

# LARGE ANIMAL MEDICAL NURSING CLINICAL MENTORSHIP



## VM 20800

# CRITERIA HANDBOOK AND LOGBOOK

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***IMPORTANT! See following page for due dates for all tasks and Animal Use Guidelines***

**NOTE THE FOLLOWING DUE DATES FOR THE TASKS ABOVE:**

***Fall or Spring semester            5:00p.m. Thursday of week 8 – Tasks 1-5, 10-20***

***5:00p.m. Thursday of week 10 – Tasks 6-9***

***Summer session                    5:00p.m. Thursday of week 4 – Tasks 1-5, 10-20***

***5:00p.m. Thursday of week 7 – Tasks 6-9***

***Incomplete grades will not be assigned for mentorships at the end of the semester.***

***Grade penalties will be assessed for tasks submitted after the due date.***

***Resubmission due dates will be set by the instructor as required.***

## Animal Use Guidelines

The student shall abide by the following guidelines when performing mentorship tasks:

1. A mentorship task may be performed only once on a single animal.
2. A student may perform a maximum of ten (10) minimally invasive tasks (denoted by one asterisk) on a single animal within a 24-hour period.
3. A student may perform a maximum of three (3) moderately invasive tasks (denoted by two asterisks) on a single animal within a 24-hour period.
4. When combining tasks, a student may perform a maximum of five (5) minimally and three (3) moderately invasive tasks on a single animal within a 24-hour period.
5. Tasks denoted with no asterisks do not involve live animal use.

For example, a student might perform the following tasks on an animal in a single day:

1. Restrain a dog in sternal recumbency\*
2. Restrain a dog in lateral recumbency\*
3. Restrain a dog for cephalic venipuncture\*
4. Restrain a dog for saphenous venipuncture\*
5. Restrain a dog for jugular venipuncture\*
6. Administer subcutaneous injection\*\*
7. Administer intramuscular injection\*\*
8. Intravenous cephalic injection – canine\*\*

Failure to comply with the Animal Use Guidelines may result in failure of the Clinical Mentorship.

# STUDENT INFORMATION

## GOALS OF VM 20800 LARGE ANIMAL MEDICAL NURSING CLINICAL MENTORSHIP

Working with a veterinary care facility, the student will perform tasks under the supervision of a clinical mentor (veterinarian or credentialed veterinary technician).

In order to achieve the goals for this Clinical Mentorship, the tasks must be performed to the level of competency as outlined by the *Criteria* for each task.

The student is responsible for providing documentation for each task as defined by the *Materials Submitted for Evaluation and Verification* section on each task.

In addition to the documentation, the Clinical Mentorship site supervisor will verify that the student performed the task under their supervision.

Final approval of successful performance and completion of the Clinical Mentorship will be made by the Purdue University instructor in charge of the Clinical Mentorship. This approval will be based upon the documentation provided by the student.

The Purdue University instructor in charge has the option to require additional documentation if, in their judgment, the student has not performed and/or documented the task to the level set by the Criteria.

Documentation of completed tasks is essential to validate the educational process and insure that the performance of graduates of the Veterinary Technology Distance Learning Program meets the standards of quality required by the Purdue University College of Veterinary Medicine faculty and the American Veterinary Medical Association accrediting bodies.

## CONTACT PERSON

Any questions regarding the Clinical Mentorship process should be directed to:

Pam Phegley, BS, RVT  
Purdue University  
Veterinary Technology Program  
625 Harrison Street, Lynn Hall G171  
West Lafayette IN 47907  
(765) 496-6809  
phegleyp@purdue.edu

# PRE-REQUISITES FOR VM 20800 LARGE ANIMAL MEDICAL NURSING CLINICAL MENTORSHIP

## Contracts and Agreements

Because of legal, liability and AVMA accreditation issues, the following documents must be completed *prior to beginning* the Clinical Mentorship

1. Facility Requirement Agreement
2. Clinical Mentorship Agreement
3. Supervisor Agreement
4. Health Risk and Insurance Acknowledgement
5. Professional Liability Insurance Coverage
6. Agreement and Release of Liability
7. Technical Standards Acknowledgement
8. Code of Conduct

These forms are available on the VTDL website for downloading, printout, and completion.

If more than one Clinical Mentorship course is taken, a separate Facility Certification, Clinical Mentorship Contract, and Supervisor Agreement must be completed for each course.

More than one Mentorship Supervisor may sign the mentorship logbook. Each must be either a DVM or a credentialed technician, and must complete a separate Supervisor Agreement.

*Failure to complete and return the listed documents and the payment for Student Professional Liability Insurance Coverage will prevent the student from enrolling in the Clinical Mentorship.*

## Insurance

Two types of insurance are recommended or required for the student working in a Clinical Mentorship.

Health Insurance is highly recommended to cover the medical expenses should the student become injured while on the job. It is the student's responsibility to procure such insurance.

Liability Insurance is required to protect the student in the event of a suit filed against the student for acts he/she performed while in the Clinical Mentorship.

Each VTDL student is required to purchase, for a nominal fee, Professional Liability Insurance through Purdue University. This is done by completing the Professional Liability Insurance Coverage form and sending a check for the fee. This check must be separate from payment of course fees. The fee covers from the time of initiation of coverage until the subsequent July 31<sup>st</sup>.

