

# Purdue University Veterinary Technology Distance Learning Program

Lynn Hall, Purdue University, West Lafayette, Indiana 47907

## CLINICAL MENTORSHIP SITE FACILITY REQUIREMENT AGREEMENT - VM 21000

In order for a veterinary care facility to participate as a Clinical Mentorship site for VM 21000 Small Animal Anesthesia clinical Mentorship, the facility must be equipped:

### With the following equipment:

- $\hfill\square$  Anesthetic machine with an "out of circle" vaporizer
- □ Endotracheal tubes of various sizes with <u>functioning</u> cuffs
- □ Stylet for feline intubation (student should describe or show the stylet when cat is intubated)
- □ Rebreathing and Non-rebreathing systems
- □ 2-Rebreathing bags (1L-5L)(500 ml for Non Rebreathing system)
- □ Anesthetic/oxygen masks
- □ Scavenge system
- □ Clippers
- □ Stethoscope and esophageal stethoscope (for use during surgery)
- □ ECG monitor
- □ Pulse oximeter
- □ Respiratory monitor
- □ Laryngoscope
- □ Blood pressure monitoring device
- □ Heating pad or other heat source for hypothermic patients
- □ Capnograph

#### With the following items:

- $\Box$  Isoflurane
- □ Oxygen
- □ Lidocaine injectable/spray or gel for feline intubation
- □ Intravenous fluids
- □ Premedications: atropine, acepromazine, butorphanol, buprenorphine, morphine, hydromorphone, xylazine, medetomidine (require at least atropine plus one opioid and either acepromazine or xylazine/medetomidine)
- □ Induction agents: Pentothal, Propofol, Ketamine and Valium, Etomidate (require at least 2; Ketamine and Valium count as one agent)
- $\hfill\square$  Emergency drugs these will be defined in the project for emergency drugs

#### With the following disposable items:

- □ Roll gauze for tying tube to jaw (NO TAPE!!)
- □ IV catheters
- □ Syringes
- □ Needles
- □ Materials for aseptic prep of IV catheter site
- □ Tape
- □ Towels or blankets
- □ Fluid administration set
- □ Eye lubricant
- □ Heparinized saline
- □ Anesthesia record (may use one provided or your own) Record <u>must include</u> the following:
  - □ Patient name
  - Date
  - □ Signalment
  - U Weight
  - $\Box$  Procedure
  - □ Special precautions (if any) or patient conditions pertinent to anesthesia
  - □ TPR prior to premedication and preferably at rest (that morning)
  - □ Pre-anesthetics, induction agent and any other agents administered in the pre or peri-anesthetic period with the amount given and the time
  - □ Heart rate, respiratory rate and gas concentration recorded every 5 minutes in chart form
  - □ IV fluid amount every 15-30 minutes (total at end of procedure)
  - □ Blood pressure readings and Pulse Ox readings recorded every 5 minutes (if using)
  - Dest-operative pain medication (if given), agent and amount
  - $\hfill\square$  Time of extubation
  - □ Synopsis of patient recovery
  - □ TPR post extubation

I certify that the veterinary care facility \_\_\_\_\_

Name of Veterinary Hospital or Facility

has the equipment that I have indicated by checking the boxes above; and that

such equipment and materials are available to the VTDL Student

for use in the completion of the M 21000 clinical Mentorship.

Printed name of Facility Veterinarian \_\_\_\_\_

Signature\_\_\_\_\_

Date:
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This form must be signed and returned to the student, submitted and approved by Purdue prior to the beginning of the Clinical Mentorship VM 21000