

SMALL ANIMAL NURSING MENTORSHIP I



VM 20500

CRITERIA HANDBOOK AND LOGBOOK

INDEX OF NOTEBOOK

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Clinical Mentorship Tasks

- 1. Video verification of required equipment and supplies
- 2. Remove dog from cage and restrain in sternal recumbency for cephalic venipuncture, then encage*
- 3. Restrain a dog in lateral recumbency for saphenous venipuncture*
- 4. Restrain a dog for jugular venipuncture*
- 5. Restrain a dog for eye and ear medication*
- 6. Restrain a dog for IM injection or nail trim*
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- 13. Restrain a cat in lateral recumbency*
- 14. Restrain a cat using a towel and apply a cat muzzle*
- 15. Perform a physical examination (cat)*
- 16. Application of Elizabethan collar
- 17. Administer oral tablet or capsule (dog and cat) *
- 18. Administer oral liquid (dog or cat)*
- 19. Administer eye drops and ointment*
- 20. Administer ear medication (dog and cat)*
- 21. Administer subcutaneous injection (dog and cat)**
- 22. Administer intramuscular injection (dog and cat)**
- 23. Perform cephalic venipuncture sample collection in a dog**
- 24. Perform cephalic venipuncture sample collection in a cat**
- 25. Administer intravenous cephalic injection to a dog**
- 26. Administer intravenous injection to a cat**
- 27. Trim toe nails (dog and cat)*
- 28. Clean ears (dog and cat) **
- 29. Express anal sacs**
- 30. Bathe a dog or cat*
- 31. Collect free catch urine sample*
- 32. Obtain a history
- 33. Recording patient treatments and data in a hospital record

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 11:59 p.m. ET Thursday of week 1 – Task 1

11:59 p.m. ET Thursday of week 3 - Tasks 2-10

11:59 p.m. ET Thursday of week 6 - Tasks 11-16

11:59 p.m. ET Thursday of week 9 - Tasks 17-24

11:59 p.m. ET Thursday of week 12 - Tasks 25-33

Summer session 11:59 p.m. ET Thursday of week 1 – Task 1

11:59 p.m. ET Thursday of week 2 - Tasks 2-10

11:59 p.m. ET Thursday of week 4 - Tasks 11-16

11:59 p.m. ET Thursday of week 6 - Tasks 17-24

11:59 p.m. ET Thursday of week 8 - Tasks 25-33

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. All animals used for demonstration of mentorship skills must be appropriately restrained by another person, for the safety of the patient and the student.
- 2. A mentorship task may be performed only once on a single animal.
- 3. 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.
- 4. 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.
- 5. 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.
- 6. 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 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 validating the educational process and insuring that the performance of graduates of the Veterinary Nursing 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 Nursing Program 625 Harrison Street, Lynn Hall G171 West Lafayette IN 47907 (765) 496-6809 phegleyp@purdue.edu

PRE-REQUISITES FOR CLINICAL MENTORSHIP

Contracts and Agreements

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

- 1. Clinical Mentorship and Facility Requirement Agreement
- 2. Supervisor Agreement
- 3. Release of Liability, Health Risk and Insurance, Technical Standards and Mentorship Code of Conduct
- 4. Professional Liability Insurance Coverage

These documents are available on the VNDL website.

If more than one Clinical Mentorship course is taken, separate Clinical Mentorship and Facility Requirement 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 submit the listed documents and/or non-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 VNDL student is required to purchase, for a nominal fee, Professional Liability Insurance through Purdue University. 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.

WHAT TO LOOK FOR IN A MENTORSHIP FACILITY

When evaluating a facility for clinical mentorships, the student should thoroughly research the site. It is strongly suggested to visit the site if not currently working there. This experience is a chance to begin to apply the wealth of knowledge and skills acquired and developed to this point in the veterinary nursing education. The following are points of discussion or questions to consider when evaluating the site (RVT includes any credentialed veterinary technician):

- Does the site currently have credentialed veterinary technicians/nurses on staff?
- Are there any boarded DVM specialists or VTS RVTs on staff?
- What is the role of the technician/nurse versus other members of the staff (such as veterinary assistants)?
- What is the overall size of the staff (professional and paraprofessional staff)?
- Is the site an accredited practice or facility (AAHA, ALAC, etc.)?
- Has the site hosted a VNDL student in the past?
- Does the staff seem receptive to hosting a student?
- Is the site located in a safe and easily accessible location? Are there geographical considerations?
- Is this also an employment opportunity?
- Ask the supervisor:
 - O What are their specific goals for the student?
 - o Have they ever been a supervisor before for a veterinary technician/nursing student?
 - O Who else at the site may be involved in supervision?
 - Do they have any concerns for the legal allowances in which the student may perform certain tasks?

It is strongly recommended that the student show potential mentorship supervisor(s) examples of mentorship logbooks, so they are aware of what the student will need to accomplish in this facility. The discussion should include that most tasks will require videos of the student performing skills, and how this will be accomplished. A student may have multiple supervisors (either DVM or credentialed technician), and one must be present any time the student is performing skills for a clinical mentorship. Supervisors sign Task Verification forms which state that they observed the student as they performed each task. Mentorship supervisors act as coaches and must be present to ensure the safety of the patient and personnel. They are not involved in evaluation of skills; this is done by Purdue instructors.

SELECTING THE CLINICAL MENTORSHIP SITE – FACILITY REQUIREMENTS

The student must visit the Clinical Mentorship Site and determine if the following supplies and equipment are readily available for use during the Clinical Mentorship. The student must complete and have the facility veterinarian sign the Clinical Mentorship Site Facility Requirements Agreement.

The veterinary care facility must be equipped with the following equipment:

- Stethoscope
- Rectal thermometer
- Nylon or leather dog muzzles
- Cat muzzles
- Nail trimmers / hemostatic agent
- Canine restraint/catch pole
- Diff-Quik stain set
- Elizabethan collars

In addition, the following disposable items must be available:

- Cloth towels
- Examination gloves
- 3cc syringes and needles
- 4x4 or 2x2 gauze sponges
- Eye drop medication
- KY Jelly or similar lubricant
- Eye ointment medication
- Shampoo
- Sterile saline or LRS for parenteral administration
- Hair brushes
- Cotton-tipped applicators
- Microscope slides
- Cotton balls
- Mineral oil
- Oral tablet and liquid medication
- Ear cleaning solution +/- medication

SELECTION OF CLINICAL MENTORSHIP SUPERVISOR

The Clinical Mentorship Supervisor is the person who will sign Task Verification forms that 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 and Mentorship Code of Conduct*. The student must return these agreements with the other agreements prior to beginning the Clinical Mentorship. Multiple supervisors may be used for documentation of mentorship tasks. Each supervisor must complete a separate agreement.

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

Multiple Clinical Mentorship Supervisors may be utilized so one person does not have to be present for all task performances. Each supervisor must submit a *Clinical Mentorship Supervisor Agreement*.

ALL TASKS PERFORMED FOR A MENTORSHIP MUST BE OBSERVED IN PERSON BY A SUPERVISOR FOR WHOM DOCUMENTATION HAS BEEN SUBMITTED

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. The student is 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 performing the task to minimize required resubmissions. The components of each task are summarized:

Goal – Describes the ultimate outcome of the task the student will perform.

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

Criteria – Lists specific, observable, objective behaviors the student must demonstrate for each task. The 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. The student may not use the same animal to do all of the repetitions of a task. However, the same animal may be used to perform <u>different</u> tasks. In other words, one can't do three ear cleanings on the same animal, however, one may 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 the student 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 the student was able to perform the task to the standard required.

Pre-planning the videos will help reduce the need to resubmit tasks. The student should narrate the video as they work, explaining what they are doing and why. This helps the evaluator follow the thought process and clarify what is see on the video. The student's face must be shown at some point in every video to verify their identity. The name and/or number of the task should be either stated at the beginning of the video or embedded (written) into the video itself.

Videos, photographs, radiographs, slides, written projects, the Criteria Handbook and Logbook and any other required documentation <u>will not be returned</u>. 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 VNDL meet AVMA accreditation criteria. Therefore, it is essential that the student follows the evaluation and validation requirements.

Task Verification Forms – Each task has a form that must be completed and signed by the Clinical Mentorship Supervisor. A supervisor must observe every performance of a skill for a clinical mentorship.

Supplementary Materials – Logs, written materials, photographs, or other forms/documentation may be required for specific tasks. The "Materials to be Submitted for Evaluation" section outlines what is required to submit for each task.

COMPLETION OF THE CLINICAL MENTORSHIP

Mentorship logbooks include due dates for sets of tasks. Each set must be submitted by the deadline listed in the logbook. Late submissions <u>will</u> incur a grade penalty. Incomplete grades will not be assigned for mentorships at the end of each semester.

Feedback will be emailed to the student following review of each set of submitted tasks. 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.

Note: A student who is dismissed from their mentorship facility may fail the course and may be dismissed from the program.

<u>Task Verification forms</u> and other written materials should be submitted in *Assignments* in Brightspace. Task Verification forms are due by the task due date in order for each task to be complete. You must assign the forms and any other supplemental paperwork required for the tasks, to the correct course assignment in order for the instructor to view them.

<u>Videos</u> should be submitted in *Assignments* in Brightspace. This method of online submission does not limit how much you put on, is no cost to you, and automatically archives. You must assign the videos to the correct course assignment in order for the instructor to view them.

Using Kaltura for Video Assignments

Kaltura is a secure streaming service that Purdue offers for faculty, staff, and students. Videos uploaded to an assignment via Kaltura will only be accessible to instructor(s) within the course.

Step 1: Set Video Type on Your Device

Confirm your device is recording in a format accepted by Kaltura; common formats include:

- .MOV/.MP4/.M4V .WMV
- · .AVI
- .WEBM

Kaltura cannot accept the HEVC video format.

iPhone/iPad:

- Click on Settings->Camera->Formats
- Change the format to Most Compatible.

Android:

• In your camera application's settings, change the video recording format to MOV, M4V, or MP4.

Desktop/Laptop:

• Depending on your recording application, you will need to save your video recording as a common video format (such as .mp4, .mov, or .m4v).

Step 2: Allow your Browser to use Pop-Up Windows

Confirm your browser has pop-ups enabled. Kaltura will pop open a window for you to upload your video. Use the *Help* feature in your preferred browser if you need assistance in enabling pop-up windows.

If you do not allow pop-up windows on your browser, you will not be able to upload videos.

Step 3: Ensure You Have a Stable High-Speed Internet Connection

Confirm you have a **stable** internet connection; if you are on a connection that can disconnect on a regular basis your upload may be cancelled. Additionally, you will need to have a **high-speed** connection. Videos may have large file sizes, and a slow connection may result in your video taking a very long time to upload. If you need a stable and fast internet connection but do not have one at home, consider using public wifi at a library or coffee shop.

Step 4: Uploading Your Task Verification Form (TVF)

You must upload your TVF at the same time that you upload your video.

- Open the assignment in Brightspace
- Click on the "Add a File" button. A dialogue box will open allowing you to select the TVF file to upload from your device.

Step 5: Uploading Your Video

Once you have uploaded your TVF, you can upload your video. Scroll down on the page to the Comments area.

- Click on the Insert Stuff icon on the text editor.
- On the Insert Stuff menu that opens, click on Add Kaltura Media.
- On the Insert Stuff window, click the plus button. On the menu that opens, click Media Upload.
- The **Upload Media** window will open. *Click* on **Choose a file to upload** to select a file on your computer, or *click* and drag the video file into the box.
- Depending on your internet connection speed and the file size, it may take a few minutes to upload the file. Allow
 the file to upload completely and do not close the window.

You may alter the name of the file and add a description.

Once the file is uploaded and any name or description changes have been made, click

Save and Embed to save the video to Kaltura.

- If your video has processed, you may see a preview. Otherwise, you may see an animation that your video is still processing. Even if the video is still processing, you can still submit the video. *Click* **Insert** to add the video to the assignment or discussion
- Your video will be added to the text box. Click Submit to turn in your assignment.
- You may confirm your submission by clicking on the link to the assignment or discussion and seeing if you can view the video.

For Support

Contact the PVM Instructional Design team at pvmit@purdue.edu for assistance.

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 for each task.
- 2. Make sure that all equipment and supplies needed to complete the task are available. Pay particular attention to the details of what needs to be documented and submitted.
- 3. Make sure to obtain appropriate permissions where necessary. Please inform the facility's owner/manager of 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 submitted for evaluation and validation at Purdue are identified as the student's submission.
- 5. Label all videos posted to Brightspace with the task number.
- 6. Submit materials 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. Written projects should be typed, and checked for correct grammar and spelling. Photos should be embedded into the related written documents.

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/points that need to be addressed and included in the written document.
- 4. If video 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.

<u>Note</u>: 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. VIDEO VERIFICATION OF REQUIRED EQUIPMENT AND SUPPLIES

| Goal: | Ensure that the student will have access to all equipment and supplies necessary to complete the skills in this course. | | | | | | |
|-------------------|---|---------------------------|--|--|--|--|--|
| Description: | The student will provide a narrated video showing equipment and supplies specific to this mentorship, to verify that required items are available to them and adequate for completion of tasks in their facility. | | | | | | |
| Criteria: | The student introduced the video and showed their face clearly The student walked through the facility and showed the following clearly: • Leather or nylon dog muzzles • Cat muzzles • Canine catch/restraint pole • Elizabethan collar | | | | | | |
| Number of Tim | nes Task Needs to be Successfully Performed: 1 | | | | | | |
| Materials Subr | mitted for Evaluation and Verification: | | | | | | |
| | Task Verification Form for Video Verification of Required Equipment signed by the Clinical Mentorship supervisor. | and Supplies, | | | | | |
| | One video showing the student as they introduced themselves and w the facility, showing the listed items clearly. The student narrated the they showed items. | | | | | | |
| Student Name: | ŧ | | | | | | |
| Supervisor Na | me: | RVT, CVT, LVT DVM, VMD | | | | | |
| I verify that the | student will have access to the items shown, for tasks in this course. | | | | | | |
| Signature of C | dinical Mentorship Supervisor | | | | | | |

2. REMOVE DOG FROM CAGE AND RESTRAIN IN STERNAL RECUMBENCY FOR CEPHALIC VENIPUNCTURE, THEN ENCAGE

Goal:

Appropriately remove a dog from its cage and adequately restrain it in sternal recumbency so that cephalic venipuncture may be successfully performed without injury to either the patient or veterinary personnel, then return it to its cage.

Description:

The student will remove a dog from its cage appropriately, close the cage, position the dog in sternal recumbency, restrain while a veterinarian or credentialed veterinary technician withdraws blood from the cephalic vein, and return the dog to its cage appropriately.

Criteria:

The student opened the cage door quietly so as not to startle the animal, and removed the animal from the cage, maintaining control of the animal and preventing injury to the animal or personnel

The student closed the cage door

The student properly positioned the dog in sternal recumbency

The student was able to restrain the animal if it struggled

The student properly positioned their hand and arm around neck and head to control the head and prevent personnel from being bitten or injured

The student properly positioned their hand, arm, and body to keep the body of the animal properly immobilized to prevent personnel from being injured

The student was able to apply a tourniquet or compress the vein in order to raise the vein so that the venipuncture could be done successfully.

The student released the tourniquet or removed the compression on the vein to prevent excessive bleeding after completion of the venipuncture.

The student applied pressure to the venipuncture site to prevent bleeding from the site.

The student was able to restrain the animal in a manner that was adequate for control yet of no harm to the animal

The student placed the animal into the cage and closed the door quietly and without the patient escaping

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

 Task Verification Form for Remove Dog from Cage and Restrain in Sternal Recumbency for Cephalic Venipuncture, Then Encage skill, signed by the Clinical Mentorship supervisor.

2. REMOVE DOG FROM CAGE AND RESTRAIN IN STERNAL RECUMBENCY FOR CEPHALIC VENIPUNCTURE, THEN ENCAGE (2)

2. One video showing the student moving a dog out of a cage, and restraining as described while a veterinarian or credentialed veterinary technician withdraws a blood sample from the cephalic vein. The video should clearly show the placement of the student's hands, the position of the animal, the compression of the vein or placement of the tourniquet, the release of the tourniquet or compression of the vein, and the application of pressure to the venipuncture site. Return of the dog to its cage should also be shown.

| Student Name: | | |
|---|-------------|---------------------------|
| Supervisor Name: | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | Date: | |
| I verify that the student performed these tasks under my su | upervision. | |
| Signature of Clinical Mentorship Supervisor: | | |

3. RESTRAIN A DOG IN LATERAL RECUMBENCY FOR SAPHENOUS VENIPUNCTURE

Adequately restrain a dog in lateral recumbency so that that saphenous venipuncture

may be successfully performed without injury to either the patient or veterinary personnel. **Description:** The student will restrain a dog in lateral recumbency while a veterinarian or credentialed veterinary technician withdraws blood from the lateral saphenous vein Criteria: The student properly positioned the dog in lateral recumbency. The student was able to restrain the animal if it struggled. The student properly positioned their hand and arm on the neck and head to control the head and prevent personnel from being bitten or injured. The student properly positioned their hands, arms, and body to keep the legs and body of the animal properly immobilized to prevent personnel from being injured. The student was able to apply a tourniquet or compress the vein in order to raise the vein so that the venipuncture could be done successfully. The student released the tourniquet or removed the compression on the vein to prevent excessive bleeding after completion of the venipuncture. The student applied pressure to the venipuncture site to prevent bleeding from the site. The student was able to restrain the animal in a manner that was adequate for control yet of no harm to the animal. Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

Goal:

- 1. Task Verification Form for Restrain a Dog in Lateral Recumbency for Saphenous Venipuncture skill, signed by the Clinical Mentorship supervisor.
- 2. One video showing the student restraining an animal as described while a veterinarian or credentialed veterinary technician withdraws a blood sample from the lateral saphenous vein. The video should clearly show the placement of the student's hands, the position of the animal, the compression of the vein or placement of the tourniquet, the release of the tourniquet or compression of the vein, and the application of pressure to the venipuncture site.

| Student Name: | | |
|---|----------------------------|--|
| Supervisor Name: | RVT, CVT, LVT DVM, VMD | |
| Patient Name: | Date: | |
| I verify that the student performed these t | asks under my supervision. | |
| Signature of Clinical Mentorship Super | rvisor: | |

4. RESTRAIN A DOG FOR JUGULAR VENIPUNCTURE

| Goal: | Adequately restrain a dog so that jugular venipuncture may be successfully performed without injury to either the patient or veterinary personnel. | | | | | |
|-------------------|---|---|---------------------------|--|--|--|
| Description: | The student will restrain a dog while a veterinarian or credentialed veterinary technician withdraws blood from the jugular vein. | | | | | |
| Criteria: | Th | e student was able to restrain the animal when it struggled. | | | | |
| | Th | e student applied pressure to the venipuncture site to prevent b | leeding from the site. | | | |
| | | e student was able to restrain the animal in a manner that was a no harm to the animal. | adequate for control yet | | | |
| Number of Tin | nes | Task Needs to be Successfully Performed: 2 | | | | |
| Materials Subi | nitt | ed for Evaluation and Verification: | | | | |
| | Task Verification Form for Jugular Venipuncture Restraint skill, signed by the Clinical Mentorship supervisor. | | | | | |
| | One video showing a student restraining an animal as described while a veterinarian or credentialed veterinary technician withdraws a blood sample from the jugular vein. The video should clearly show the placement of the student's hands, the position of the animal, and the application of pressure to the venipuncture site. | | | | | |
| Student Name | : | | | | | |
| Supervisor Na | me: | : | RVT, CVT, LVT DVM, VMD | | | |
| Patient Name: | | Date: | | | | |
| Patient Name: | | Date: | | | | |
| I verify that the | stud | dent performed these tasks under my supervision. | | | | |

5. RESTRAIN A DOG FOR EYE AND EAR MEDICATION

| | | Date: dent performed these tasks under my supervision. | eye/ear | | | | | | |
|---------------|--|--|---------------------------|--|--|--|--|--|--|
| | | Date: | · | | | | | | |
| Supervisor Na | ıme | | RVT, CVT, LVT DVM, VMD | | | | | | |
| Student Name | : | | | | | | | | |
| | | hands, the position of the animal, and the position of the medication | applicator. | | | | | | |
| | 3. | One video showing the student properly restraining the animal while is being administered. The video should clearly show the placemen | t of the student's | | | | | | |
| | One video showing the student properly restraining the animal while eye medication is being administered. The video should clearly show the placement of student's hands, the position of the animal, and the position of the medication applicator. | | | | | | | | |
| | 1. | Task Verification Form for Eye and Ear Medication Administration F signed by the Clinical Mentorship supervisor | Restraint skill, | | | | | | |
| Materials Sub | mitt | ed for Evaluation and Verification: | | | | | | | |
| Number of Tin | nes | Task Needs to be Successfully Performed: 1 eye, 1 ear | | | | | | | |
| | | e student was able to restrain the animal in a manner that was adeque no harm to the animal. | uate for control yet | | | | | | |
| | | e student kept the nose tipped up and the head adequately controlled edication was successfully administered. | d so that the | | | | | | |
| Criteria: | The student was able to restrain the animal when it struggled such that the medication was successfully administered and the applicator tip <u>did not touch</u> the cornea of the eye (for eye medication) or the ear (for ear medication). | | | | | | | | |
| Description: | ve | The student will restrain a dog in sternal recumbency or a sitting position while a veterinarian or credentialed veterinary technician administers medication to the eye or ear. | | | | | | | |
| Goal: | | Adequately restrain a dog so that medication may be successfully placed in the eye or ear without injury to either the patient or veterinary personnel. | | | | | | | |

6. RESTRAIN A DOG FOR IM INJECTION OR NAIL TRIM

| 0. | ΝL | STRAIN A DOG FOR IIVI IIN | JECHON | OK NAIL I | KIIVI | | | |
|----------------|---|--|------------------------------|--|---------------------------------------|--|--|--|
| Goal: | | Adequately restrain a dog so that an IM injection can be administered or a nail trim performed without injury to either the patient or veterinary personnel. | | | | | | |
| Description: | | The student will restrain a dog while a veterinarian or credentialed veterinary technician administers an IM injection or trims the toe nails. | | | | | | |
| Criteria: | | The student was able to restrain the animal when it struggled such that personnel were able to carry out the IM injection or nail trim procedure without being bitten. | | | | | | |
| | | e student was able to restrain the anima no harm to the animal. | l in a manner | that was adequ | ate for control yet | | | |
| Number of Tim | nes | Task Needs to be Successfully Perform | rmed: | 1 IM injection, | 1 nail trim | | | |
| Materials Subr | nitt | ed for Evaluation and Verification: | | | | | | |
| | Task Verification Form for IM Administration/Nail Trim Restraint skill, signed by the Clinical Mentorship supervisor. | | | | | | | |
| | 2. | One video showing the student proper being administered or a nail trim is being the placement of the student's hands, a either the administration of the IM injection. | ng performed arms and boo | . The video shou ly, the position o | ıld clearly show f the animal, and | | | |
| Student Name | : | | | | | | | |
| Supervisor Na | me | · | | | RVT, CVT, LVT DVM, VMD | | | |
| Patient Name: | | | Date: | | IM / nail trim | | | |
| Patient Name: | | | Date: | | IM / nail trim | | | |

Signature of Clinical Mentorship Supervisor:

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

7. APPLY A GAUZE MUZZLE TO A DOG

Goal:

Description:

Adequately apply a gauze muzzle to a dog so that a medical or diagnostic procedure may be performed without injury to either the patient or veterinary personnel.

| Description: | The student will select a piece of non-stretch gauze, form a loop with it, and apply it to a dog prior to restraining the animal for a procedure. | | | | | | |
|-------------------|---|-------------------------------|-----------------------------|--|--|--|--|
| Criteria: | The gauze is of appropriate length to wrap around the muzzle, tie beneath the dog's muzzle, and still have sufficient length to tie in a bow behind the head. | | | | | | |
| | The student formed a loop in the gauze and the dog could not open its mouth. | placed it over the dog's m | uzzle, tightening so | | | | |
| | The student tied or crossed the gauze under | the muzzle. | | | | | |
| | The student tied the gauze in a bow behind t | he dog's head. | | | | | |
| | Gauze muzzle was placed appropriately on t sufficiently to allow biting. | he dog so that the mouth | would not open | | | | |
| | The muzzle was applied in such a way that the | he animal experienced mi | nimal discomfort. | | | | |
| Number of Tin | nes Task Needs to be Successfully Perform | ned: 2 | | | | | |
| Materials Sub | mitted for Evaluation and Verification: | | | | | | |
| | Task Verification Form for Gauze Muzzle Mentorship supervisor. | e Application skill, signed l | by the Clinical | | | | |
| | One video clearly showing one instance position of the muzzle from the front, side | | e muzzle, and the | | | | |
| Student Name |) : | | _ | | | | |
| Supervisor Na | ame: | | _ RVT, CVT, LVT DVM, VMD | | | | |
| Patient Name: | · | Date: | | | | | |
| Patient Name: | | Date: | | | | | |
| I verify that the | student performed these tasks under my supe | ervision. | | | | | |
| Signature of C | Clinical Mentorship Supervisor: | | | | | | |

8. APPLY A NYLON OR LEATHER MUZZLE TO A DOG

| Goal: | Adequately apply a nylon or leather muzzle to a dog so that a medical or diagnostic procedure may be performed without injury to either the patient or veterinary personnel. | | | | | |
|---|--|---------------------------|--|--|--|--|
| Description: The student will apply a nylon or leather muzzle to a dog prior to restrain animal for a procedure. | | | | | | |
| Criteria: | The correct muzzle size was selected. | | | | | |
| | The muzzle was placed on the dog correctly. | | | | | |
| | The muzzle was placed appropriately on the dog so that the moopen sufficiently to allow biting. | outh would not | | | | |
| | The muzzle was applied in such a way that the animal experiendiscomfort. | ced minimal | | | | |
| Number of Times Task | Needs to be Successfully Performed: 1 | | | | | |
| Materials Submitted for | or Evaluation and Verification: | | | | | |
| | Task Verification Form for Nylon/Leather Muzzle Applicatio the Clinical Mentorship supervisor. | n skill, signed by | | | | |
| | 2. One video clearly showing one instance of the student appl and the position of the muzzle from the front, size, and back | | | | | |
| Student Name: | | | | | | |
| Supervisor Name: | | RVT, CVT, LVT DVM, VMD | | | | |
| Patient Name: | Date: | | | | | |
| I verify that the student | performed these tasks under my supervision. | | | | | |

9. RESTRAIN A DOG USING A CATCH/RESTRAINT POLE

| Goal: | Safely use a restraint pole to catch a dog, without injury to the dog or versionnel. | eterinary | | | | |
|-------------------|---|---------------------------|--|--|--|--|
| Description: | The student will apply a restraint pole to an unrestrained/unleashed do it. | g and then remove | | | | |
| Criteria: | The student verified that the restraint pole was in good working order. | | | | | |
| | The student properly placed the loop over the patient's head and arour neck. | nd the | | | | |
| | The student closed the loop around the patient's neck such that the an not escape, but breathing was not restricted. | imal could | | | | |
| | The student safely removed the restraint pole from the patient. | | | | | |
| Number of Tin | nes Task Needs to be Successfully Performed: 1 | | | | | |
| Materials Sub | nitted for Evaluation and Verification: | | | | | |
| | Task Verification Form for Restraint Pole Use skill, sign Mentorship supervisor. | ned by the Clinical | | | | |
| | One video clearly showing one instance of the student <u>checking the function of the pole</u>, applying the restraint pole to an unrestrained/ unleashed dog, and releasing and removing it. | | | | | |
| Student Name | | - | | | | |
| Supervisor Na | me: | RVT, CVT, LVT DVM, VMD | | | | |
| Patient Name: | Date: | | | | | |
| I verify that the | student performed these tasks under my supervision. | | | | | |
| Signature of C | linical Mentorship Supervisor: | | | | | |

10. PERFORM A PHYSICAL EXAMINATION (DOG)

Goal:

To complete an accurate physical examination on a canine patient and record the information accurately in the patient's record

Description:

The student will perform a systematic physical examination of all the major body systems on a dog, and record this information on the attached 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.

Criteria:

The student observed the patient to assess attitude before approaching the animal to begin the physical examination.

The student assessed each of the following on the physical examination while narrating live, their findings:

- General appearance
- ❖ Body condition (BCS) and weight
- Temperature, heart rate, respiratory rate
- Mucous membrane color, condition, capillary refill time
- · Oral cavity including teeth, gingiva, tonsils
- · Conjunctiva, cornea, pupil, iris and sclera
- Pinna and external ear canal
- Skin and hair coat including color, lesions, evidence of external parasites or other abnormalities
- Musculature and skeleton including gait, asymmetry, pain or other abnormalities
- Cardiac auscultation including check for pulse deficit
- Observation of respiration and auscultation of lungs
- Checking basic reflexes and assessment of cranial nerves
- Abdominal palpation including urinary bladder
- Visual exam of external genitalia and anal area
- Lymph nodes including submandibular, prescapular and popliteal

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. For <u>each</u> 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 the Clinical Mentorship supervisor*. Photocopy of the clinical record may be done only with permission of the veterinarian. Client name and address/phone may be redacted.
- 2. One video either with a client animal or a simulation in which the student performs and records a Physical Examination on a <u>dog</u>. The Physical Examination recorded must be one of the three 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, and should include CLEAR, LIVE narration of what is being done, seen, heard, felt, etc. during the exam. Anatomy should be correctly identified. Voice-over is not acceptable.

PHYSICAL EXAMINATION SHEET

| itient's | Name | Date of Examination | | | | | | |
|---------------------|--|---|--|-------------------------------|---|--|-------------------------------------|-------------------------------------|
| pecies _. | | Br | eed | | | Age | | |
| | BODY CONDITION/ TEMP | | TEMP | PERAMENT | | | | |
| | Т | _ P | R | | _WEIGHT | Ib/kg | | |
| | 1 GENERAL APPEARANCE 2 INTEGUMENTARY 3 MUSCULOSKELETAL 4 CIRCULATORY 5 RESPIRATORY 6 DIGESTIVE | [] NOT EXAMINED | []NORMAL [], []NORMAL [], []NORMAL [], | ABNORMAL* ABNORMAL* ABNORMAL* | 8 NERVOUS SYSTEM 9 EARS 10 EYES 11 LYMPH NODES 12 TONSILS 13 MUCOUS MEMBRANES | []NOT EXAMINED []NOT EXAMINED []NOT EXAMINED []NOT EXAMINED []NOT EXAMINED | []NORMAL []NORMAL []NORMAL []NORMAL | []ABNORMAL* []ABNORMAL* []ABNORMAL* |
| | *(Explain below) | | | | | | | |
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| Physical | Examination con | ducted by: | | Sti | udent's Name P | rinted | | |
| attest th | nat the student pe | erformed this | examinatio | n <u> </u> | nical Mentorship | Supervisor | Signatur | re |

11. REMOVE CAT FROM CAGE AND RESTRAIN IN STERNAL RECUMBENCY FOR CEPHALIC VENIPUNCTURE, THEN ENCAGE

Goal:

Appropriately remove a cat from its cage and adequately restrain it in sternal recumbency so that cephalic venipuncture may be successfully performed without injury to either the patient or veterinary personnel, then return it to its cage.

Description:

The student will remove a cat from its cage appropriately, close the cage, position the cat in sternal recumbency, restrain while a veterinarian or credentialed veterinary technician withdraws blood from the cephalic vein, and return the cat to its cage appropriately.

Criteria:

The student opened the cage door quietly so as not to startle the cat, and removed the animal from the cage, maintaining control of the animal and preventing injury to the animal or personnel

The student closed the cage door

The student properly positioned the cat in sternal recumbency

The student was able to restrain the animal if it struggled

The student properly positioned their hand and arm around neck and head to control the head and prevent personnel from being bitten or injured

The student properly positioned their hand, arm, and body to keep the body of the animal properly immobilized to prevent personnel from being injured

The student was able to apply a tourniquet or compress the vein in order to raise the vein so that the venipuncture could be done successfully.

The student released the tourniquet or removed the compression on the vein to prevent excessive bleeding after completion of the venipuncture.

The student applied pressure to the venipuncture site to prevent bleeding from the site.

The student was able to restrain the animal in a manner that was adequate for control yet of no harm to the animal

The student placed the animal into the cage and closed the door quietly and without the patient escaping

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for Remove Cat from Cage and Restrain in Sternal Recumbency for Cephalic Venipuncture, Then Encage skill, signed by the Clinical Mentorship supervisor.

11. REMOVE CAT FROM CAGE AND RESTRAIN IN STERNAL RECUMBENCY FOR CEPHALIC VENIPUNCTURE, THEN ENCAGE (2)

2. One video showing the student moving a cat out of a cage, and restraining as described while a veterinarian or credentialed veterinary technician withdraws a blood sample from the cephalic vein. The video should clearly show the placement of the student's hands, the position of the animal, the compression of the vein or placement of the tourniquet, the release of the tourniquet or compression of the vein, and the application of pressure to the venipuncture site. Return of the cat to its cage should also be shown.

| Student Name: | |
|--|------------------------|
| Supervisor Name: | RVT, CVT, LVT DVM, VMD |
| Patient Name: D | Pate: |
| I verify that the student performed these tasks under my supervision | on. |
| Signature of Clinical Mentorship Supervisor: | |

12. RESTRAIN A CAT FOR JUGULAR VENIPUNCTURE

| Goal: | Adequately restrain a cat so that jugular venipuncture may be successfully performed without injury to either the patient or veterinary personnel. | | | | | | |
|-------------------|---|---|---------------------------------|----------------|---------------------------|--|--|
| Description: | The student will restrain a cat while a veterinarian or credentialed veterinary technician withdraws blood from the jugular vein. | | | | | | |
| Criteria: | The student was able to restrain the animal if it struggled. | | | | | | |
| | Th | prevent bleedin | prevent bleeding from the site. | | | | |
| | | e student was able to restrain the animal in a no harm to the animal. | manner | that was adequ | ate for control yet | | |
| Number of Tim | nes | Task Needs to be Successfully Performed | d: | 2 | | | |
| Materials Subr | nitt | ed for Evaluation and Verification: | | | | | |
| | Task Verification Form for Feline Jugular Venipuncture Restraint skill, signed by the Clinical Mentorship supervisor. | | | | | | |
| | One video showing the student restraining an animal as described while a veterinarian or credentialed veterinary technician withdraws a blood sample from the jugular vein. The video should clearly show the placement of the student's hands, the position of the animal, and the application of pressure to the venipuncture site. | | | | | | |
| Student Name | : | | | | | | |
| Supervisor Na | me: | : | | | RVT, CVT, LVT DVM, VMD | | |
| Patient Name: | | | Date: _ | | | | |
| Patient Name: | | | Date: _ | | | | |
| I verify that the | stud | dent performed these tasks under my supervi | ision. | | | | |

| Patient Name | : Date: | |
|---------------|---|---------------------------|
| Supervisor Na | ame: | RVT, CVT, LVT DVM, VMD |
| Student Name | e: | |
| | One video showing the student restraining an animal as described veterinarian or credentialed veterinary technician performs a proced should clearly show the placement of the student's hands and the planement. | lure. The video |
| | Task Verification Form for Restrain a Cat in Lateral Recumbency sk Clinical Mentorship supervisor. | till, signed by the |
| Materials Sub | omitted for Evaluation and Verification: | |
| Number of Tir | mes Task Needs to be Successfully Performed: 1 | |
| | The student was able to restrain the animal in a manner that was adequof no harm to the animal. | ate for control yet |
| | The student was able to move to allow the successful completion of the was able to maintain control of the animal at all times. | procedure, but |
| | The student was able to control the legs to prevent the veterinarian or the being scratched or injured by the claws. | nemselves from |
| | The student was able to control the head to prevent the veterinarian or being bitten or injured by movement of the head. | themselves from |
| | The student was able to restrain the animal if it struggled. | |
| Criteria: | The student properly positioned the cat in lateral recumbency with one head or lightly on the scruff of the neck, and the other controlling the real | |
| Description: | The student will restrain a cat in lateral recumbency while a veterinarian veterinary technician performs an examination, trims nails, or draws blo | |
| Goal: | Adequately restrain a cat in lateral recumbency so that a medical or diamay be performed without injury to either the patient or veterinary personal contents. | |
| | 13. RESTRAIN A CAT IN LATERAL RECUMBENC | Υ |

Signature of Clinical Mentorship Supervisor:

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

14. RESTRAIN A CAT USING A TOWEL AND APPLY A CAT MUZZLE

| 14. KES | | AIN A CAT USING A TOWEL A | ND APPLI A CA | I WOZZLE | |
|----------------|---|--|-------------------------|---------------------------|--|
| Goal: | dia | equately restrain a cat with a towel wrap and gnostic procedure may be performed withou sonnel. | | | |
| Description: | | e student will restrain a cat using a towel wra dentialed veterinary technician performs an | | | |
| Criteria: | The | e student properly positioned the cat on the t | owel. | | |
| | | e student was able to wrap the cat in the tow erinarian or themselves from being bitten or | | | |
| | | e student was able to wrap the cat in the tow themselves from being scratched or injured b | | prevent personnel | |
| | The | e correct muzzle size was selected. | | | |
| | The | e muzzle was placed on the cat right side up | | | |
| | The | e muzzle was applied in such a way that the | animal experienced min | imal discomfort. | |
| | The student was able to restrain the animal in a manner that was adequate for control yet of no harm to the animal. | | | | |
| Number of Tim | nes ' | Task Needs to be Successfully Performed | d : 2 | | |
| Materials Subr | nitte | ed for Evaluation and Verification: | | | |
| | 1. | Task Verification Form for Restrain a Cat U signed by the Clinical Mentorship supervisor | | a Cat Muzzle skill, | |
| | 2. | One video showing the student restraining veterinarian or credentialed veterinary tech procedure. The video should clearly show t front, side, and back. | nician performs an exam | ination or | |
| Student Name | : | | | | |
| | | | | RVT, CVT, LVT DVM, VMD | |
| Patient Name: | | | Date: | | |
| Patient Name: | | | Date: | | |
| | | | | | |

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

15. PERFORM A PHYSICAL EXAMINATION (CAT)

Goal:

To complete an accurate physical examination on a feline patient and record the information accurately in the patient's record

Description:

The student will perform a systematic physical examination of all the major body systems on a cat, and record this information on the attached 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.

Criteria:

The student observed the patient to assess attitude before approaching the animal to begin the physical examination.

The student assessed each of the following on the physical examination while narrating live, their findings:

- General appearance
- · Body condition (BCS) and weight
- Temperature, heart rate, respiratory rate
- Mucous membrane color, condition, capillary refill time
- · Oral cavity including teeth, gingiva, tonsils
- · Conjunctiva, cornea, pupil, iris and sclera
- Pinna and external ear canal
- Skin and hair coat including color, lesions, evidence of external parasites or other abnormalities
- Musculature and skeleton including gait, asymmetry, pain or other abnormalities
- Cardiac auscultation including check for pulse deficit
- Observation of respiration and auscultation of lungs
- Checking basic reflexes and assessment of cranial nerves
- Abdominal palpation including urinary bladder
- Visual exam of external genitalia and anal area
- Lymph nodes including submandibular, prescapular and popliteal

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:

- For <u>each</u> 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 the Clinical Mentorship supervisor*. Photocopy of the clinical record may be done only with permission of the veterinarian. Client name and address/phone maybe redacted.
- 2. One video either with a client animal or a simulation in which the student performs and records a Physical Examination on a <u>cat</u>. The Physical Examination recorded must be one of the three 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, and should include CLEAR, LIVE narration of what is being done, seen, heard, felt, etc. during the exam. Anatomy should be correctly identified. Voice-over is not acceptable.

PHYSICAL EXAMINATION SHEET

| atient's | Name | Date of Examination | | | | | | | | |
|----------|--|---------------------------------|---|-----------------------------|---|----------|-------------|--|--|--|
| pecies | | Br | eed | | Age MENT | | | | | |
| | BODY CONDITIO | ON/ | TEMPER | RAMENT | | | | | | |
| | Т | _P | R | WEIGHT | lb. | /kg | | | | |
| | 1 GENERAL APPEARANCE 2 INTEGUMENTARY 3 MUSCULOSKELETAL 4 CIRCULATORY | [] NOT EXAMINED [] NOT EXAMINED | []NORMAL []ABNO []NORMAL []ABNO []NORMAL []ABNO | ORMAL* 9 EARS ORMAL 10 EYES | [] NOT EXAMINED [] NOT EXAMINED [] NOT EXAMINED [] NOT EXAMINED | []NORMAL | []ABNORMAL* | | | |
| | 5 RESPIRATORY 6 DIGESTIVE | | []NORMAL []ABNO | | [] NOT EXAMINED | | | | | |
| | *(Explain below) | | | | | | | | | |
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| nysical | Examination con | ducted by: | | Student's Name P | rinted | | | | | |
| ttest th | nat the student pe | erformed this | examination | | o Supervisor | Signatur | e | | | |

16. APPLICATION OF ELIZABETHAN COLLAR

To apply an Elizabethan collar to a dog or cat

Goal:

| Descriptio | The student will properly apply an Elizabethan collar around the neck of a dog or cat. | | | | | |
|---------------|---|--|--|--|--|--|
| Criteria: | The student chose the correct size of Elizabethan collar for t | The student chose the correct size of Elizabethan collar for the patient | | | | |
| | The student prepared/assembled the collar as needed | | | | | |
| | The student applied the collar to the patient without causing | injury or discomfort | | | | |
| | The student secured the collar so it could not be removed by not too tight | The student secured the collar so it could not be removed by the patient but was not too tight | | | | |
| | Once placed, the collar prevented the patient from either che inappropriately | ewing or scratching | | | | |
| Number of | f Times Task Needs to be Successfully Performed: 1 | | | | | |
| Materials S | Submitted for Evaluation and Verification: | | | | | |
| 1. | Task Verification Form for Application of Elizabethan Collar skill, signed by the Clinical Mentorship supervisor. | | | | | |
| 2. | One video showing the student choosing, preparing/assembling and applying an Elizabethan collar, from the front, side, and back. The student will provide a narrative while videoing to describe the steps being performed. | | | | | |
| Student Na | ame: | _ | | | | |
| Superviso | r Name: | RVT, CVT, LVT DVM, VMD | | | | |
| Patient Na | | | | | | |
| I verify that | the student performed these tasks under my supervision. | | | | | |

17. ADMINISTER ORAL TABLET OR CAPSULE TO A DOG AND A CAT

| Goal: | Successfully administer a tablet or capsule orally to a cat and dog such that the medication is swallowed without injury to either the patient or veterinary personnel. | | | | | | |
|---|---|---|------------------------|---------------------------|--|--|--|
| Description: | The student will administer a tablet or capsule to a dog and cat, restrained by an assistant, without being bitten, causing the animal to choke, or harming the animal. The medication may not be hidden in a food treat. A pet piller may be used for the cat. | | | | | | |
| Criteria: | The | e student was able to open the mouth of the a | animal. | | | | |
| | The student maintained control of the head or muzzle during the administration of the medication. | | | | | | |
| | The | e medication was swallowed without choking | | | | | |
| | | e student was able to control the animal in a medication yet did no harm to the animal. | manner that was adequa | te to administer | | | |
| Number of Tim | nes ' | Task Needs to be Successfully Performed | : 2 (1 dog, 1 cat) | | | | |
| Materials Submitted for Evaluation and Verification: | | | | | | | |
| | Task Verification Form for Oral Table or Capsule Administration skill, signed by the Clinical Mentorship supervisor. | | | | | | |
| | One video showing the student administering the medication to a <u>dog</u>. The video should clearly show the placement of the student's hands, the position of the animal, and the animal swallowing the tablet or capsule. | | | | | | |
| | 3. One video showing the student administering the medication to a <u>cat</u> . The video should clearly show the placement of the student's hands, the position of the animal, and the animal swallowing the tablet or capsule. | | | | | | |
| Student Name | : | | | | | | |
| Supervisor Na | me: | | | RVT, CVT, LVT DVM, VMD | | | |
| Patient Name: | | | Date: | dog / cat | | | |
| Patient Name: | | | Date: | dog / cat | | | |
| | | | | | | | |
| I verify that the student performed these tasks under my supervision. | | | | | | | |

18. ADMINSTER ORAL LIQUID

| Goal: | Successfully administer liquid orally to a cat or dog such that the medication is swallowed without injury to either the patient or veterinary personnel. | | | | | | |
|---|---|---|---------------------------|--|--|--|--|
| Description: | | The student will administer oral liquid with a syringe to a dog or cat, restrained by an assistant, without being bitten, causing the animal to choke, or harming the animal. | | | | | |
| Criteria: | The | e student tilted the patient's nose up slightly to facilitate administratio | n. | | | | |
| | | e student maintained control of the head or muzzle during the admini- dication. | stration of the | | | | |
| | The | e medication was swallowed without choking. | | | | | |
| | | e student was able to control the animal in a manner that was adeque medication yet did no harm to the animal. | ate to administer | | | | |
| Number of Tin | nes | Task Needs to be Successfully Performed: 1 | | | | | |
| Materials Subi | mitte | ed for Evaluation and Verification: | | | | | |
| | Task Verification Form for Oral Liquid Administration skill, signed by the Clinical Mentorship supervisor. | | | | | | |
| | 2. One video showing the student administering the medication to a dog <u>or</u> cat. The video should clearly show the placement of the student's hands, the position of the animal, and the animal swallowing the liquid. | | | | | | |
| Student Name: | | | | | | | |
| Supervisor Na | me: | | RVT, CVT, LVT DVM, VMD | | | | |
| Patient Name: Date: | | | | | | | |
| I verify that the student performed these tasks under my supervision. | | | | | | | |

19. ADMINISTER EYE DROPS AND OINTMENT

| Goal: | Successfully administer eye drops and ointment to a cat or dog such that the medication is applied without injury to either the patient or veterinary personnel. | | | | | | |
|--|--|---|----------------------------|-------------------|--|--|--|
| Description: | The student will administer eye drops and ointment to a dog or cat without being injured, contaminating the applicator tip, or harming the animal. | | | | | | |
| Criteria: | Th | e student was able to open the eye of the an | imal. | | | | |
| | | e student maintained control of the head or nedication. | stration of the | | | | |
| | Th | e student rested the hand holding the medica | ation on the patient's hea | d. | | | |
| | The student successfully administered the drops/ointment into the eye. | | | | | | |
| | Th | e medication was administered without conta | amination of the applicate | or tip. | | | |
| | The student was able to control the animal in a manner that was adequate to administer the medication yet did no harm to the animal. | | | | | | |
| Number of Tim | es | Task Needs to be Successfully Performed | 1 : 2 (1 drops, 1 o | intment) | | | |
| Materials Subr | nitt | ed for Evaluation and Verification: | | | | | |
| Task Verification Form for Eye Drop and Ointment Administration skill, signed by the Clinical Mentorship supervisor. | | | | | | | |
| | One video showing the student administering eye drops to a dog or cat. The video should clearly show the placement of the student's hands, the position of the animal, and the eye drops being dropped into the eye. | | | | | | |
| | One video showing the student administering eye ointment to a dog or cat. The video should clearly show the placement of the student's hands, the position of the animal, and the eye drops being dropped into the eye. | | | | | | |
| Student Name | : | | | | | | |
| | | | | RVT, CVT, LVT | | | |
| · | | | | DVM, VMD | | | |
| Patient Name: | | | Date: | _ drop / ointment | | | |
| Patient Name: | | | Date: | _ drop / ointment | | | |
| I verify that the | stud | dent performed these tasks under my superv | ision. | | | | |

20. ADMINISTER EAR MEDICATION TO A DOG AND A CAT

| Goal: | | iccessfully administer ear medication to a cat and dog such that plied without injury to either the patient or veterinary personnel. | the medication is |
|-------------------|------|---|---------------------------------------|
| Description: | | e student will administer ear medication to a dog and cat restrain thout being bitten, contaminating the applicator tip, or harming th | |
| Criteria: | Th | e student was able to place the medication applicator in the prop | per position. |
| | | ne student maintained control of the head or muzzle during the adedication. | dministration of the |
| | Th | e student successfully administered the medication into the ear | canal. |
| | Th | e medication was administered without contamination of the app | olicator tip. |
| | | e student was able to control the animal in a manner that was a e medication yet did no harm to the animal. | dequate to administer |
| Number of Tin | nes | Task Needs to be Successfully Performed: 2 (1 dog | j, 1 cat) |
| Materials Sub | mitt | ed for Evaluation and Verification: | |
| | 1. | Task Verification Form for Ear Medication Administration skill, Mentorship supervisor. | signed by the Clinical |
| | 2. | One video showing the student administering the medication to should clearly show the placement of the student's hands, the and the applicator position over the ear canal. | |
| | 3. | One video showing the student administering the medication to should clearly show the placement of the student's hands, the and the applicator position over the ear canal. | |
| Student Name | : | | |
| Supervisor Na | me | : | RVT, CVT, LV ⁻ DVM, VMD |
| Patient Name: | | Date: | dog / cat |
| Patient Name: | | Date: | dog / cat |
| I verify that the | stu | dent performed these tasks under my supervision. | |
| Signature of C | lini | cal Mentorship Supervisor: | |

21. ADMINISTER SUBCUTANEOUS INJECTION TO A DOG AND A CAT

| , (D.) | ••• | , 1211 00000 17 (112000 111020 11011 10 71 D | |
|-------------------|------|--|---------------------------|
| Goal: | the | ccessfully administer medication to a cat and dog by subcutaned medication is correctly administered without injury to either the rsonnel. | |
| Description: | | e student will administer by subcutaneous injection either a pres ine placebo. If a placebo is given it must be at least 0.5 mL. | cribed medication or |
| Criteria: | Th | e student selected the proper site for administration. | |
| | Th | e student properly introduced the needle into the site of adminis | tration. |
| | Th | e student aspirated the syringe to check for blood or air prior to | njection. |
| | Th | e student successfully administered the prescribed amount of m | edication. |
| Number of Tim | ies | Task Needs to be Successfully Performed: 2 (1 dog | , 1 cat) |
| Materials Subr | nitt | ed for Evaluation and Verification: | |
| | 1. | Task Verification Form for Subcutaneous Injection Administration Clinical Mentorship Supervisor. | on skill, signed by the |
| | 2. | One video showing the student administering the medication to should clearly show the student, the position of the needle/syrithe syringe, and the administration site on the animal. | |
| | 3. | One video showing the student administering the medication to should clearly show the student, the position of the needle/syri the syringe, and the administration site on the animal. | |
| Student Name: | : | | |
| Supervisor Na | me: | : | RVT, CVT, LVT DVM, VMD |
| Patient Name: | | Date: | dog / cat |
| Patient Name: | | Date: | dog / cat |
| I verify that the | stud | dent performed these tasks under my supervision. | |

22. ADMINISTER INTRAMUSCULAR INJECTION IN A DOG AND A CAT

| Goal: | | dminister medication by instered without injury to e | | | |
|-------------------|--|---|--|--------------------|---------------------------|
| Description: | | Il administer either a pres acebo is given it must be | | or saline placel | oo into the |
| Criteria: | The student selected the proper site for administration based on anatomical landmar and verbally identified the site and landmarks. | | | cal landmarks | |
| | The student properly introduced the needle into the site of administration. | | | | |
| | The student as | spirated the syringe to che | eck for blood prior | to injection. | |
| | The student su | ccessfully administered t | he prescribed amo | ount of medication | on. |
| Number of Tim | es Task Needs | s to be Successfully Pe | rformed: 2 | (1 dog, 1 cat) | ı |
| Materials Subr | itted for Evalu | uation and Verification: | | | |
| | Task Verification Form for Intramuscular Injection Administration skill, signed by the Clinical Mentorship supervisor. | | | | |
| | One video showing the student administering the medication to a <u>dog</u>. The video should clearly show the student, the position of the needle/syringe. The student should <u>verbally identify the muscle mass and landmarks</u> for the administration site they have chosen on the animal. | | | | |
| | should clea should <u>ver</u> | showing the student admarly show the student, the bally identify the musclave chosen on the anima | e position of the ne- le mass and landr | edle/syringe. Th | ne student |
| Student Name | | | | | |
| Supervisor Na | ne: | | | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | | | Date: | | dog / cat |
| Patient Name: | | | Date: | | _ dog / cat |
| I verify that the | tudent perform | ned these tasks under my | supervision. | | |

23. PERFORM CEPHALIC VENIPUNCTURE SAMPLE COLLECTION IN A DOG

| Signature of C | Clinical Mentorship Supervisor: | | |
|-------------------|--|--|--|
| I verify that the | e student performed these tasks under r | ny supervision. | |
| Patient Name: | : | Date: | |
| Patient Name: | : | Date: | |
| Supervisor Na | ame: | | DVM, VMD |
| | ame: | | |
| Student Nemo |) : | | |
| | signed by the Clinical Mentorship 2. One video showing the student in the syringe to check for blood, an clearly show the student, the posineedle, the backflow of blood, and no signs of bleeding. | supervisor. Itroducing the needle into the d drawing blood from a dog. Ition of the needle/syringe, the | vein, pulling back on The video should e introduction of the |
| Materials Sub | mitted for Evaluation and Verification 1. Task Verification Form for Cepha | | ection in a Dog skill |
| | mes Task Needs to be Successfully F | | |
| Normal and CT're | Tool New to to be Our constitled | Denfermed 0 | |
| | The student or restrainer properly app bleeding | olied pressure to the puncture | e site to reduce |
| | The student drew the appropriate volu | ume of blood for the required | test |
| | The student aspirated the syringe to o | check for blood | |
| | The student properly introduced the n | eedle into the site | |
| Criteria: | The student selected the proper site f | or venipuncture | |
| Description: | The student will collect blood from the | e cephalic vein of a dog | |
| Goal: | Successfully collect a blood sample fr sample is correctly drawn without inju | | |

24. PERFORM CEPHALIC VENIPUNCTURE SAMPLE COLLECTION IN A CAT

| Goal: | Successfully collect a blood sample from sample is correctly drawn without injury | | | |
|-------------------|---|--|------------------------------------|--|
| Description: | The student will collect blood from the c | ephalic vein of a cat | | |
| Criteria: | The student selected the proper site for venipuncture | | | |
| | The student properly introduced the nee | edle into the site | | |
| | The student aspirated the syringe to che | eck for blood | | |
| | The student drew the appropriate volume | ne of blood for the required tes | st | |
| | The student or restrainer properly applied bleeding | ed pressure to the puncture si | te to reduce | |
| Number of Tim | nes Task Needs to be Successfully Pe | rformed: 2 | | |
| Materials Subr | mitted for Evaluation and Verification: | | | |
| | Task Verification Form for Cephalic signed by the Clinical Mentorship services. | | tion in a Cat skill, | |
| | 2. One video showing the student intro the syringe to check for blood, and clearly show the student, the positio needle, the backflow of blood, and no signs of bleeding. | drawing blood from a cat. The on of the needle/syringe, the ir | video should ntroduction of the | |
| Student Name | ē | | | |
| Supervisor Na | me: | | RVT, CVT, LVT DVM, VMD | |
| Patient Name: | | Date: | | |
| Patient Name: | | Date: | | |
| I verify that the | student performed these tasks under my | supervision. | | |
| Signature of C | Clinical Mentorship Supervisor: | | | |

25. ADMINISTER INTRAVENOUS INJECTION TO A DOG

| Goal: | correctly administered without injury to either | | |
|-------------------|---|--|---|
| Description: | The student will administer either a prescribed medication or saline placebo into a vein of a dog. If a placebo is given it must be at least 0.5 mL. | | |
| Criteria: | The student selected the proper site for adr | ninistration. | |
| | The student properly introduced the needle | into the site of administra | tion. |
| | 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 p bleeding. | ressure to the puncture si | te to reduce |
| Number of Tin | nes Task Needs to be Successfully Perfor | med: 2 | |
| Materials Sub | mitted for Evaluation and Verification: | | |
| | Task Verification Form for Administer IV Mentorship supervisor. | √ Injection to a Dog skill, s | igned by the Clinica |
| | 2. One video showing the student introduce the plunger to check for blood, and admivideo should clearly show the student, introduction of the needle, the backflow and the area of vein after needle withdress. | ninistering the medication the position of the needle/ of blood, the push of med | to the dog. The syringe, the dication into the vein |
| Student Name | ē | | |
| Supervisor Na | me: | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | | Date: | |
| Patient Name: | | Date: | |
| I verify that the | student performed these tasks under my sup | pervision. | |
| Signature of C | Slinical Mentorship Supervisor: | | |

26. ADMINISTER INTRAVENOUS INJECTION TO A CAT

| Signature of C | Clinical Mentorship Supervisor: | | | |
|-------------------|--|---|---|--|
| I verify that the | student performed these tasks under | my supervision. | | |
| Patient Name: | | Date: | | |
| Patient Name: | | Date: | | |
| Supervisor Na | ıme: | | RVT, CVT, LVT DVM, VMD | |
| Student Name | :: | | | |
| | the needle, the backflow of bloo- | introducing the needle into the vend administering the medication the position of the needle/syring | ein, pulling back on to the cat. The video ge, the introduction o e vein, and the area | |
| Materials Sub | mitted for Evaluation and Verification | | inned by the Olivical | |
| Number of Tin | nes Task Needs to be Successfully | Performed: 2 | | |
| | The student or restrainer properly apbleeding. | oplied pressure to the puncture s | ite to reduce | |
| | The student injected the drug withou | it signs of extravasation. | | |
| | The student aspirated the syringe to | check for blood prior to injection | ١. | |
| | The student properly introduced the | needle into the site of administra | ation. | |
| Criteria: | The student selected the proper site | for administration. | | |
| Description: | The student will administer either a prescribed medication or saline placebo into a vein of a cat. If a placebo is given it must be at least 0.5 mL. | | | |
| Goal: | correctly administered without injury | | | |

27. TRIM TOE NAILS OF A DOG AND A CAT

| Goal: | personnel. | a cat without injury to either | the patient or veterinary |
|-------------------|--|--------------------------------|---------------------------|
| Description: | The student will trim the nails on all from the quick. | our feet of a dog and a cat | without causing bleeding |
| Criteria: | The student placed the nail trimmers | in the proper position on th | e nail. |
| | The amount of nail tip removed was | appropriate. | |
| | The nail did not bleed after removal | of the tip. | |
| Number of Tim | nes Task Needs to be Successfully | Performed: 2 (1 c | log, 1 cat) |
| Materials Subr | mitted for Evaluation and Verification | on: | |
| | Task Verification Form for Nail T supervisor. | rim skill, signed by the Clini | cal Mentorship |
| | One video showing the student to video clearly shows the student, blood supply in the nail bed (if clearly shows the student). | the position of the nail trimr | ners on the nail, the |
| | One video showing the student to video clearly shows the student, blood supply in the nail bed (if clearly shows the student). | the position of the nail trimr | mers on the nail, the |
| Student Name | : | | |
| Supervisor Na | | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | | Date: | dog / cat |
| Patient Name: | | Date: | dog / cat |
| I verify that the | student performed these tasks under | my supervision. | |
| Signature of C | dinical Montorchin Supervicer | | |

28. CLEAN EARS IN A DOG AND A CAT

| Goal: | | ccessfully clean the external ear canal of a ditient or veterinary personnel. | og and a cat without inju | iry to either the |
|-------------------|---|---|----------------------------|---------------------------|
| Description: | | e student will clean both ear canals of a dog nal has been removed. | and a cat until material i | n the vertical ear |
| Criteria: | The student appropriately administered cleaning solution to the ear canal in quantity, without contaminating the tip of the cleaning solution bottle. | | | al in sufficient |
| | Th | e student massaged the ear canal externally | | |
| | Th | e student cleaned the outer ear with cotton b | alls. | |
| | Th | e student used swabs appropriately if neede | d. | |
| | Th | e ear canal was clean after the cleaning proc | cess. | |
| Number of Tim | nes | Task Needs to be Successfully Performed | 1: 2 (1 dog, 1 ca | t) |
| Materials Subr | nitt | ed for Evaluation and Verification: | | |
| | 1. | Task Verification Form for Clean Ears in a I Mentorship supervisor. | Dog and a Cat skill, sign | ed by the Clinical |
| | 2. | One video showing the student cleaning the clearly show the student administering the cleaning the ear. | | |
| | 3. | One video showing the student cleaning the clearly show the student administering the cleaning the ear. | | |
| Student Name | : | | | |
| Supervisor Na | me | | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | | | Date: | dog / cat |
| Patient Name: | | | Date: | dog / cat |
| I verify that the | stud | dent performed these tasks under my superv | ision. | |
| Signature of C | lini | cal Mentorship Supervisor: | | |

29. EXPRESS ANAL SACS

Successfully express and remove contents of anal sacs

Goal:

| Description: | Th | e student will express both anal sacs of a dog and clean the area. | |
|-------------------|-------|--|---------------------------|
| Criteria: | The | e student wore exam gloves. | |
| | The | e student located the position of the anal sacs. | |
| | The | e student lubricated the index finger. | |
| | | e student appropriately positioned the finger internally and thumb extoress the anal sacs. | ernally to |
| | | e contents of each anal sac were adequately expressed into a 4x4 gaperly to prevent spraying or leakage. | auze positioned |
| | The | e student cleaned the area after expressing the anal sacs. | |
| Number of Tim | nes | Task Needs to be Successfully Performed: 1 | |
| Materials Subr | mitte | ed for Evaluation and Verification: | |
| | 1. | Task Verification Form for Anal Sac Expression, signed by the Clini supervisor. | cal Mentorship |
| | 2. | One video showing the student expressing both anal sacs of a dog. clearly show the student, position of the fingers at the anus, and the expressed on the gauze. | |
| | | | |
| Student Name | : | | |
| Supervisor Na | me: | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | | Date: | |
| I verify that the | stuc | dent performed these tasks under my supervision. | |
| Signature of C | linio | cal Mentorship Supervisor: | |

30. BATHE A PATIENT

| Goal: | Successfully bathe a dog or cat | |
|---------------------|--|---|
| • | The student will prepare a dog or cat for a bath, bathe the animal using a shampoo, rinse the animal, and supervise drying. The student will demoknowledge of precautions if a medicated or insecticidal shampoo is used | nstrate |
| Criteria: | Anal sacs were expressed and toe nail trims were done before bathing if | required. |
| | The student removed any collars or harnesses. | |
| | Cotton was placed in the ears. | |
| | The student thoroughly wetted the animal prior to application of the shan | npoo. |
| | The student appropriately applied the shampoo. | |
| | The student observed all precautions mandated by the particular shamp | 00. |
| | The hair and skin were thoroughly rinsed of all shampoo. | |
| | Cotton balls were removed from the ears. | |
| | The animal was dried safely, adequately, and not overheated with a cagavailable). | e dryer (if |
| | Animal was combed or brushed, and mats removed if required. | |
| Number of Time | es Task Needs to be Successfully Performed: 1 | |
| Materials Subm | nitted for Evaluation and Verification: | |
| | Task Verification Form for Bathe a Patient, signed by the Clinical Me supervisor. | entorship |
| | 2. One video showing the student preparing, bathing, rinsing, and drying The video should clearly show the student performing any preparato to bathing (trimming nails/expressing anal sacs as needed), following precautions mandated by the use of the shampoo (the student may bottle on the video). The rinsing process, brushing, the cage dryer (if up, and the finished, dried animal should also be shown. The video of be run continuously if the shampoo is left on for a period of time, but key components of each step. | ry activities prior g any read these off the f available) set- does not need to |
| Student Name: | | |
| Supervisor Nar | ne: | RVT, CVT, LVT DVM, VMD |
| Patient Name: | Date: | |
| I verify that the s | student performed these tasks under my supervision. | |

31. COLLECT A FREE CATCH URINE SAMPLE

| Goal: | successfully collect a urine sample of quality and quantity that allows a urinalysis. | n accurate |
|-------------------|---|---------------------------|
| Description: | The student will collect at least 8 cc's of urine from the urine stream of a from a cat) using a clean container. | a dog (or 3 cc's |
| Criteria: | The student selected a clean container that was appropriate for the amount | ount. |
| | The student collected the urine after the initial stream. | |
| | The student avoided contaminating the collected urine by contact with t etc. | he animal's hair, |
| | The student collected at least 8 mL of urine from a dog (or 3 mL from a | cat). |
| Number of Tim | es Task Needs to be Successfully Performed: 1 | |
| Materials Subr | nitted for Evaluation and Verification: | |
| | Task Verification Form for Urine Collection evaluation, signed by the Mentorship supervisor. | e Clinical |
| | One video showing the student collecting urine. The video clearly state collecting the urine, the urine in the container after collection, and do the amount collected (e.g. drawing the urine into a large syringe). | |
| Student Name | | |
| Supervisor Na | me: | RVT, CVT, LVT DVM, VMD |
| Patient Name: | Date: | |
| I verify that the | student performed these tasks under my supervision. | |
| Signature of C | linical Mentorship Supervisor: | |

32. OBTAIN A HISTORY

Goal: To obtain complete and accurate information from a client by asking specific

questions about the pet.

Description: The student will question a client about the past and current condition of the animal and

record the history on the attached History Sheet. As an alternative, the student may photocopy the recorded history from the clinical record if allowed to do so by the veterinarian. Client name and address/phone may be redacted. The Clinical Mentorship supervisor will verify the accuracy of the obtained history and observe the student

performing the history to verify the criteria for this task.

Criteria: The student allowed the client to state the presenting problem before asking

additional directed questions.

The student asked a set of questions related to the presenting problem.

The student asked a set of general health questions.

The student asked the questions clearly and used terminology the client understood so that the client was able to answer the question accurately, while using professional language.

The student maintained good communication skills:

Good eye contact

- Non-verbal body language that encouraged the client to continue to speak
- Allowed the client to finish a statement without interrupting

The student asked questions in such a way that the question was not a leading question (e.g. "Is she drinking more water?").

When/if a client was unable to understand a question, the student was able to formulate a different way of asking the same question and obtaining the needed information.

The student periodically repeated the information back to the client to confirm what the student heard was a correct interpretation of what the client said or meant.

The student was able to direct the history taking dialogue to obtain the information in a timely manner (i.e. didn't allow the conversation to wander too far from the goal of getting a complete and accurate history).

The student was able to establish a working rapport with the client. The student conducted the history interview in a courteous and professional manner.

The student was able to gauge the amount of history needed based upon the critical status of the patient (e.g. if the case was an animal in critical status, only the pertinent history was obtained before emergency treatment was begun).

The student accurately recorded the history obtained from the client in sufficient detail to convey all the information needed by the veterinarian.

Number of Times Task Needs to be Successfully Performed: 3

(1 may be a normal animal; at least 2 must have some presenting problem)

Materials Submitted for Evaluation and Verification:

- 1. Task Verification form for the history taking skill, signed by Clinical Mentorship supervisor
- 2. Either the original written record of the history <u>for each patient</u> or a photocopy from the clinical record of the written history signed by both the student and the Clinical Mentorship supervisor
- 3. One video either with a client animal or a simulation in which the student elicits and records a history. <u>The written history corresponding to the video must be signed by the student and Clinical Mentorship supervisor and submitted with the video</u>. The recorded history may be one of the three histories submitted.

| Student Name: | | |
|--|----------------------------|---------------------------|
| Supervisor Name: | | RVT, CVT, LVT DVM, VMD |
| Patient Name: | Date: | |
| Patient Name: | Date: | |
| Patient Name: | Date: | |
| I verify that the student performed these to | asks under my supervision. | |
| Signature of Clinical Mentorship Super | visor: | |

Example History Sheet for Submission

| Client: | Patient: |
|---|--|
| Presenting problem | |
| Date: | □ Video |
| | |
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| | |
| History obtained by: | Student's Name Printed |
| I attest that the student obtained this history | Clinical Mentorship Supervisor Signature |

33. RECORDING TREATMENT OR CLINICAL DATA ON A HOSPITALIZED PATIENT

| Goal: | | To record complete and accurate information about a hospitalized patient's condition and treatment. | | | |
|----------------|---|---|-------------------------------|--------------|--|
| Description: | fori lea app Nu | The student will record the condition of a hospitalized patient on a Hospitalization Record form. A hospitalized patient is a patient that remains in the hospital for a length of time (at least one full day). Medical treatments, administered medications, and any other applicable clinical data as determined by the attending veterinarian will be recorded. Nursing care and observations by the student should be included. The Clinical Mentorship supervisor will verify the accuracy of the recorded information. | | | |
| Criteria: | The | e student accurately identified the patient on | the Hospitalization Reco | ord form. | |
| | The student accurately recorded the presenting problem and clinical status of the animal. | | | | |
| | The student obtained and recorded an accurate TPR. | | | | |
| | The student accurately recorded any treatments performed on the animal. | | | | |
| | The student accurately recorded any medications administered to the animal. | | | | |
| | The | e student accurately recorded the veterinaria | n's orders for this patier | ıt. | |
| | The student accurately recorded any additional clinical data as directed by the DVM. | | | | |
| | | e student included <u>detailed nursing notes a</u> vided to the patient. | and observations docui | menting care | |
| Number of Tin | nes ' | Task Needs to be Successfully Performed | l : 3 | | |
| Materials Subi | nitte | ed for Evaluation and Verification: | | | |
| | 1. | Task Verification of Hospitalization Record supervisor for each Hospitalization Record | | Mentorship | |
| | 2. | Hospitalization Record forms for each of the write on the hospitalization form, identify whinitialing or by highlighting pertinent information. | nich are the student's wr | | |
| Student Name | : | | | | |
| Cupanicar Na | | | | DVT CVT LVT | |
| | | | | DVM, VMD | |
| | | | Date: | | |
| | | | Date: | | |
| Patient Name: | | | Date: | | |

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

Hospitalization Record

| Client: | Patient: | | | | | |
|------------------------|--------------------------------|---------------------------|------------------|--|--|--|
| Date: | Species: | Sex: | Age: | | | |
| T: | P: R: | Weight: | lb / kg | | | |
| Presenting problem | | | | | | |
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| | Recorded by: _ | Student's Name Printed | | | | |
| | | Student's Name Fillied | | | | |
| I attest that the stud | ent recorded this information_ | Clinical Mentorship Supe | rvisor Signature | | | |
| | | Similodi Montororiip Odpo | | | | |