Students will not be enrolled in Clinical Mentorships until the Professional Liability Insurance is paid, and the student is covered by the policy.

# SELECTING THE CLINICAL MENTORSHIP SITE – FACILITY REQUIREMENTS

You must visit the Clinical Mentorship Site and determine if the following supplies and equipment are readily available to you for use during your Clinical Mentorship. You must complete and have the facility veterinarian sign the Facility Requirement Agreement.

The veterinary care facility must be equipped:

**With the following equipment:**

- Bovine halter
- Cattle chute
- Nose lead
- Cotton rope for tail tie/flank squeeze
- Hog snare
- Digital thermometer (not mercury)
- Stethoscope
- Balling gun (multiple sizes)
- Frick speculum
- Stomach tube
- Clippers
- CMT Kit including paddle and reagents

**With the following items:**

- Syringes of various sizes
- Needles of various sizes
- 4x4 gauze sponges
- Isopropyl alcohol
- Container to collect urine

**Optional:**

- Vacutainer collection system

**The following animals must be available for the student's use:**

- Cow
- Sheep or Goat
- Pig

# SELECTION OF CLINICAL MENTORSHIP SUPERVISOR

The Clinical Mentorship Supervisor is the person who will sign your Logbook and verify performance of tasks at the Clinical Mentorship site. This person must be a credentialed veterinary technician (have graduated from an AVMA accredited program or met State requirements for credentialing as a veterinary technician) or a licensed veterinarian.

An individual who claims to be a “veterinary technician” but has not met the criteria for credentialing above is not eligible to be mentorship supervisor.

The individual is not considered to be an employee of Purdue University when acting as your Clinical Mentorship supervisor.

Each Clinical Mentorship Supervisor must complete a *Supervisor Agreement*. You must return this agreement with the other agreements prior to beginning your Clinical Mentorship. Multiple supervisors may be used for documentation of mentorship tasks. Each supervisor must complete a separate agreement.

Should your Clinical Mentorship Supervisor change during the course of the Clinical Mentorship, you will need to have your new supervisor complete a *Clinical Mentorship Supervisor Agreement* and return it to the Purdue VTDL office. These forms are available on the VTDL website for downloading and printing.



# CRITERIA HANDBOOK AND LOGBOOK

This Criteria Handbook and Logbook contains the list of tasks that must be successfully completed in order to receive credit for this Clinical Mentorship. You are expected to have learned the basics of how, why, and when each procedure is to be done from the courses listed as pre-requisites for this Clinical Mentorship. This booklet contains the directions and forms that must be followed and completed in order to meet the standards set for successful completion of this Clinical Mentorship.

Please read each component of each task carefully before doing the task to minimize the number of times you have to repeat the task. The components of each task are summarized:

**Goal** – Describes the ultimate outcome of the task you will perform.

**Description** – Lists the physical acts that you will perform, and under what conditions these acts will be completed.

**Criteria** – Lists specific, observable, objective behaviors that you must demonstrate for each task. Your ability to demonstrate each of these behaviors will be required in order to be considered as having successfully completed each task.

**Number of Times Task Needs to be Successfully Performed** – States the required number of times to repeat the tasks. The patient's name and the date each repetition of the task was performed must be recorded on the Task Verification Form.

**EACH REQUIRED REPETITION OF THE TASK MUST BE PERFORMED ON A DIFFERENT ANIMAL.** You cannot use the same animal to do all of the repetitions of a task. However, you can use the same animal to perform different tasks. In other words, you can't do three ear cleanings on the same animal, however, you can do an ear cleaning, an anal sac expression, and a venipuncture on the same animal.

**Materials Submitted for Evaluation and Verification** – These specific materials, which usually include video or other materials, must be submitted to demonstrate that you actually performed the task as stated. Each evaluation states specifically what must be shown in the submitted materials.

*The Purdue University course instructor for this Clinical Mentorship has the option to request further documentation if the submitted materials do not clearly illustrate the required tasks.*

It is recommended that the video materials document all angles of the procedure. The purpose of the video and other material is to provide "concrete evidence" that you were able to perform the task to the standard required.

If you do not own a video camera, one may be borrowed or rented. Pre-planning the video procedures will help reduce the need to redo the video documentation. Explain what you are doing as you perform the video documentation, as narration will help the evaluator follow your thought process and clarify what is seen on the video. Voiceovers may be done to clearly explain what is being performed. At the beginning of each task, clearly announce what task you are doing, or insert a written title in the video.

Videotapes, photographs, radiographs, slides, written projects, the Criteria Handbook and Logbook and any other required documentation will not be returned. These items will be kept at Purdue as documentation of the student's performance for accreditation purposes.

This validation is essential to help the Purdue VTDL meet AVMA accreditation criteria. Therefore, it is essential that you follow the evaluation and validation requirements.

**Task Verification Forms** – Each task has a form that must be completed and signed by the Clinical Mentorship Supervisor.

**Supplementary Materials** – Logs, written materials, photographs, or other forms/documentation may be required for specific tasks. Be sure to read the Materials to be Submitted for Evaluation section very carefully and return all documented evidence as prescribed.

