37 38 39 | Conclusions A lack of original research studies and equine specific publications was identified. Shared decision-making models for euthanasia in veterinary practice should include all three stages, and consider species-specific issues. |
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| 42 43 44 45 46 47 48 | Introduction Shared decision-making (SDM) promotes a collaborative approach, ^{1, 2} and has been associated with improved patient satisfaction, ^{3, 4} treatment adherence, ³ and potentially surgical outcomes. ⁴ This approach has been gaining prominence in human medicine, and several models have been proposed on how SDM should be carried out. ⁵ Some models have been adapted for use in a veterinary context. ^{2, 6} However, less veterinary-specific research is available, and models have not been systematically mapped in this context as they have in human medicine. |
| 49 50 51 52 53 54 55 56 57 | Most veterinary research in this area focuses on dogs and cats, with research into equids particularly lacking. Delayed euthanasia in horses has been recognised by experts as a prevalent welfare issue that has the potential to cause great suffering. ^{7,8} A horse owner's recognition of pain or deteriorating quality of life may be poor, ^{7,9} potentially contributing to euthanasia decisions being delayed. Additionally, owners find having their horse euthanased very distressing. ¹⁰ Horses have a long lifespan, and years of ownership contribute to a strong bond which can make the decision even more difficult. ¹⁰ Companion animal owners may feel they do not have enough knowledge to make the decision or are unable to bear the burden of the full responsibility alone. ¹ Advice from a veterinarian can increase their confidence in the decision. ¹ Veterinarians also experience moral |

distress when euthanasia is delayed and the animal is suffering, 11 but may be unsure of how, or

whether, they should aim to influence the owner's decision.¹ The aim of this scoping review is to

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- 60 identify the literature available on veterinary end of life (EOL) decision-making models and use this
- to inform the future development of a SDM model for companion animal euthanasia.

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- 63 Objectives:
 - To identify published literature on decision-making models used in the context of serious veterinary illness, EOL planning, and euthanasia in canine, feline, and equine medicine, through a systematic search of the databases
- To extract and chart relevant information from the included publications, and identify the components of the different decision-making models
 - To suggest key terms that could be included in future publications on companion animal EOL decision-making to increase their discoverability

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- Methods
- 73 Protocol and Registration
- 74 The protocol for this scoping review was drafted using the Preferred Reporting Items for Systematic
- Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR).¹² The review followed the
- Joanna Briggs Institute methodology, ¹³ for which reviewer SF has completed the accredited training
- 77 programme. The final protocol was registered prospectively with Open Science Framework
- 78 (https://osf.io/txqw9/?view_only=b4d2e3ee5e834b02b82d9f426bff91c7) on 11.02.21. This project
- 79 was reviewed and approved by the Ethics Committee, [masked for review].

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- 81 Eligibility Criteria
- 82 The eligibility criteria are described in Table 1. A decision-making model was defined as a set of
- 83 criteria, a process, steps, or information that can be used to support the making of a decision about
- the most appropriate course of action available in specific circumstances.
- 85 A publication was included if the full text could be obtained from any of the [masked for review]
- 86 libraries or e-libraries, as well as from free online Open Access and legal deposit libraries. A
- 87 publication was considered an opinion review where the information provided was not supported by
- 88 references or sources of evidence, and instead credibility was based on the authors' expertise or
- 89 experiences; these were excluded.

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- Information Sources
- 92 To identify potentially relevant publications the following electronic databases were searched on
- 93 15.02.21:
- CAB Abstracts (Ovid): 1910-present
- 95 Ovid MEDLINE: 1946-present
- Embase (Ovid): 1974-present
- WEB of Science (Core Collection: Citation Indexes): 1946-present
- 98 Scopus: 1946-present

| 99 100 | PubMed: 2020-present (to identify preprints or recent publications that may not yet be on Ovid) |
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| 101 102 103 104 105 | The search strategy was drafted by the research team and feedback was provided by an experienced [masked for review] librarian. Publications identified by other means such as conference attendance and models referenced by included publications were also included. |
| 106 107 108 | Search strategy Search combinations were constructed from the following components, including synonyms, related terms, and alternative spellings: |
| 109 | Veterinary OR Veterinarian |
| 110 | AND |
| l11 l12 | Decision-making OR Communication OR Goals of Care OR Relationship-centred OR Conversation OR Breaking Bad News |
| 113 | AND |
| 114 | Models OR Guidelines OR Framework OR Checklists OR Plan OR Approach |
| 115 | AND |
| 116 117 | Euthanasia OR End of Life OR Advanced Care Plan OR Palliation OR Critical Illness |
| 118 119 | The full search strategy used for each database can be found in Appendix 1. |
| 120 121 122 123 | Study Selection To increase consistency, the same 51 titles and abstracts from a pilot search were reviewed by AC and SF. Results were discussed to determine whether it was necessary to amend the inclusion and exclusion criteria before beginning screening for this review. |
| 124 125 126 127 128 129 | References were downloaded into EndNote X9 (Thomson Reuters), and duplicates removed. Titles were screened on EndNote and retained publications were then imported into Rayyan (Rayyan Systems Inc.), a collaborative systematic review tool. Abstract and full text screening took place through Rayyan. Both AC and SF independently reviewed titles and then abstracts for agreement with the eligibility criteria, with any ambiguous publications being retained for review of the full text. Disagreements during screening were discussed until a consensus was reached. If a consensus had not been reached, the opinion of a third reviewer would have been enlisted. |
| 131 132 133 134 | In cases where a publication could be excluded for multiple reasons, it was listed as excluded by the first reason that became apparent. During abstract screening, decisions were based purely on the abstract, and not on any additional information in the record such as where the language or type of source was stated. This information was only considered during full text screening. |

