ADVANCED CLINICAL EXPERIENCE CLINICAL MENTORSHIP

VM 22500

CRITERIA HANDBOOK AND LOGBOOK
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Clinical Mentorship Projects

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3. Case Reports
4. Problem-Solving
5. Client Education
6. Presentation to Co-Workers or Outside Group

NOTE THE FOLLOWING DUE DATES FOR THE TASKS ABOVE:

Fall or Spring semester 5:00 p.m. Thursday of week 12 – Tasks 1-6

Summer session 5:00 p.m. Thursday of week 9 – Tasks 1-6

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.
STUDENT INFORMATION

GOALS OF VM 22500 ADDITIONAL CLINICAL EXPERIENCE CLINICAL MENTORSHIP

Working with a veterinary care facility, the student will practice several 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 met the outlined Criteria for each task.

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 22500 ADDITIONAL CLINICAL EXPERIENCE 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. Clinical Mentorship Agreement
2. Clinical Mentorship Supervisor Agreement
3. Health Risk and Insurance Acknowledgement
4. Professional Liability Insurance Coverage
5. Agreement and Release of Liability
6. Technical Standards Acknowledgement

These forms are available on the VTDL website for downloading, printout, and completion, or by phone request from the VTDL office (765-496-6579).

If more than one Clinical Mentorship course is taken, a separate Facility Requirement Agreement, Clinical Mentorship Agreement, 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 31st.

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 develop the projects in this mentorship within a clinic where you have completed at least one other mentorship. All information should relate to this practice. No specific facility equipment or items are required.

SELECTION OF CLINICAL MENTORSHIP SUPERVISOR

The Clinical Mentorship Supervisor is the person who will sign your Logbook and assess your performance at the Clinical Mentorship site. This person must be a credentialed veterinary technician (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 a mentorship supervisor.

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

The Clinical Mentorship Supervisor must complete the Clinical Mentorship Supervisor Agreement. You must return this agreement with the other agreements prior to beginning your Clinical Mentorship.

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 VTDLP office. These forms are available on the VTDLP website for downloading and printing.
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 prerequisites 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.

**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

The clinical Mentorships are designed to follow the semester format of Purdue University. Due to the amount of time required to evaluate materials, a grade of Incomplete will initially be recorded at the end of each semester. When evaluation is complete and all tasks have been completed successfully, a grade change will be submitted to the University. You may complete the Clinical Mentorship and submit materials any time prior to the end of the semester.

If you are unable to complete the Clinical Mentorship by the deadline, you must contact Pam Phegley, BS, RVT (phegleyp@purdue.edu, 765-496-6809) to request an “Incomplete grade” for the semester. The Clinical Mentorship will be treated by the University as it would any other Incomplete graded course. See the VTDL Student Handbook for specific information on Incompletes. Failure to contact Pam Phegley before the due date and/or submit materials will result in a grade of “F” being recorded for the course.

When you have completed all of the tasks and the documentation, send the complete compilation of materials to:

Vet Tech Distance Learning
Clinical Mentorship Evaluation
Purdue University
625 Harrison Street, Lynn Hall G171
West Lafayette IN 47907

You will be contacted by email and regular mail after materials have been reviewed. The Purdue University instructor in charge has the option to require additional documentation if, in their judgment, the student has not performed or documented the task to the level set by the criteria.

If additional documentation is deemed required by the course instructor or the Clinical Mentorship Coordinator, the student will be contacted and the additional required documentation explained. A deadline will be given for materials to be resubmitted. Grade penalties will be assigned if resubmissions are not received by the deadline.

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 the documentation, a grade for the course 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 you need to document the task. Pay particularly close attention to the details of what needs to be documented.

3. Make sure you obtain appropriate permissions where necessary. Please keep the facility's owner/manager aware of your activities. A continued good relationship with the veterinarian in charge is key to having a positive Clinical Mentorship experience.

4. Label documentation so it is easy to find all components of the materials you submit for evaluation and validation at Purdue.

5. Once everything is completed, package all the paper, video, photographic or other required documentation and send it to the VTDLP at the address provided in the Completion of Clinical Mentorship section above.
1. CLINIC INFORMATION

Goal: To examine closely and critique the facility, staff and operations of the mentorship site.

Description: The student will provide a floor plan diagram of the clinic, answer questions regarding the clinic, and critique aspects of clinic operations.

Criteria: The student provided a floor plan diagram of the mentorship site that includes the function of each room or area, entrances and exits for the building, and traffic patterns. This may be a sketch done by hand, or by another method.