# COMPLETION OF THE CLINICAL MENTORSHIP

Mentorship logbooks include due dates for sections of courses. Each section must arrive at Purdue by the deadline (not a postmark date).

Paperwork may be

- FAXed to 765-496-2873
- e-mailed to [phegleyp@purdue.edu](mailto:phegleyp@purdue.edu)
- sent by regular mail to 625 Harrison Street, Lynn Hall G171, West Lafayette, IN 47907

Videos may be submitted

- in the Media Gallery of Blackboard. If submitted on Blackboard, send an e-mail to [phegleyp@purdue.edu](mailto:phegleyp@purdue.edu) notifying of the submission. ***This is the preferred method of online submission***, since it does not limit how much you put on, is no cost to you, and automatically archives here. You must assign the videos to the correct course in order for the instructor to view them.
- by an online source such as Dropbox. If a password is required to open videos submitted with an online service, email the password to [phegleyp@purdue.edu](mailto:phegleyp@purdue.edu). These methods may not be acceptable if they cannot be archived.
- by sending on a disc or flash drive by regular mail to 625 Harrison Street, Lynn Hall G171, West Lafayette, IN 47907

Late submissions will incur a grade penalty. Incomplete grades will no longer be assigned for mentorships at the end of each semester.

Feedback will be emailed until all tasks are completed successfully. A hard copy will be sent when the course is complete and a grade is assigned. As necessary, instructors may require resubmission of some tasks. When feedback is sent, due dates for resubmissions will be given. *It is crucial that students with pending feedback check their Purdue emails frequently so this information is received in a timely manner.*

Final approval of successful performance and completion of the Clinical Mentorship will be made by the Purdue University instructor in charge of the Clinical Mentorship based upon the documentation provided by the student.

Upon successful completion of all tasks in the clinical mentorship course, a grade will be assigned by the course instructor based upon the documented performance of the tasks.

# CLINICAL MENTORSHIP TASKS

## INTRODUCTION TO ESSENTIAL TASKS AND CRITERIA

Before starting each task:

1. Read the Goal, Description, Criteria, and Materials to be Submitted for Evaluation and Verification. Understand what is expected of you for each task.
2. Make sure you have whatever equipment and supplies you need to document the task. Pay particular attention to the details of what needs to be documented and submitted.
3. Make sure you obtain appropriate permissions where necessary. Please inform the facility's owner/manager of your activities. A good relationship with the veterinarian in charge is key to having a positive Clinical Mentorship experience.

After performing each task:

4. Label all items submitted so that the materials you submit for evaluation and validation at Purdue are identified as your submission.
5. Label all videos posted to Blackboard with the name of the task performed.
6. Submit materials to Purdue by the deadlines listed in the logbooks.

# CLINICAL MENTORSHIP PROJECTS

## INTRODUCTION TO SPECIAL PROJECTS

Certain mentorships will have required projects to complete in addition to the required tasks. These are skills that are better assessed in the form of a project. Projects should be typed, and checked for correct grammar and spelling.

### Before starting each project

1. Read through the project in its entirety. This will give you a description of the project and what is needed to complete it successfully.
2. Determine what materials, if any, need to be submitted for completion of the project.
3. Most projects will come with a list of questions that need to be answered. The responses should be included in the write up.
4. If videotaping is required for a project, it should be noted on the videotape verbally that this is for the project and not another required task. Some projects may require a verbal narration of a student doing something. Each individual project will define if that is a necessary requirement for that project.

Note: Videotaping and photographs are not for the purpose of verifying if the practice is within OSHA compliance or other government regulations. These projects are for the student's education. It may be determined by the student that the practice is not within the current recommendations. The purpose of these projects is to make the student aware of these issues, and how to recognize the issues and develop suggestions for improvement. There will be certain mentorships where OSHA recommendations, in regards to equipment and policies, will be facility requirements for the mentorship.

# 1. APPROACHING AND PLACING A HALTER IN THE FOOD ANIMAL PATIENT

**Goal:** The student will safely approach and place a halter on a bovine patient either in a pen or a chute

**Description:** The student will approach the bovine patient and place a halter on the patient. The student will be aware of the patient's demeanor, attitude, and body language.

**Criteria:** The student observed the patient from a distance.

The student approached the patient calmly and quietly.

The student approached the patient from the left side while verbalizing, so the patient was aware of the student.

The student took the appropriate steps to calm the patient if it became uneasy.

The student placed a hand on the patient without undue stress on the patient.

The student approached the patient and placed the halter on the far ear.

The student placed the halter on the near ear.

The student placed the muzzle into the halter with the lead under the chin and on the patient's left side.

The student completed the final adjustments to the halter so that the halter was comfortable to the patient and was useful to the student.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Approaching and Placing a Halter in the Food Animal Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student approaching a bovine patient and placing a halter as defined in the above criteria for this task. Clear verbalization of the process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed these tasks under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 2. USE OF A HEAD CATCH WITH THE BOVINE PATIENT

**Goal:** The student will successfully restrain a bovine patient with the use of a head catch

**Description:** The student will successfully restrain a bovine patient with the use of a head catch. This head catch may be a part of a restraining (squeeze) chute or simply a head catch at the end of an alley. The student will ensure that no harm is done to the patient.

**Criteria:** The student set the head catch in anticipation of the patient entering the chute or alley.

The student placed their hands on the head catch mechanism in preparation.

The student quickly engaged the mechanism when the patient's head entered the head catch.

The student successfully engaged the head catch mechanism so that the patient did not go through or back out of the head catch.

The student successfully released the patient without harm to the patient or themselves.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Use of a Head Catch with the Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student using a head catch as defined in the above criteria for this task. Clear verbalization of the process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

### 3. USE OF A TAIL TIE WITH THE BOVINE PATIENT

**Goal:** The student will restrain the tail of a bovine patient using a rope.

**Description:** The student will restrain the tail of a bovine patient using a rope. The tail tie when completed will successfully restrain the tail of the patient by moving it out of the way and tying the tail to the body of the patient.

**Criteria:** The student located the end of the sacral vertebrae on the patient.

The student placed the rope below the sacral vertebrae of the patient.

The student folded the hair of the tail over the rope without bending the sacral vertebrae of the patient.

The student completed the tying of the tail tie knot so that with tension, the tail could be brought to the side of the patient.

The student wrapped the rope around the neck of the patient and tied it with a quick release knot.

The student released the quick release knot from around the neck and removed the tail tie from the patient.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Use of the Tail Tie with the Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student using a tail tie as defined in the above criteria for this task. Clear verbalization of the process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_



## 4. APPLICATION OF TAIL RESTRAINT IN THE BOVINE PATIENT

**Goal:** The student will apply tail restraint in the bovine patient.

**Description:** The student will apply tail restraint so that a second person may treat a bovine patient. The student will observe the behavior of the patient while tail restraint is being applied and adjust the restraint as necessary to protect the other person.

**Criteria:** The student approached the patient already in the stocks.

The student grasped the tail close to the base and lifted it over the back of the patient.

The student restrained the distal end of the tail so they were not hit in the face with it.

The student applied pressure to the tail, continuing to take it straight over the patient's spine without causing injury to the patient.

The student relaxed the hold on the tail as desired when the second person was not actively in danger.

The student released the tail of the patient and stepped away.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Application of Tail Restraint in the Bovine Patient task, signed by the clinical mentorship supervisor.
2. One video that clearly shows the student applying tail restraint as defined in the above criteria for this task. Clear verbalization of the process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 5. APPLICATION OF FLANK RESTRAINT ON THE BOVINE PATIENT

**Goal:** The student will approach the bovine and place a rope on the patient so that flank restraint is accomplished.

**Description:** The student will approach the bovine patient and perform flank restraint using a rope. The student will be aware of the patient's demeanor, attitude and body language. The student will observe the behavior of the patient while flank restraint is being applied and adjust the restraint as necessary to protect themselves and/or another person.

**Criteria:** The student approached the patient in the stocks or chute.

The student adjusted the chute so that the rope could be placed and adjusted without any danger of injury to the student.

The student made a loop in the end of the rope.

The student placed the rope over patient's back in front of the tuber coxae.

The student reached underneath the patient to retrieve the far end of the rope (this portion of the task may be assisted by a second person).

The student threaded the rope through the previously made loop.

The student tightened the flank rope a small amount.

The student checked to make sure the rope was in front of the udder.

The student tightened the rope sufficiently to discourage patient from kicking.

The student tied the rope to itself with a quick release knot.

The student released the knot and removed the flank restraint from the patient when it was no longer needed.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Application of Flank Restraint on the Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student applying flank restraint on a bovine patient as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 6. HERDING AND CAPTURING THE OVINE/CAPRINE PATIENT

**Goal:** The student will approach the ovine/caprine patient in a pen.

**Description:** The student will approach the ovine/caprine patient with the intent of working on the patient. They will be aware of the patient's demeanor, attitude, and body language.

**Criteria:** The student observed the patient (or group) from a distance.

The student approached the patient (or group) calmly and quietly.

The student allowed the group to remain together and moved near the patient within the group.

The student made contact with the patient and firmly grasped around the head or neck area.

The student did not grasp the patient by the wool.

The student kept control of the patient until the patient ceased to struggle.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Herding and Capturing the Ovine/Caprine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student herding and capturing an ovine or caprine patient as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 7. RESTRAINT OF THE OVINE/CAPRINE PATIENT

**Goal:** The student will choose and demonstrate a restraint method for the ovine/caprine patient.

**Description:** The student will choose and demonstrate a restraint method from the list below:

1. The Energy efficient method
2. The Alternate energy efficient method
3. The Coordination method
4. The Hercules method

**Criteria:** **Energy Efficient method**

The student grasped the head or neck with the hand under the jaw.

The student reached over the back of the patient and grasped the hind limb nearest to them.

The student pulled the hind limb ventral and up and at the same time pulled the head of the patient toward them.

The student stepped back and allowed the patient's rump to sit on the ground.

The student placed the patient between their legs and allowed the patient to relax.

The student kept control of the patient until the patient ceased to struggle.

The student slowly released the patient, allowed it to roll to its side and stand up.

The student did not at any time grasp the patient by the wool.

**Alternate Energy Efficient method**

The student grasped the head or neck with the hand under the jaw.

The student reached under the abdomen of the patient and grasped the hind limb furthest from them.

The student pulled the hind limb ventral and toward them.

The student used their shoulder to push the patient's hip and at the same time lifted the patient's head causing the patient to sit on its rump with its feet toward the student.

The student stepped around the patient so that the patient's back is in front of them with the limbs of the patient pointing away.

The student placed the patient between their legs and allowed patient to relax.

The student kept control of the patient until the patient ceased to struggle.

The student slowly released the patient, allowed it to roll to its side and stand.

The student did not at any time grasp the patient by the wool.

### **The Coordination method**

The student grasped the head or neck with the hand under the jaw.

The student placed their hand on the patient's hip that is furthest away.

The student curved the patient's head to its side with its nose pointed toward its side.

The student pushed down and back on the patient's hip.

The student stepped back with the foot near the back of the patient.

The student placed the patient on its rump.

The student placed the patient between their legs and allowed patient to relax.

The student kept control of the patient until the patient ceased to struggle.

The student slowly released the patient, allowed it to roll to its side and stand.

The student did not at any time grasp the patient by the wool.

### **The Hercules method**

The student grasped the head or neck with the hand under the jaw.

The student grasped the fold of the patient's flank on the side furthest from them.

The student lifted and rolled the sheep onto their thighs.

The student lifted the feet of the patient off the ground.

The student set the patient on its rump.

The student placed the patient between their legs and allowed the patient to relax.

The student kept control of the patient until the patient ceased to struggle.

The student slowly released the patient, allowed it to roll to its side and stand up.

The student did not at any time grasp the patient by the wool.

**Number of Times Task Needs to be Successfully Performed:** 2

### **Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Restraint of the Ovine/Caprine Patient task, signed by the clinical mentorship supervisor.
2. One video that clearly shows the student restraining an ovine or caprine patient as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

## RESTRAINT OF THE OVINE/CAPRINE PATIENT

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 8. SNARE RESTRAINT OF THE PORCINE PATIENT

- Goal:** The student will restrain the porcine patient (100-200 pounds) using a snare.
- Description:** The student will restrain the porcine patient using a snare. The snare may be made of rope or a commercially purchased snare. The student will be aware of the patient's demeanor, attitude and body language.
- Criteria:**
- The student observed the patient from a distance.
  - The student made sure that the pen is the correct size for snaring the patient.
  - The student checked the snare to be sure it was operating correctly.
  - The student made sure the loop in the snare was large enough to go over the patient's nose and into the mouth.
  - The student approached the patient on the side calmly and quietly.
  - The student, standing next to the patient, guided the loop of the snare into the mouth and over the nose or upper jaw.
  - The student made sure the loop is inserted far enough into the patient's mouth.
  - The student pulled the loop tight when it was in the proper position.
  - The student kept the loop tight while moving to the front of the patient.
  - The student maintained pressure on the snare so that the patient could not escape.
  - The student kept control of the patient until the patient ceased to struggle.
  - The student released the patient after the procedure was completed..

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Snare Restraint of the Porcine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student restraining a porcine patient as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 9. HERDING OR MOVING OF THE PORCINE PATIENT

**Goal:** The student will move the porcine patient (100-200 pounds) using a board or panel

**Description:** The student will move the porcine patient using a board or panel. The patient will be in a pen large enough to allow a good demonstration. The student will be aware of the patient's demeanor, attitude and body language.

**Criteria:** The student observed the patient from a distance.

The student made sure that the pen is the correct size for moving the patient.

The student moved to the patient, keeping the board or panel between themselves and the patient.

The student approached the patient on the side calmly and quietly.

The student guided the patient along the fence from one end of the pen to the other using the board or panel.

The student kept control of the patient during the process.

The student did not rush the patient but allowed it to move at its own pace.

The student released the patient after moving it around the pen.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Herding or Moving of the Porcine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student herding or moving a porcine patient as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_



## 10. KNOT TYING DEMONSTRATION

**Goal:** The student will demonstrate the use of different knots.

**Description:** The student will demonstrate the use of the knots listed below. The knots will be demonstrated in a situation where they are actually used.

- **Square Knot**
- **Bowline**
- **Clove Hitch**
- **Halter Tie**

**Criteria:** **Square Knot**

The student explained the choice of knot and gave the correct reason for its use and why it was appropriate in the situation.

The student correctly tied the knot according to the text/video from VCS 23700 and verbalized what they were doing as they tied the knot.

The student tightened the knot so that it would not move.

The student displayed the knot tied and in use.

**Bowline Knot**

The student explained the choice of knot and gave the correct reason for its use and why it was appropriate in the situation.

The student correctly tied the knot according to the text/video from VCS 23700 and verbalized what they were doing as they tied the knot.

The student tightened the knot so that it would not move.

The student displayed the knot tied and in use.

The knot did not slide or tighten.

**Clove Hitch**

The student explained the choice of knot and gave the correct reason for its use and why it was appropriate in the situation.

The student correctly tied the knot according to the text/video from VCS 23700 and verbalized what they were doing as they tied the knot.

The knot did not come loose when challenged by a patient.

**Halter Tie**

The student explained the choice of knot and gave the correct reason for its use and why it was appropriate in the situation.

The student correctly tied the knot according to the text/video from VCS 23700 and verbalized what they were doing as they tied the knot.

The knot held when challenged by the patient.

The knot came free quickly when untied by the student.

**Number of Times Task Needs to be Successfully Performed:**

3 each type of knot

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Knot Typing Demonstration task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student tying knots as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video. There must be a close-up view of each knot once it is completed.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

RVT, CVT, LVT  
DVM, VMD

**Dates (Square):** \_\_\_\_\_

**Dates (Bowline):** \_\_\_\_\_

**Dates (Clove Hitch):** \_\_\_\_\_

**Dates (Halter Tie):** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 11. PERFORM A PHYSICAL EXAMINATION IN THE FOOD ANIMAL PATIENT

**Goal:** To complete an accurate physical examination and record the information accurately in the patient's record.

**Description:** The student will perform a systematic physical examination of all major body systems on a food animal patient, and record this information on a Physical Examination sheet. As an alternative, the student may photocopy the recorded physical examination from the clinical record if allowed by the clinical mentorship supervisor. The clinical mentorship supervisor will verify the accuracy of the physical examination and observe the student performing the physical examination to verify the criteria of this task.

**Criteria:** The student observed the patient to assess attitude before approaching the patient to begin the physical examination.

The student examined each of the following items on the physical examination:

- Temperature, pulse, respiration
- Capillary refill time/Mucous membranes
- General appearance
- Body scoring
- Integumentary system
- Musculo-skeletal system
- Circulatory system
- Respiratory system
- Genito-urinary system
- Nervous system
- Ears

The student accurately recorded the findings of the physical examination including any abnormalities.

**Number of times Task Needs to be Successfully Performed:** 3

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Perform a Physical Exam in a Food Animal Patient task, signed by the clinical mentorship supervisor.
2. For each patient, either the original written record of the Physical Examination on the forms provided or a photocopy from the clinical record of the recorded Physical Examination signed by both the student and the clinical mentorship supervisor. Photocopy of the clinical record may only be done with permission of the veterinarian.
3. One video either with a client animal or a simulation in which the student performs and records a Physical Examination. The Physical Examination recorded must be one of the five Physical Examination forms submitted by the student so that the video observations can be correlated with the written comments. The video should clearly show the student performing each of the required components of the Physical Examination. The student must narrate all criteria clearly on the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_

RVT, CVT, LVT  
DVM, VMD

## PHYSICAL EXAMINATION SHEET

Patient's Name \_\_\_\_\_ Date of Examination \_\_\_\_\_

Species \_\_\_\_\_ Age \_\_\_\_\_

CONDITION \_\_\_\_\_ TEMPERAMENT \_\_\_\_\_ T \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ WEIGHT \_\_\_\_\_

1 GENERAL APPEARANCE ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
2 INTEGUMENTARY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
3 MUSCULOSKELETAL ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
4 CIRCULATORY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
5 RESPIRATORY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
6 DIGESTIVE ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*

8 NERVOUS SYSTEM	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
9 EARS	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
10 EYES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
11 LYMPH NODES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
12 TONSILS	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
13 MUCOUS MEMBRANES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>

\*(Explain below)

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Physical Examination conducted by: \_\_\_\_\_

Student's Name Printed

I attest that the student performed  
this physical examination

\_\_\_\_\_  
Clinical Mentorship Supervisor Signature

## PHYSICAL EXAMINATION SHEET

Patient's Name \_\_\_\_\_ Date of Examination \_\_\_\_\_

Species \_\_\_\_\_ Age \_\_\_\_\_

CONDITION \_\_\_\_\_ TEMPERAMENT \_\_\_\_\_ T \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ WEIGHT \_\_\_\_\_

1 GENERAL APPEARANCE ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
2 INTEGUMENTARY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
3 MUSCULOSKELETAL ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
4 CIRCULATORY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
5 RESPIRATORY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*
6 DIGESTIVE ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*

8 NERVOUS SYSTEM	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
9 EARS	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
10 EYES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
11 LYMPH NODES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
12 TONSILS	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
13 MUCOUS MEMBRANES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>

\*(Explain below)

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Physical Examination conducted by: \_\_\_\_\_

Student's Name Printed

I attest that the student performed this physical examination

\_\_\_\_\_  
Clinical Mentorship Supervisor Signature

PHYSICAL EXAMINATION SHEET

Patient's Name \_\_\_\_\_ Date of Examination \_\_\_\_\_

Species \_\_\_\_\_ Age \_\_\_\_\_

CONDITION \_\_\_\_\_ TEMPERAMENT \_\_\_\_\_ T \_\_\_\_\_ P \_\_\_\_\_ R \_\_\_\_\_ WEIGHT \_\_\_\_\_

1 GENERAL APPEARANCE ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*	8 NERVOUS SYSTEM	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
2 INTEGUMENTARY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*	9 EARS	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
3 MUSCULOSKELETAL ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*	10 EYES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
4 CIRCULATORY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*	11 LYMPH NODES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
5 RESPIRATORY ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*	12 TONSILS	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>
6 DIGESTIVE ABNORMAL*	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/> ABNORMAL*	13 MUCOUS MEMBRANES	<input type="checkbox"/> NOT EXAMINED	<input type="checkbox"/> NORMAL	<input type="checkbox"/>

\*(Explain below)

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Physical Examination conducted by: \_\_\_\_\_

Student's Name Printed

I attest that the student performed  
this physical examination

\_\_\_\_\_  
Clinical Mentorship Supervisor Signature

## 12. JUGULAR VENIPUNCTURE IN THE BOVINE PATIENT

**Goal:** To successfully collect a blood sample from a cow through jugular venipuncture

**Description:** The student will collect a blood sample from the jugular vein from a properly restrained bovine patient.

**Criteria:** The student made sure the patient was properly restrained.

The student correctly placed his/her finger in the jugular groove to act as a tourniquet.

The student palpated the area to determine the location of the jugular vein.

The student wiped the area with alcohol.

The student placed the needle in the skin with the bevel up and in the proper location.

The student's hand was in the proper position to hold the syringe and draw back on the plunger to obtain the sample.

The student acquired the necessary volume for the tests ordered.

The student released the digital tourniquet when the appropriate volume was achieved.

The student placed a digit over the puncture site.

The needle and syringe were removed from the patient and digital pressure was continued to prevent a hematoma.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Jugular Venipuncture in the Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student performing jugular venipuncture as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

### 13. COCCYGEAL VENIPUNCTURE IN THE BOVINE PATIENT

**Goal:** To successfully collect a blood sample from a cow through coccygeal venipuncture.

**Description:** The student will collect a blood sample from the coccygeal vessel of a cow.

**Criteria:** The student made sure the patient was properly restrained.

The student lifted the patient's tail so that the ventral portion of the tail is visible to the student.

The student palpated the area to determine the location of an intervertebral space along the midline portion of the ventral tail.

The student cleaned the area with alcohol and removed all debris.

The student placed the needle in the skin between the vertebrae into the proper location.

The student's hand was in the proper position to hold the syringe and draw back on the plunger to obtain the sample.

The student acquired the necessary volume for the tests ordered.

The needle and syringe were removed from the patient and digital pressure was continued to prevent a hematoma.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Coccygeal Venipuncture in the Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student performing coccygeal venipuncture as defined in the above criteria for this task. Clear verbalization of process should occur throughout the video.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_



## 14. INTRAMUSCULAR INJECTION IN THE FOOD ANIMAL PATIENT

**Goal:** Successfully administer medication by intramuscular injection into the correct site in the neck according to VCS 23700, such that the medication is correctly administered without injury to either the patient or veterinary personnel.

**Description:** The student will administer either a prescribed medication or saline placebo into the muscles of the gluteal area and the semimebranosus/semitendinosus area.

**Criteria:** The student made sure the patient was properly restrained.

The student selected the proper site for administration based on anatomical landmarks.

The student removed any debris from the injection site with alcohol or other appropriate antiseptic.

The student properly introduced the needle into the site of administration.

The student aspirated the syringe to check for blood prior to injection.

The student successfully administered the prescribed amount of medication.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Administration of Intramuscular Injection in the Food Animal Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student administering an intramuscular injection as defined in the above criteria for this task. The video should clearly show the student and the position of the needle/syringe. The student should verbally identify the landmarks for the administration site they have chosen on the patient.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 15. SUBCUTANEOUS INJECTION IN THE FOOD ANIMAL PATIENT

**Goal:** Successfully administer medication to a food animal patient by subcutaneous injection such that the medication is correctly administered without injury to either the patient or veterinary personnel.

**Description:** The student will administer either a prescribed medication or saline placebo by subcutaneous injection.

**Criteria:** The student made sure the patient was properly restrained.

The student selected the proper site for administration.

The student removed any debris from the injection site with alcohol or other appropriate antiseptic.

The student properly introduced the needle into the site of administration.

The student aspirated the syringe to check for blood or air prior to injection.

The student successfully administered the prescribed amount of medication.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification for Administration of Subcutaneous Injection in the Food Animal Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student administering a subcutaneous injection as defined in the above criteria for this task. The video should clearly show the student, the position of the needle/syringe, the aspiration of the syringe, and the administration site on the patient.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 16. INTRAVENOUS JUGULAR INJECTION IN THE FOOD ANIMAL PATIENT

- Goal:** Successfully administer medication by intravenous jugular injection such that the medication is correctly administered without injury to either the patient or veterinary personnel.
- Description:** The student will administer either a prescribed medication or saline placebo in the jugular vein.
- Criteria:**
- The student made the sure the patient was properly restrained.
  - The student selected the proper site for administration.
  - The student removed any debris from the injection site with alcohol or other appropriate antiseptic.
  - The student properly introduced the needle into the site of administration.
  - The student aspirated the syringe to check for blood prior to injection.
  - The student injected the drug without signs of extravasation.
  - The student or restrainer properly applied pressure to the puncture site to reduce bleeding.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for Administration of Intravenous Jugular Injection in the Food Animal Patient task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student administering an intravenous injection as defined in the above criteria for this task. The video should clearly show the student, the position of the needle/syringe, the introduction of the needle, the backflow of blood, the push of medication into the vein, and the area of vein after needle withdrawal showing no signs of extravasation. Clear verbalization of process should occur throughout the video sequence.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 17. ORAL LIQUID MEDICATION IN THE FOOD ANIMAL PATIENT

- Goal:** Successfully administer oral liquid medication to a food animal patient such that the medication is swallowed without injury to either the patient or veterinary personnel.
- Description:** The student will administer oral liquid medication to a food animal patient, restrained by stocks or chute, without causing the patient to choke, or harming the patient.
- Criteria:**
- The student made sure the patient was properly restrained.
  - The student measured and marked the stomach tube for depth of placement.
  - The student was able to open the mouth of the patient.
  - The student maintained control of the head or muzzle during the administration of the medication.
  - The student was able to insert the Frick (or equivalent) speculum and stomach tube or the drenching instrument of choice.
  - The student passed the stomach tube and verified the correct placement.
  - The medication was swallowed without choking when using a drenching instrument.
  - The student was able to control the patient in a manner that was adequate to administer the medication yet did no harm to the patient.
  - The student removed the stomach tube so that the liquid remaining in the tube was not aspirated by the patient.
  - The student removed the oral speculum that was used to facilitate the placement of the stomach tube.

**Number of Times Task Needs to be Successfully Performed:** 2 (1 stomach tube, 1 drenching)

**Materials Submitted for Evaluation and Verification:**

1. Task Verification for Administration of Liquid Medication in the Food Animal Task, signed by the clinical mentorship supervisor.
2. A video that clearly shows the student administering oral liquid medication as defined in the above criteria for this task. The video should clearly show the placement of the student's hands, the position of the patient, and the patient swallowing the tube or medication. Clear verbalization of process should occur throughout the video sequence.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** (Stomach Tube) \_\_\_\_\_

**Date:** (Drenching) \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 18. ORAL BOLUS MEDICATION IN THE FOOD ANIMAL PATIENT

**Goal:** Successfully administer a bolus orally to a food animal patient such that the medication is swallowed without injury to either the patient or veterinary personnel.

**Description:** The student will administer a bolus to a food animal patient, restrained by stocks or chute, without causing the patient to choke, or harming the patient.

**Criteria:** The student made sure the patient was properly restrained.

The student restrained the head of the patient.

The student was able to open the mouth of the patient.

The student maintained control of the head during the administration of the medication.

The student used the appropriate size balling gun for the patient's size.

The student inserted the balling gun in the patient's mouth and over the tongue.

The medication was swallowed without choking.

The student was able to control the patient in a manner that was adequate to administer the medication yet did no harm to the patient.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Administration of Bolus Medication in the Food Animal Patient task, signed by the clinical mentorship supervisor.
2. A video showing the student administering oral bolus medication to a patient as defined in the above criteria for this task. The video should clearly show the placement of the student's hands, the position of the patient, and the patient swallowing the bolus. Clear verbalization of process should occur throughout the videotaped sequence.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 19. URINE COLLECTION IN THE BOVINE PATIENT

**Goal:** Successfully collect a urine sample of quality and quantity that allows an accurate urinalysis.

**Description:** The student will collect urine from a bovine patient using a clean container.

**Criteria:** The student selected a clean container that was appropriate for the amount collected.

The student stimulated the patient to urinate.

The student collected the urine after the initial stream.

The student avoided contaminating the collected urine by contact with the animal's hair or any other source of contamination.

**Number of Times Task Needs to be Successfully Performed:** 1

**Materials Submitted for Evaluation and Verification:**

1. Task Verification form for Urine Collection in the Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video showing the student collecting urine. The video should clearly show the student collecting the urine, the urine in the container after collection, and documentation of the amount collected (e.g. drawing the urine into a large syringe). Clear verbalization of process should occur throughout the videotaped sequence.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_

## 20. PERFORM CALIFORNIA MASTITIS TEST (CMT) IN A FEMALE BOVINE PATIENT

- Goal:** Collect milk samples and accurately perform a California Mastitis Test.
- Description:** The student will collect milk samples from a female bovine patient and perform a California Mastitis Test.
- Criteria:** The student collected milk samples from each quarter in four clean CMT paddle cups labeled A, B, C, D.
- The student added an equal amount of CMT reagent to each cup in the paddle.
- The student rotated the CMT paddle in a circular motion for ten seconds, to thoroughly mix the contents.
- The student immediately read the test and classified results based on the presence or absence of thickening/gelling due to the presence or absence of DNA from white blood cells in the sample.
- The student announced verbally the test results.

**Number of Times Task Needs to be Successfully Performed:** 2

**Materials Submitted for Evaluation and Verification:**

1. Task Verification Form for California Mastitis Test (CMT) in a Female Bovine Patient task, signed by the clinical mentorship supervisor.
2. A video showing the student collecting milk samples and performing a CMT. The video should clearly show the CMT paddle during and after the test, and the student should state clearly the test results.

**Student Name:** \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ RVT, CVT, LVT  
DVM, VMD

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I verify that the student performed this task under my supervision.

**Signature of Clinical Mentorship Supervisor:** \_\_\_\_\_