Charting Process

The included publications were read in full and assessed so relevant information could be extracted and charted. This was done independently by AC. Two separate forms were used, one for scientific studies (Table 2) and one for narrative review type publications (Table 3). This was due to the differing nature of the information extracted from these two publication types, and the differences in the value of evidence they provide. The EOL decision-making models identified did not all focus on the same aspect of EOL decisions. Three stages of guidance were identified, with models either focusing on one, two, or all of these. The first, making the decision, comprised the steps required for the veterinarian and owner to come to a decision about euthanasia or EOL care for the animal patient. The second was enacting the decision, including steps such as educating the owner about and planning for the euthanasia procedure, or potentially carrying out an agreed hospice care plan and monitoring any changes in the animal. The final stage was aftercare, with steps such as explaining body disposal and memorialisation options and deciding on these, or signposting the owner to emotional support resources. Distinctions were made between these stages when charting to identify which aspects of end of life decision-making have received most research attention, and so readers interested in just one stage can identify which publications are relevant. A third form (Table 4) charted the components of the decision-making models from each publication, so the recommended steps of each could easily be identified. Broad labels were given as components were described slightly differently between publications. This meant some interpretation was required from AC as to what constituted minimising owner guilt or following up after euthanasia, for example.

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Results

Selection of Evidence Sources

A total of 2209 publications were identified through the six database searches. After duplicates were removed 1197 publications remained. Once title screening had taken place 264 publications were retained for abstract screening. During this stage, 111 publications were excluded because they did not cover the areas of interest identified in the inclusion and exclusion criteria (Table 1). Additionally, 12 were excluded for not being about the correct population, six for being the wrong publication type (e.g., grey literature), five for not focusing on the desired context, and two for being the wrong study design (e.g., opinion reviews). After abstract screening, 128 publications were initially included for review of the full text. However, two additional publications were identified outside of the main screening process and their full text assessed. The first 14 was identified because the model presented in Van Eps et al. 15 (included through the main screening process) was based on the model in this additional paper. The second 16, 17 was identified through a workshop attended by AC, the report and guidelines developed are presented as two separate documents. Of the 130 full texts screened, 11 were excluded as it was not possible to obtain the full texts, while 10 were excluded as the full text was only available in a language other than English. The full list of exclusion reasons can be found in Figure 1, along with the full publication screening and selection process. There were 23 publications found to meet the final inclusion criteria, including the two publications identified outside of the main screening process. Of the publications included in the scoping review, eight were original research studies, while 15 were narrative reviews or similar.

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Characteristics of Evidence Sources

Models most commonly focused on the first stage of the EOL decision-making process, making the decision (n=22 publications), with far fewer advising on enacting the decision (n=7), and aftercare

(n=9). Six of the original research studies presented an original model or gave advice based on their findings, although one of these incorporated an established breaking bad news model within their full model. The findings of the other two studies reflected the structure of previously established models or frameworks. In contrast to this, most of the models (n=10) presented in the narrative review type publications had been adapted from previously published models or frameworks, mainly from human medical literature. Five were original models or advice developed based on the available literature. Of all the publications, three contained models or EOL advice intended for dogs, two for dogs and cats, two for equids, and 16 for companion animals in general. However, often the recommendations in the models intended for companion animals in general appeared to relate most to dogs and cats, and would less likely be suitable for horses. Examples include advice on assisted nutrition provided by Smith, 18 and on supporting animals requiring hospice care by Bishop et al. 19 All included sources were published between 2005 and 2021. Seventeen were published from 2014 onwards, including all eight original research studies and nine narrative reviews or similar. The other six review type sources were published between 2005 and 2011. The full data extracted about the characteristics and key findings of the eight original research studies included can be found in Table 2. The characteristics and recommendations of the 15 review publications can be found in Table 3.

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Aspects of Decision-Making Models

In some cases, publications presented decision-making steps laid out as a clear model, checklist, framework, or tool. In others, authors presented recommendations from their study findings or from the literature within the publication text. Table 4 summarises the 20 key components and/or stages of the decision-making model or recommendations presented in each publication. The order the components are listed does not necessarily reflect the order in which the publications advise these are completed. Not all models contained all components, and different publications recommend these are carried out in slightly different orders. It was only possible to include the main components within the table, but some publications broke down a component into several smaller steps, and in a few publications additional components were recommended.

No publication reflected every component identified within their model or recommendations. Some publications intended their model to cover the entire decision-making process from the initial discussion up to body aftercare and emotional support, whereas others focused on a specific aspect of the EOL decision. The model presented by Arora et al.¹⁷ covered the greatest number of identified components (n=18), followed by Bishop et al. 19 (n=16). In comparison, Grimm et al. 20 (n=3) and Bley²¹ (n=3) covered the fewest components. The most frequently identified component was "presentation of treatment and/or EOL options" (n=20), followed by "knowledge exchange between veterinary team and owner" (n=18), "consider impact of options on animal patient's QOL" (n=17), and "make a treatment and/or EOL care plan" (n=17). Five publications recommended having the owner sign consent forms prior to enacting a decision (e.g., euthanasia, treatment, a method of body care). In contrast, Arora et al. 17 advised verbal consent over signing a form when the vet-client relationship is good, although stated consent via email or similar is not adequate. Seven publications recommended that veterinary staff begin having EOL conversations with clients early, before these decisions need to be made, and six specifically included or were made up of a breaking bad news protocol. Eight publications advocated setting treatment goals including end points, which signify the point at which euthanasia should occur. For example, when QOL declines past a predetermined point, or the animal can no longer perform certain behaviours which have been pre-agreed between the veterinarian and owner. Marked on Table 4 are the components that are most likely to contribute to SDM, as these involve direct collaboration between the owner and veterinarian.

Discussion

This scoping review has identified the current literature available on critical illness and EOL decision-making models for companion animals (dogs, cats, equids), finding a varied group of publications, of which eight are original studies while 15 are narrative reviews or similar. Within these two groups are a range of study designs and publication types respectively. Twenty key components of the presented models have been identified, which vary in how frequently they appear across these models. No model contained all components. These components offer a basis from which EOL decision-making models specific to companion animals can be proposed. Some components are likely to promote SDM, while others may not necessitate joint engagement from veterinarians and owners. Issues, such as the lack of consistency with which these publications have been indexed, have been identified, and suggestions are made for how these could be addressed. This would allow publications in this area to be more easily discoverable for researchers interested in this area.

Research Protocol

Broad search terms and inclusion criteria were employed to increase the likelihood that all relevant publications would be discovered and included in this review. Titles and abstracts were often vague, meaning a greater number of sources had to be retained at each round of screening due to ambiguity. A further challenge was the lack of uniformity in indexing, requiring a wide variety of terms to be included in the search to prevent relevant publications being excluded. Parker and Yeates, 14 one of the publications discovered separately, was not identified through the main screening process due to the title, abstract and key and indexed terms not including words related to 'euthanasia' or critical illness', despite the main body of the text stating that the model presented could be used for euthanasia decisions. A more consistent approach to indexing research in this area may help facilitate the retrieval of relevant material by researchers in the future. Key terms have been suggested in Table 5 that could be included with all papers on the subject of companion animal EOL decision-making, in order to make them more easily discoverable in searches.

When conducting a scoping review, the aim is to systematically and comprehensively map the research in an identified area, and not to conduct evidence synthesis and appraisal.²² In this case, the aim was to comprehensively map veterinary decision-making models, which meant a diverse range of publication types was included, a common feature of scoping compared to systematic reviews.²² The decision to include narrative reviews was made, as in several cases a human model had been adapted for veterinary use based on current literature, without a research study being carried out^{2, 6, 23}. This decision also increased the number of publications carried through to the full text screening stage, as in the vast majority of cases it was not possible to distinguish between narrative and opinion reviews based on the abstract.

The aim of the study was to investigate EOL decision-making models used in companion animals, including equids. This study did not investigate decision-making around other companion animals, such as rabbits, rodents, and exotic species, which would require a different scoping review with a distinct set of search terms to capture the many potential terms and species involved. In addition, there is little specific research on the human-animal bond for these species, with most focusing on companion animals generally, dogs, or cats,²⁴ and several publications also available for horses.²⁵ Human-animal bond may impact EOL decision-making,¹⁰ and so EOL decision-making models developed specifically for species other than dogs, cats or equids may be less comparable. However, despite human-horse relationships resembling those between owners and dogs or cats,²⁴ there are

several equine specific issues which may limit the applicability of models developed for other companion species. One example is that horses are often bought for a specific purpose and can be sold if this is not fulfilled, although they may also come to be thought of as a family member.²⁶ Other differences are the high financial commitment of equine ownership, and the fact that horses live outside the household.²⁶ For this reason, a variation of the companion animal model may be required for equids, that can take into account the unique aspects of horse ownership and equine culture, so that equine veterinary professionals and owners can better communicate about and consider options for EOL.

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Characteristics of Evidence Sources

Companion animal EOL decision-making appears to still be an emerging field, only receiving research attention in recent years, with all original research studies published from 2014 onwards, and five of the eight since 2018. 16, 17, 20, 27-29 Some of the narrative review type publications were published earlier, with the earliest identified from 2005. 30 However, nine of the 15 narrative reviews have been published since 2015. It is positive that research interest has been increasing in this important area, but the developing nature of the field means there are still many gaps in knowledge to be filled. These include research directed to all phases of the decision process as these have not received equal attention, and additional papers with a specific focus on horses and other domestic equids, which were lacking. There should be further original research into EOL decision-making for companion animals, as these types of publications made up the minority of those identified. Studies into the models, methods, and techniques currently being used by owners and veterinarians, and their impact on both these participants and the animal patients' welfare would be beneficial. Additionally, studies trialling currently available and any future models would be valuable to identify potential barriers and facilitators to their use in real life settings, so that they may be improved. Furthermore, none of the original research studies carried out focused specifically on equids, so it is important for future research to address this due to the unique challenges that are faced by owners and veterinarians in equine practice.

The full decision-making process extends from initial conversations between veterinarian and owner about EOL up to where the decision is made, all of which is encompassed within the first stage of making the decision, and then onto the second stage of enacting this decision, and then the final stage of aftercare. Included within aftercare are decisions about body care and memorialisation, and signposting to emotional support. All but one of the included publications addressed the first stage of the EOL decision-making process, while the other two stages were addressed much less commonly. In some cases, a decision may have to be made very quickly, such as in a medical emergency where there is no hope of treatment and the animal is suffering intensely. However, in many cases this stage of the decision-making process could be the longest, drawn out over an extended period of weeks, months or even years, for example when there is a slow deterioration in QOL. Additionally, this stage of deliberation may especially cause considerable stress for both veterinarian and owner due to uncertainty or conflicting opinions, 1, 31 and so be seen as important to address. Despite the importance of this first stage, the other two should not be neglected. Explaining and planning for enacting the euthanasia decision may help to reduce owner anxiety, 19 which in turn could facilitate the procedure going more smoothly. When veterinarians have successfully facilitated a 'good death' they feel this supports the wellbeing of both themselves and the client.³² Likewise, aftercare is a very important consideration. Cooney et al. 29 found pet owners have a number of concerns regarding after death body care, including cost (61%) and the way their pet's body would be physically handled (57%). Planning for this could reduce anxiety around the process, and prevent

owners from making rushed decisions they may regret or finding only after euthanasia that they cannot afford their preferred option for disposal. In addition, the death of a companion animal can be immensely distressing, ^{10, 17, 33, 34} but societal attitudes towards the status of animals can lead owners to experience disenfranchised grief. ¹⁷ Veterinarians are in a position to validate and normalise their clients' grief, ³³ and following up after euthanasia, such as with a phone call or condolence card, can increase owner satisfaction. ³⁴ Another consideration is that clients that are less satisfied overall with euthanasia are more likely to change veterinary practices. ³⁵ Future models published would benefit from addressing all three stages where possible, rather than just the first.

The majority of veterinary decision-making models have focused on decisions being made for dogs and cats, or general models where the species was not specified. Only two publications expressly related to horses, 14, 15 neither of which were original research studies, while none focused specifically on donkeys or donkey-horse hybrids. This is consistent with other areas of companion animal welfare and veterinary practice, where horses have fallen behind dogs and cats in terms of both research and what is offered. 19, 24, 36 This in turn is likely to affect interactions between veterinarians and clients depending on the species owned, with Arora et al. 17 finding owners of companion animals other than dogs and cats reported less compassion from veterinary professionals. Equine decision-making models may be generally applicable to donkeys, but there are also some differences that may be important to consider. For instance, donkeys tend to form very strong bonds with a particular companion.³⁷ This may mean more consideration needs to be given to healthy donkeys who have a companion requiring euthanasia. At the loss of a companion some donkeys will refuse to eat or drink, which can lead to hyperlipaemia and then potentially death.³⁸ This could potentially involve introducing a new companion before the first is euthanased, although research is required to determine whether this would be effective. It may be possible that in some cases it must be considered whether euthanasia for both donkeys is the best option. This is something usually considered unnecessary for horses who have lost a companion, and a situation in which veterinarians may refuse to euthanase.³⁹

Limitations

It is possible some relevant publications may have been missed if they did not contain the combination of search terms used in either the title, abstract, key words, or indexed terms. Furthermore, there is a small chance relevant publications could have been excluded during title and abstract screening if they did not appear to meet the inclusion criteria, when in fact they would have if the full text had been read. It was beyond the scope of this review to have publications written in languages other than English translated, so some potentially relevant publications may have been excluded as a result.

Conclusion and Recommendations

The components and recommendations of currently available serious illness and EOL decision-making models for companion animals have been collated and extracted to aid owners and clinicians. Key terms (Table 5) have been suggested that future researchers can include in their keywords, to help indexers and make their publications more discoverable to others interested in this area. Companion animal EOL decision-making appears to be an emerging field gaining increasing interest, and it is hoped it will continue to receive further research attention. However, there is still a lack of published original research studies, with a complete absence of original studies specifically on equids.

| 363 | Key future research recommendations include: |
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| 364 365 366 367 368 369 370 371 | Inclusion of the suggested key terms and use of more descriptive titles so work can be discovered Clear summarisation and presentation of key components and/or recommendations of models so these can be easily identified by readers Studies that investigate all three stages of EOL decision-making identified in this review Research that trials developed models in a practical setting Research that focuses explicitly on equids, due to equine specific issues that may reduce the applicability of models developed for small companion animals |
| 372 373 374 375 | The further investigation into the development and refinement of EOL decision-making models that can be applied in a practical setting has the potential to decrease stress and uncertainty felt by companion animal owners and veterinary staff, and support appropriately timed decisions to promote animal welfare at the end of life. |
| 376 | |
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| 379 380 | Funding This research was funded by The Horse Trust. |
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| 383 384 385 386 | Conflict of Interest The authors have no conflicts of interest to declare. |
| 387 388 389 390 | Author Contributions Idea conceived by S.F., G.E., J.B., E.W., and K.P. Study designed by A.C., S.F., G.E., J.B., E.W., and K.P. Acquisition and analysis of data by A.C. and S.F. The lead on writing the manuscript was taken by A.C., with input and feedback from all authors. |
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| 398 399 | Figure Legends |
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| 400 401 | Figure 1. Flow diagram outlining the process used for a scoping review of the current literature on serious illness and end of life decision-making models in dogs, cats, and equids. |
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Table 1. Inclusion and exclusion criteria

| Criteria | Inclusion | Exclusion | | |
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| Population | Domesticated equids: horses/ponies (Equus caballus) and donkeys (Equus asinus) and their hybrids (mules, hinnies) Domesticated dogs (Canis lupus familiaris) Domesticated cats (Felis catus) Non-specified companion animals e.g., where a publication discusses companion animals without focusing on a particular species, but discussion could plausibly relate to the above mentioned species | Wild equids and their hybrids (zebras, wild asses, their hybrids, domesticated-wild equid hybrids) Publications about horses, dogs, or cats kept as farmed/production animals Publications about working horses, dogs or cats in developing countries | | |
| Population | Owners and carers of dogs, cats, and domesticated equids, including breeders and owners of commercial animal premises and charities | Owners/carers of dogs, cats, and equids in developing countries who use these animals for work purposes People who farm dogs, cats, and equids | | |
| Population | Members of veterinary practices/hospitals who are involved in the treatment, care or giving advice for the included animal species | | | |
| Interest | Publications that describe or investigate the decision-making process Publications that describe or investigate the use of decision-making or communication models, guides, or advice (including conversation guides) for use between companion animal owners/carers and veterinary staff | Publications only exploring specific factors that influence which way a decision is made and not the process by which a decision is made Publications only exploring people's opinions on or experiences of using decision making models or guides, but where a model or guide is not described | | |
| Context | Publications involving decision-making between owners/carers and veterinary staff in any situation where euthanasia is a potential option for the included animal species. Also, in situations where the included animal species are suffering from critical or incurable illness, which may be chronic or acute, and a decision must be made between two or several of the following options: different treatment options, to administer, continue, or stop | Publications involving decision-making for non-critical illness, or routine or elective procedures (e.g., worming, vaccination, castration) Publications only involving the decision-making process between multiple owners/carers or multiple members of veterinary staff Publications about causes and procedures for euthanasia | | |

| | treatment, euthanasia, or to take no action. | |
|---------------------|---|--|
| Study Design | Qualitative, mixed methods, observational, experimental, and quasi experimental studies, case series, systematic reviews, scoping reviews, narrative reviews | Opinion reviews, single case studies |
| Publication Type | Peer-reviewed publications, continuing education journals, conference proceedings where a full report is available, textbook chapters, reports, and national guidance | Unable to obtain full text Grey literature |
| Language | Full text available in English | |

Table 2. The study type, methods, and key findings of original research studies included in the scoping review

| Author & Year | Population | Sample Size | Study Design | Publication Type | Country Took Place | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Findings | Limitations |
|--|--|----------------|--|--|-----------------------|----------------------|--|---------------------------------|---|---|---|
| Stoewen <i>et</i> al. (2014) ⁴⁰ | Owners of dogs with life-limiting cancer | 43 | 30 semi- structed interviews (sometimes multiple owners of 1 dog interviewed together) | Peer reviewed journal article | Canada | Dogs | Veterinary practice staff and owners | Making the decision | No – steps presented from study findings | Owners wanted information in forthright manner, multiple formats, understandable language, unrushed, compassionate staff who had established relationship with, 24hr access to ask questions. | Sample will not be representative of whole population (& other standard interview limitations). |
| Stoewen <i>et al.</i> (2014) ⁴¹ | Owners of dogs with life-limiting cancer | 43 | 30 semi- structed interviews (sometimes multiple owners of 1 dog interviewed together) | Peer reviewed journal article | Canada | Dogs | Veterinary practice staff and owners | Making the decision | No – steps presented from study findings | Owners want information presented to be truth, information from vet generated trust & confidence to engage in treatment, make decisions, prepare for future. | Sample will not be representative of whole population (& other standard interview limitations). |
| Christiansen et al. (2016) ¹ | Owners of chronically ill/aged dogs, considering euthanasia or treatment – dogs alive or died within last 8 months | 12 | In depth qualitative interviews | Peer reviewed journal article | Denmark | Dogs | Veterinarians and Owners | Making the decision | No – general shared decision-making model steps presented from study findings & | Owners often want support & input from vet in decisions, especially when unsure of best option, although not all do. Can be hard to get truly informed | Sample will not be representative of whole population, some interviewees' dogs already deceased — may have |

| Author & Year | Population | Sample Size | Study Design | Publication Type | Country Took Place | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Findings | Limitations |
|---|---|----------------|--|--|--|---------------------------------|--|---|---|---|---|
| | | | | | | | | | previous research | consent, best way forward could be knowledge exchange between vet & client. | been impact of recall bias. |
| Grimm <i>et al.</i> (2018) ²⁰ | An expert panel from the European College of Veterinary Anaesthesia and Analgesia, made up of veterinary diplomates and an ethicist | 6 | Part 1: Literature search Part 2: Expert panel to agree on framework for ethical decision- making | Peer reviewed journal article | Collaboratio n between authors from EU countries (Austria, Germany, Switzerland, UK) | General companion animals | Veterinary clinicians and owners | Making the decision | No, new model developed from study: The Veterinary Ethics Tool (VET) | Key stakeholders identified and consensus reached on questions that should be included in VET. | Only views from a small sample of experts included. |
| Nickels and Feeley (2018) ²⁷ | Companion animal veterinarians | 44 | Semi- structured interviews | Peer reviewed journal article | USA | General companion animals | Veterinary practice staff and owners | Making the decision, enacting the decision, aftercare (mainly emotional , not decisions about body etc) | COMFORT ⁴² (findings were considered in relation to SPIKES ⁴³ and COMFORT, & latter was best fit) | Participants were following many of steps from SPIKES, but strategies fit more closely with COMFORT, although did not mention last two steps. | Primarily small animal vets in sample, did not ask other members of vet team, did not get client views. |
| Lehnus <i>et al</i> . (2019) ²⁸ | Veterinarians , nurses, and technicians specialising | 183 | Online Survey – many open questions allowing | Peer reviewed journal article | UK (but using an internationa I sample including | General companion animals | Veterinary clinicians and anaesthetists, and owners (and | Making the decision | Findings related to 4 ethical principles of autonomy, | Anaesthetists faced regular ethical dilemmas. Questions | Standard online survey limitations. Importance of ethical |

| Author & Year | Population | Sample Size | Study Design | Publication Type | Country Took Place | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Findings | Limitations |
|--|---|----------------|--|--|---|---------------------------------|--|---|---|--|---|
| | in veterinary anaesthesia | | detailed narratives | | UK, US, EU & other respondent s) | | potentially other members of veterinary team) | | beneficence, non-maleficence & justice ⁴⁴ (though analysis not performed with this in mind) | suggested to guide discussions with owners. Suggested having anaesthetists involved in discussion with owners. | dilemmas and decision-making thought processes not ranked – some might be more important than others. |
| Arora <i>et al.</i> (2020) ^{16, 17} | Companion animal owners (most owned dogs or cats, but a few horses or other animals) | 310 | Online survey – combinatio n of open and closed questions | Report (non-peer reviewed) | Canada | General companion animals | Veterinary practice staff and owners | Making the decision, enacting the decision, aftercare | Steps presented from study findings. Named developed end of life discussion framework ExplorEEEE R. However, also included SPIKES for breaking bad news ⁴⁵ . | Owners of cats and dogs reported better communication and compassion than owners of other animals. Nearly 95% respondents had been included in end of life discussions. Most able to discuss decisionmaking challenges with vet. | Not peer reviewed, standard online survey limitations. |
| Cooney <i>et al.</i> (2021) ²⁹ | Owners of dogs and/or cats, who had a regular vet, and had made end of life decisions for a pet | 2043 | Online Survey | Peer reviewed journal article | USA | Dogs & cats | Veterinary practice staff and owners | Aftercare | No – steps presented from study findings | Vet main source of information for pet death and body aftercare, 73% needed 20 mins or less. Participants had several concerns about body aftercare. | Standard online survey limitations. |

Table 3. The publication details and recommendations of narrative reviews and similar publication types included in the scoping review

| Author & Year | Publication Type | Country Authors From | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Recommendations |
|---|----------------------------------|-------------------------|---|--|--|--|---|
| Epstein <i>et al.</i> (2005) ³⁰ | Peer reviewed journal article | USA | Senior dogs and cats | Veterinary practice staff and owners | Making the decision, enacting the decision (brief), aftercare (brief) | No – model presented from literature, incorporating currently available resources | Have end of life discussion in anticipatory grief stage rather than in terminal crisis. Consider client's realistic ability to care for pet. |
| Brandt and Grabill (2007) ⁴⁶ | Peer reviewed journal article | USA | General companion animals | Veterinary practice staff and children; veterinary practice staff and older adults | Making the decision, enacting the decision, aftercare (brief) | No – model presented from literature | Age and developmental stage can impact ability to understand health information, so should tailor communication style to suit clients. In all cases honest and compassionate communication important. |
| Cornell and Kopcha (2007) ² | Peer reviewed journal article | USA | General companion animals | Veterinarians and owners | Broad general model of communication that could be applied to all 3 stages (making decision, enacting decision, & aftercare) | 4E model (adapted from human medicine) ⁴⁷ | View each client as individual with specific needs, and identify and adapt to these. Relationship based interaction can be facilitated by 4E model. |
| Shaw and Lagoni (2007) ⁶ | Peer reviewed journal article | USA | General companion animals | Veterinary practice staff and owners | Making the decision | SPIKES (adapted from human medicine) ⁴⁵ | Compassionate communication is core clinical skill that can be taught. This skill should be modelled to foster culture of client & pet support, & increased vet team satisfaction. |
| Gray and Moffett (2010) ⁴⁸ | Textbook | UK; St Kitts & Nevis | General companion animals (although main focus dogs & cats, specifically mentions most recommendations relevant to horses | Veterinary practice staff and owners | Making the decision, enacting the decision, aftercare (brief) | 7-step communication tool (adapted from human medicine) ⁴⁹ | Take a relationship-centred approach to communication. Specific advice also given (separately from actual model) on dealing with certain situations e.g., when client does not want to euthanase, expert clients. |

| Author & Year | Publication Type | Country Authors From | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Recommendations |
|--|----------------------------------|-------------------------|--|--|---|--|---|
| | | | & ponies, as well as other species) | | | | |
| Parker and Yeates (2011) ¹⁴ | Peer reviewed journal article | UK | Horses/equines | Veterinary clinicians and owners | Making the decision | No – model presented from literature | Quality of life assessments should be used to inform decisions. In some cases, broad descriptive questions may be more useful than ones that give a numerical score. There is a lack of validated methodologies in equine veterinary practice, & these should be developed. |
| Hewson (2015) ⁵⁰ | Peer reviewed journal article | UK | General companion animals | Veterinary nurses and owners | Making the decision, aftercare (brief – just writing a condolence card) | SPIKES (adapted from human medicine) ⁵¹ , and separate advice not following model for aftercare | Communicating with grieving clients should not just be one way delivery of information. Should be empathetic & interactive, & is a learnt skill. Condolence cards should be personal rather than generic. |
| Bishop <i>et al.</i> (2016) ¹⁹ | Peer reviewed journal article | USA | General companion animals (although examples given are of dogs and cats) | Veterinary practice staff and owners | Making the decision, enacting the decision, aftercare | No – model presented from literature & experience of taskforce of experts | Primary care practices should have dedicated team implementing end of life palliative & hospice care. Hospice & palliative care options should be discussed with owners, as well as euthanasia vs hospice assisted natural death. Although animal hospice does not accept owner's decision to let pet die without euthanasia unless measures in place to alleviate discomfort & distress. |
| Knesl <i>et al.</i> (2017) ⁵² | Peer reviewed journal article | USA | General companion animals | Veterinarians and owners | Making the decision | No – model presented from literature, although other currently available resources cited | To improve end of life discussions & decisions vet staff should have sufficient training in ethical approaches to determine when euthanasia is appropriate, regular training in |

| Author & Year | Publication Type | Country Authors From | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Recommendations |
|--|----------------------------------|-------------------------|---|--|------------------------------|---|--|
| | | | | | | | client communication, & a standard end of life/euthanasia protocol. Vets can use ethical decision-making frameworks, a communication system where clients see a regular vet, & quality of life assessment tools to improve end of life decision-making. |
| Pierce and Shanan (2017) ⁵³ | Textbook | USA | General companion animals | Veterinary practice/veterinary hospice staff and owners (and owners' families) | Making the decision | Four-box method (adapted from human medicine) ⁵⁴ | When 4-box method previously adapted for vet use 4th box (patient preferences) excluded. This box should be retained, & responsibility of caregivers (especially) & vet/hospice team to try to discern the animal's preferences. |
| Van Eps <i>et al.</i> (2017) ¹⁵ | Textbook | Australia; USA | Horses/equines (with laminitis) | Veterinarians, farriers, and owners | Making the decision | Adapted from Parker & Yeates ¹⁴ (developed for equines) to be used in specific context of equine chronic laminitis | The owner, vet & farrier will all have valuable contributions when assessing quality of life and making decisions in a chronic laminitis case. The outlined model can be used to help the different team members reach a resolution when there is a disagreement. |
| Bley (2018) ²¹ | Peer reviewed journal article | Switzerland | General companion animals (with cancer) | Veterinarians and owners | Making the decision | 4 principles of ethical decision making (beneficence, non-maleficence, autonomy, justice) (adapted from human medicine) ⁴⁴ | Can integrate the 4 ethical principles (especially beneficence/non-maleficence) into empirical facts of what is medically possible. Guidelines from this can reduce burden of decision on owner, & ensure animal patients not enduring severe side effects from futile treatment or euthanased prematurely. Need to consider double effect – where a |

| Author & Year | Publication Type | Country Authors From | Species Model For | Who Will Use Model? | Stage of End of Life Care | Based on Previous Model? | Recommendations |
|---|-------------------------------|-------------------------|---|--------------------------------------|------------------------------|--|--|
| | | | | | | | treatment has side effect or other impact, the benefit must outweigh this for it to be used. |
| Goldberg (2019) ²³ | Peer reviewed journal article | USA | General companion animals | Veterinary practice staff and owners | Making the decision | Serious Illness Conversation Guide (SICG) (adapted from human medicine to form Serious Veterinary Illness Conversation Guide (SVICG)) ⁵⁵ | The SVICG is a model for goals of care conversations. Ideally these conversations would take place for all geriatric, chronically or seriously ill patients, and all owners struggling to make decisions. The use of goals of care conversations in veterinary medicine have the potential to increase the quality of medical and palliative care animal patients receive. |
| Smith (2019) ¹⁸ | Peer reviewed journal article | USA | General companion animals in palliative care (although examples given are of dogs and cats) (To decide whether to provide assisted nutrition) | Veterinary practice staff and owners | Making the decision | Adapted from Karlawish <i>et al.</i> ⁵⁶ (from human medicine) | Decreased food & water consumption commonly seen towards end of life. This can be managed, including using enteral or parenteral nutritional supplementation. Carefully consider the impact assisted nutrition may have on quality as well as quantity of life, when deciding whether to use. Should not use it to prolong life if quality of life will be poor. |
| Lummis <i>et al.</i> (2020) ⁵⁷ | Peer reviewed journal article | USA | General companion animals (although examples given are of dogs and cats) | Veterinary practice staff and owners | Making the decision | Common components of SPIKES ⁵¹ , ABCDE ⁵⁸ , BREAKS ⁵⁹ & SICG ⁵⁵ (all developed for human medicine) taken and adapted for veterinary use. Additional advice is based on literature. | Good communication sets foundation for providing improved care especially during stressful situations & end of life. The guidelines presented can be implemented in a range of stressful situations. Vet staff should take time to prepare themselves & the physical space before beginning an end of life conversation. |

Table 4. Components included in end of life or critical illness decision-making models identified within the publications included in the scoping review

| Table 4. Componer | Tt5 Includ | cu iii ci | Id of file | Of Cittle | | accision | THAKIN | 5 models | raciitiii | CG WITH | r tric pt | | | ica iii tii | C SCOPIII | IS ICVICW | | | | |
|--|---|----------------------------|--|-----------------------------|-----------------------------|--|---|--|--|--|------------------------------|---------------------------------|--|------------------------------------|----------------------|---|-------------------------------|---|---|--|
| Author & Year | Start Having End of Life Conversations Early | Breaking Bad News Protocol | Knowledge Exchange Between Vet Team & Owner * | Elicit Owner Expectations * | Check Owner Understanding * | Present Treatment &/or End of Life Options | Ascertain Level of Involvement in Decision Desired by Owner * | Consider Impact of Options on Animal Patient's Quality of Life * | Consider Impact of Options on Owner (& Other Stakeholders) * | Give Information in Different Formats e.g., written, online etc | Give Information About Costs | Have Owner Sign Consent Form(s) | Make a Treatment &/or End of Life Care Plan * | Set Treatment Goals & End Points * | Minimise Owner Guilt | Explain Euthanasia Procedure & Options | Plan for Euthanasia Procedure | Explain Body Aftercare Options & Make Plan | Signpost Owner to &/or Provide Emotional Support | Follow Up e.g., Appointment, Condolence Card, Fur Clippings etc |
| Original Research | 1 Studies | | | | | | | | | | | | | | | | | 1 | | |
| Stoewen <i>et al.</i> (2014) ⁴⁰ | | | | | | | | | | | | | | | | | | | | |
| Stoewen <i>et al.</i> (2014) ⁴¹ | | | | | | | | | | | | | | | | | | | | |
| Christiansen et al. (2016) ¹ | | | | | | | | | | | | | | | | | | | | |
| Grimm <i>et al.</i> (2018) ²⁰ | | | | | | | | | | | | | | | | | | | | |
| Nickels and Feeley (2018) ²⁷ | | | | | | | | | | | | | | | | | | | | |
| Lehnus <i>et al.</i> (2019) ²⁸ | | | | | | | | | | | | | | | | | | | | |
| Arora <i>et al.</i> (2020) ^{16, 17} | | | | | | | | | | | | † | | | | | | | | |
| Cooney <i>et al.</i> (2021) ²⁹ | | | | | | | | | | | | | | | | | | | | |
| Narrative Review | rs & Simi | lar | | | ı | | - | | | | | | | | | | | | | |
| Epstein <i>et al.</i> (2005) ³⁰ | | | | | | | | | | | | | | | | | | | | |
| Brandt and Grabill (2007) ⁴⁶ | | | | | | | | | | | | | | | | | | | | |
| Cornell and Kopcha (2007) ² | | | | | | | | | | | | | | | | | | | | |
| Shaw and Lagoni (2007) ⁶ | | | | | | | | | | | | | | | | | | | | |

| Author & Year | Start Having End of Life Conversations Early | Breaking Bad News Protocol | Knowledge Exchange Between Vet Team & Owner * | Elicit Owner Expectations * | Check Owner Understanding * | Present Treatment &/or End of Life Options | Ascertain Level of Involvement in Decision Desired by Owner * | Consider Impact of Options on Animal Patient's Quality of Life * | Consider Impact of Options on Owner (& Other Stakeholders) * | Give Information in Different Formats e.g., written, online etc | Give Information About Costs | Have Owner Sign Consent Form(s) | Make a Treatment &/or End of Life Care Plan * | Set Treatment Goals & End Points * | Minimise Owner Guilt | Explain Euthanasia Procedure & Options | Plan for Euthanasia Procedure | Explain Body Aftercare Options & Make Plan | Signpost Owner to &/or Provide Emotional Support | Follow Up e.g., Appointment, Condolence Card, Fur Clippings etc |
|---|---|----------------------------|--|-----------------------------|-----------------------------|---|---|--|--|--|------------------------------|---------------------------------|--|------------------------------------|----------------------|--|-------------------------------|---|---|--|
| Gray and Moffett (2010) ⁴⁸ | | | | | | | | | | | | | | | | | | | | |
| Parker and Yeates (2011) ¹⁴ | | | | | | | | | | | | | | | | | | | | |
| Hewson (2015) ⁵⁰ | | | | | | | | | | | | | | | | | | | | |
| Bishop <i>et al.</i> (2016) ¹⁹ | | | | | | | | | | | | | | | | | | | | |
| Knesl <i>et al.</i> (2017) ⁵² | | | | | | | | | | | | | | | | | | | | |
| Pierce and Shanan (2017) ⁵³ | | | | | | | | | | | | | | | | | | | | |
| Van Eps <i>et al.</i> (2017) ¹⁵ | | | | | | | | | | | | | | | | | | | | |
| Bley (2018) ²¹ | | | | | | | | | | | | | | | | | | | | |
| Goldberg (2019) ²³ | | | | | | | | | | | | | | | | | | | | |
| Smith (2019) ¹⁸ | | | | | | | | | | | | | | | | | | | | |
| Lummis <i>et al.</i> (2020) ⁵⁷ | | | | | | | | | | | | | | | | | | | | |

^{*} Components most likely to contribute to shared decision-making between client and veterinarian.

[†] Recommended when veterinarian-client relationship is good should use verbal consent over signing a form, although consent via email or similar is not adequate.

Table 5. Suggested key terms to be included in future publications on companion animal end of life decision-making

| Key Terms | Notes |
|--|---|
| Veterinary | To distinguish from publications in human medicine |
| [Species/group of animals] | E.g., horse, equids, or companion animals etc, so searches can be narrowed from other animal groups such as farmed, wild, or research animals |
| Euthanasia OR End of Life OR Serious Illness | Depending on which is most appropriate for the research topic |
| Decision-making | |
| Model OR Plan OR Guidance OR Framework | Options to allow flexibility as researchers may wish to market their recommendations slightly differently depending on their specific goals |

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