The student answered the following questions regarding the clinic:

1. How many veterinarians are employed at the clinic?
2. How many credentialed technicians are employed at the clinic?
3. How many other staff are employed? Specify veterinary assistants, animal caretakers, receptionists, practice managers, etc.
4. Approximately how many cases are seen per day/week in the clinic?
5. What type cases are seen in the clinic? (large animal, small animal, exotic, emergency, referral, etc.)
6. How does the clinic utilize its technical and lay staff? How are duties assigned? What specific duties are designated to credentialed technicians?
7. Does the clinic hold regular staff meetings? Who runs these meetings? How often are they held? What issues are discussed?

The student wrote a paper using the answers to the questions above, critiquing the clinic. This included aspects that work well, as well as those that might be improved. The student provided specific suggestions for those aspects that might be improved, including their role in the changes and the impact the changes might have on the overall operation of the clinic. The paper was typed, and checked for grammar and spelling.

Materials Submitted for Evaluation and Verification:

1. Floor plan diagram of the clinic including the function of each room, entrances and exits, and traffic pattern.

2. Written answers to questions specified in the criteria. These should be clearly written, accurate and detailed.

3. Written paper critiquing the clinic, using the answers to the questions above. The paper should be clearly written and include the information specified in the criteria for the task.
2. CASE LOG

Goal: To document the student’s involvement in cases presented to their hospital.

Description: The student will log at least 120 hours worked in the mentorship site documenting all cases presented to the hospital with which they have been involved.

Criteria: The student logged at least 120 hours worked in the mentorship site documenting all cases presented to the hospital with which they were involved. This log included:

- Date
- Hours worked on that date
- Cases seen, including signalment and presenting problem
- Procedures performed for each patient
- Student’s responsibilities and duties with each case

Materials Submitted for Evaluation and Verification:

1. Task Verification form for Case Log task, signed by the clinical mentorship supervisor.

2. A written log that documents the student’s involvement in cases presented to the mentorship site. The log must be clearly written or typed, and detail the student’s responsibilities with each case.

Student Name: __________________________________________________________

Supervisor Name: ________________________________________________________  RVT, CVT, LVT  DVM, VMD

I verify that the student worked the hours recorded in the Case Log.

Signature of Clinical Mentorship Supervisor: ____________________________________
3. CASE REPORTS

Goal: To accurately complete case reports on non-routine cases presented to the clinic, including the role of the technician and nursing care provided.

Description: The student will choose five non-routine cases presented to the clinic. Written case reports will be submitted for each case. The student will choose cases in which they were involved and provided care for while in the hospital.

Criteria: The student chose five non-routine cases presented to the clinic. Detailed, written case reports were submitted for each case, to include:

- Signalment
- Presenting complaint
- History
- Clinical signs
- Physical exam findings
- Diagnostic tests and results
- Diagnosis (by DVM)
- Therapy and/or treatment
- Outcome
- Role of the veterinary technician in the case, detailing nursing care, diagnostics, assistance with procedures and treatments, etc.

Materials Submitted for Evaluation and Verification:

1. Task Verification form for Case Reports task, signed by the Clinical Mentorship Supervisor.

2. Five written reports that document non-routine cases and the student’s involvement in them. The reports must be clearly written or typed, and detail the required criteria. Information should be accurate and concise, and utilize proper medical terminology.

3. A photograph of each of the five patients discussed in the case reports, while in the hospital.

Student Name: __________________________________________________________

Supervisor Name: ________________________________________________________ RVT, CVT, LVT DVM, VMD

Patient Name: ___________________________ Date: ____________________________

Patient Name: ___________________________ Date: ____________________________

Patient Name: ___________________________ Date: ____________________________

Patient Name: ___________________________ Date: ____________________________

Patient Name: ___________________________ Date: ____________________________

I verify that the student worked with and provided care for the listed patients under my supervision

Signature of Clinical Mentorship Supervisor: _________________________________
4. PROBLEM SOLVING

Goal: To examine the overall mentorship site critically and evaluate areas that might be improved, updated or made more efficient.

Description: The student will choose two areas in the clinic that might be improved, and detail the issues and how they might be improved. These areas may include but are not limited to biohazard safety, radiographic safety, clinic standard operating procedures (SOPs), inventory procedures, staff conflict, or controlled drug handling and storage.

Criteria: The student defined two areas in the clinic that might be improved, and wrote papers detailing:

- How each issue decreases efficiency
- How each issue affects the operation of the clinic
- Specific suggestions for improvement, including new forms or protocol sheets as applicable
- Barriers (both physical and psychological) to the potential success of the changes
- Costs (if any) to implement the changes

Materials Submitted for Evaluation and Verification:

1. Two written papers that each define an area for improvement in the clinic. The papers must be clearly written, and detail the required criteria. Information should be accurate and complete, and suggestions for improvement specific and meaningful. The papers will be typed and checked for grammar and spelling.

2. If applicable, photographs of the area(s) that are discussed, or paperwork/forms that are utilized currently or that the student has developed for this task.
5. CLIENT EDUCATION

Goal: To develop client education materials suitable for distribution to clients in a hospital setting.

Description: The student will develop educational materials for clients including a brochure for waiting room display and a discharge instruction sheet. The materials will be professional-appearing and appropriate for use in a veterinary hospital. The student will utilize references appropriate for the topic and cite them. This will be a different project from any done for other classes.

Criteria: The student chose a clinical condition or disease for which client education is a challenge, and develop a brochure for a waiting room display and a discharge instruction sheet. The student followed these guidelines.

Brochures: the student developed a brochure suitable for a waiting room display. It was printed in color or on colored paper, written clearly for the intended audience, professional-appearing, and on one sheet of paper. It was tri-folded to simulate a brochure or on a flat sheet as a flyer. The purpose of the brochure was to enhance client awareness of the condition. The student cited major sources used if they quoted, used major amounts of information, or used information unique to that source.

Discharge Instruction Sheet: The student developed a written sheet of discharge instructions for a patient with the condition discussed in this task. There were spaces for diagnosis, treatment, medications, recheck appointments, etc. as well as specific instructions for the patient. Key points regarding the disease were included. Language was understandable to the general public rather than using medical jargon or terms.

References: The student utilized at least one resource from each of the following:

- Journal article
- Book or manual
- Internet source
- Graduate veterinarian or credentialed technician interview

References may be listed informally, but included the following:
- Book: Title, Author, date published, edition, page numbers
- Article: Journal title, article title, author, date published
- Internet source: Web address, title
- DVM or RVT: Name, title, date interviewed

Grading criteria for written materials include professional appearance, correct grammar and spelling, accurate information on the disease/condition, use of medical terminology (i.e., not using medical jargon that a client will not understand), clarity for the client, and organization.

Materials Submitted for Evaluation and Verification:

1. Client education brochure and discharge instruction sheet. The materials should be professional in appearance, and detail the required criteria. Information should be accurate and complete, and appropriate for clients.
6. PRESENTATION TO CO-WORKERS OR OUTSIDE GROUP

Goal: To prepare and present an educational seminar for a group of co-workers in the clinic, or outside group.

Description: The student will prepare and present an educational seminar for a group of co-workers in the clinic or an outside group. The student will utilize some form of visual aid and, if appropriate, hands-on teaching or give written materials.

Criteria: The student prepared and presented an educational seminar for a group of co-workers in the clinic or an outside group. Examples of appropriate seminars include but are not limited to, a continuing education topic for employees, an in-service presentation on a new piece of equipment, a career planning presentation, or a demonstration or talk on pet care.

The student utilized some form of visual aid such as Powerpoint, slides, overhead projector, poster, etc. If appropriate, the student used hands-on teaching or gave written materials.

The presentation lasted 12-15 minutes with 3-5 minutes of questions and answers following.

The student considered the following grading criteria:
- Information given
- Use of medical terminology (i.e., appropriate for audience)
- Verbal communication skills
- Non-verbal communication skills
- Organization
- Clarity for the audience
- Use of visual aids and educational tools
- Overall impression of the presentation

The student completed the self-evaluation form on the following page

Materials Submitted for Evaluation and Verification:

1. Video of the presentation by the student. The video must show the entire presentation clearly, and the audio must be clearly understood. Visual aids and other auxiliary learning tools should be clearly shown on the video.

2. If applicable, copies of handouts or other visual aids that were distributed to the group.

3. Written self-evaluation of presentation.
Self-Evaluation Form for Presentation

Student Name: __________________________________________________________

Supervisor Name: ________________________________________________________  RVT, CVT, LVT  DVM, VMD

Date of presentation: __________ Location: ___________________________________

Title of presentation: ______________________________________________________

Audience: _______________________________________________________________________

Number of people in audience: __________

Rate yourself on the following aspects of your presentation:

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<th>Avg.</th>
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Additional student comments: