

SMALL ANIMAL ANESTHESIA CLINICAL MENTORSHIP



VM 21000

CRITERIA HANDBOOK AND LOGBOOK

INDEX OF NOTEBOOK

Student Information

- Goals of SA Anesthesia Clinical Mentorship
- Contact person at Purdue University
- Pre-requisites for VM 21000
 - ❖ Contracts and agreements
 - ❖ Insurance
- Selection of Clinical Mentorship site – facility criteria
- Selection of Mentorship Supervisor
- Materials – The Criteria Handbook and Logbook
- Completion of SA Anesthesia Mentorship

Clinical Mentorship Tasks

Introduction to Essential Tasks and Criteria

1. Obtain history prior to anesthesia
2. Preanesthetic preparation of the anesthetic machine (canine)
3. Preparation of supplies prior to general inhalant anesthesia (canine)
4. Preanesthetic preparation of the patient for anesthesia (canine)*
5. Induction by injectable agent (canine)**
6. Intubation (canine)**
7. Maintenance and monitoring of general anesthesia (canine)**
8. Recovery (canine)*
9. Preanesthetic preparation of the anesthetic machine (feline)
10. Preparation of supplies prior to general inhalant anesthesia (feline)
11. Preanesthetic preparation of the patient for anesthesia (feline)*
12. Induction by injectable agent (feline)**
13. Intubation (feline)**
14. Maintenance and monitoring of general anesthesia (feline)**
15. Recovery (feline)*
16. Anesthesia record procedures (canine and feline)

Clinical Mentorship Projects

17. Completion of one non-routine case from induction to recovery
18. Emergency drugs

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

NOTE THE FOLLOWING DUE DATES FOR THE TASKS ABOVE:

Fall or Spring semester ***5:00p.m. Thursday of week 6 – Tasks 1-8 and 16 (canine)***
5:00p.m. Thursday of week 10 – Tasks 9-15 and 16 (feline)
5:00p.m. Thursday of week 12 – Tasks 17-18

Summer session ***5:00p.m. Thursday of week 3 – Tasks 1-8 and 16 (canine)***
5:00p.m. Thursday of week 5 – Tasks 9-15 and 16 (feline)
5:00p.m. Thursday of week 7 – Tasks 17-18

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

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

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

Animal Use Guidelines

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

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

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

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

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

STUDENT INFORMATION

GOALS OF VM 21000 SA ANESTHESIA 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 Technology Distance Learning Program meets the standards of quality required by the Purdue University College of Veterinary Medicine faculty and the American Veterinary Medical Association accrediting bodies.

CONTACT PERSON

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

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

PRE-REQUISITES FOR VM 21000

SA ANESTHESIA CLINICAL MENTORSHIP

Contracts and Agreements

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

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

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

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

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

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

Insurance

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

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

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

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

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

SELECTING THE CLINICAL MENTORSHIP SITE – FACILITY REQUIREMENTS

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

The veterinary care facility must be equipped:

With the following equipment:

- Anesthetic machine with an “out of circle” vaporizer
- Endotracheal tubes of various sizes with functioning cuffs
- Stylet for feline intubation (student should describe or show the stylet when cat is intubated)
- Rebreathing system
- Non-rebreathing system
- Two rebreathing bags (1L-5L)(500 ml for Non Rebreathing system)
- Anesthetic/oxygen masks
- Scavenging system
- Clippers
- Stethoscope
- Esophageal stethoscope
- ECG monitor
- Pulse oximeter
- Capnometer
- Laryngoscope
- Blood pressure monitoring device
- Heating pad or other heat source

With the following items:

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

The following disposable items must be available

- Roll gauze or equivalent for tying ET tube to jaw (not 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 must include the following:
 - Patient name
 - Date
 - Signalment
 - Weight
 - Procedure
 - Special precautions (if any) or patient conditions pertinent to anesthesia
 - TPR prior to premedication and preferably at rest (that morning)
 - Preanesthetics, 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 five minutes in chart form
 - IV fluid amount every 15-30 minutes plus total at end of procedure
 - Temperature recorded every 15-30 minutes
 - Blood pressure reading recorded every five minutes
 - Pulse oximetry reading recorded every five minutes
 - ETCO₂ reading recorded every five minutes
 - Post-operative pain medication (if given), agent and amount
 - Time of extubation
 - TPR post extubation
 - Synopsis of patient response to anesthesia and recovery notes

SELECTION OF CLINICAL MENTORSHIP SUPERVISOR

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

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

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

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

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

CRITERIA HANDBOOK AND LOGBOOK

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

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

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

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

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

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

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

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

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

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

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

Videotapes, photographs, radiographs, slides, written projects, the Criteria Handbook and Logbook and any other required documentation will not be returned. These items will be

kept at Purdue as documentation of the student's performance for accreditation purposes.

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

Task Verification Forms – Each task has a form that must be completed and signed by the Clinical Mentorship Supervisor. Each form requires the patient's name and the date the task was performed. *Remember that for each task you must use different patients for each repetition of the task.*

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

COMPLETION OF THE CLINICAL MENTORSHIP

The Clinical Mentorships are designed to follow the semester format of Purdue University. However, you may complete the Clinical Mentorship and submit materials any time prior to the end of the semester.

If you are unable to complete the Clinical Mentorship by the end of the semester deadline, you must contact the course instructor for the Clinical Mentorship, the VTDL office (765) 496-65779, or Pam Phegley, BS, RVT (phegleyp@purdue.edu, 765-496-6809) to request an "Incomplete grade" for the semester. The Clinical Mentorship will be treated by the University as it would any other Incomplete graded course. See the VTDL Student Handbook for specific information on incompletes.

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

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

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

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

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

Upon successful completion of the documentation, a grade for the course will be assigned by the course instructor based upon the documented performance of the tasks.

CLINICAL MENTORSHIP TASKS

INTRODUCTION TO ESSENTIAL TASKS AND CRITERIA

Before starting each task:

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

After performing each task:

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

CLINICAL MENTORSHIP PROJECTS

INTRODUCTION TO SPECIAL PROJECTS

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

Before starting each project

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

Note: Videotaping and photographs are not for the purpose of verifying if the practice is within OSHA compliance or other government regulations. These projects are for the student's education. It may be determined by the student that the practice is not within the current

recommendations. The purpose of these projects is to make the student aware of these issues, and how to recognize the issues and develop suggestions for improvement.

There will be certain mentorships where OSHA recommendations, in regards to equipment and policies, will be facility requirements for the mentorship.

*****IMPORTANT FOR THE VM 21000 MENTORSHIP*****

Video submission for this course will include two cases: one canine and one feline. Each case will be followed from preparation through recovery.

Obtaining a History task, including video, will be submitted for one of the cases.

Written anesthesia records will be submitted for both cases.

Video to be submitted includes the following:

DOG weighing over 15 pounds (6.8 kg)

- Pre-Anesthetic Preparation of the Anesthetic Machine (Rebreathing System)
- Preparation of Supplies Prior to General Inhalant Anesthesia
- Preanesthetic Preparation of the Patient
- Induction by Injectable Agent
- Intubation
- Maintenance and Monitoring (at least 15 minutes continuous video focusing on the student, not the procedure)
- Recovery

CAT weighing less than 15 pounds (6.8 kg)

- Preanesthetic Preparation of the Anesthetic Machine (Non-Rebreathing System)
- Preparation of Supplies Prior to General Inhalant Anesthesia
- Preanesthetic Preparation of the Patient
- Induction by Injectable Agent
- Intubation
- Maintenance and Monitoring (at least 15 minutes continuous video focusing on the student, not the procedure)
- Recovery

NOTE: Tasks are separated in the logbook for ease of evaluation as well as clarity for the student. In reality, each task will be part of one ongoing procedure. All criteria for each task must be shown clearly on the video submission. The student will narrate on the video, explaining what they are doing and why, as well as what they are seeing, hearing, feeling, etc. in their patient.

Required equipment and monitors must be shown being set up by the student and in use by the student in the videos. The student should be hands-on when monitoring, and use equipment to check their readings of heart rate, etc.

1. OBTAIN A HISTORY PRIOR TO ANESTHESIA

Goal: To obtain complete and accurate information from a client by asking specific questions about the pet prior to the patient receiving general anesthesia

Description: The student will question a client about the past and current condition of the animal that is to receive general anesthesia, 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. 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 or reason for visit before asking additional directed questions

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

The student asked specific questions regarding the following:

- When the patient last had food and water
- Did the patient have access to other sources of food and water
- Has the patient ever received anesthetic agents before (either sedatives or general anesthetics)
- If so, how did the patient recover from them
- Any reactions to medications
- How has the patient been acting lately

The student asked a set of general health questions

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

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 for confirmation that the student's interpretation of what the client said or meant is correct

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: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification form for the history taking prior to anesthesia skill, signed by Clinical Mentorship supervisor
2. Either the original written record of the history for each patient 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. The written history corresponding to the video must be signed by the student and Clinical Mentorship supervisor and submitted with the video.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

Example History Sheet for Submission

Client: _____ Patient: _____

Date: _____

Reason needing General Anesthesia: _____

History:

History obtained by: _____
Student's Name Printed

I attest that the student obtained this history:

Clinical Mentorship Supervisor Signature

2. PRE-ANESTHETIC PREPARATION OF THE ANESTHETIC MACHINE (CANINE)

Goal: To prepare an anesthetic machine for use on a canine patient receiving inhalant anesthesia through a rebreathing system

Description: The student will prepare the anesthetic machine for use on a canine patient that is to receive inhalant anesthesia. This will be done prior to the case.

Criteria: The student checked the main oxygen source to verify there was enough oxygen to complete the procedure.

The student turned the oxygen on and verified the oxygen pressure gauge was working and the flow meter was functioning by turning on the flow meter temporarily to watch the ball move to the desired oxygen flow.

The student checked the soda lime canister to ensure the granules were fresh according to the practice standard operating procedure.

The student checked the vaporizer to make sure there was inhalant agent in the vaporizer and that it was at least half full and the dial moved smoothly.

The student attached the proper breathing system and breathing bag for the patient being anesthetized.

The student traced the flow from the oxygen source, through the machine, to the patient, from the patient and back to the scavenge system to ensure all connections were correctly assembled, narrating with *correct names for all parts of the machine*.

The student properly performed a low-pressure leak test to ensure all connections were secure and no leaking of gas would occur.

The student opened the pop-off valve to ensure it was not stuck or closed prior to anesthesia.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification form for the Pre-anesthetic Preparation of Anesthetic Machine skill, signed by Clinical Mentorship supervisor.
2. One video of the student setting up and checking the machine with the rebreathing system. The student will show close up views of the gauges during checking so the instructor can verify no leaks were present. The student should also provide a narrative of steps performed while videoing.
3. Written SOP for the clinic for sodalime maintenance.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

3. PREPARATION OF SUPPLIES PRIOR TO GENERAL INHALANT ANESTHESIA (CANINE)

- Goal:** To prepare anesthetic supplies prior to general anesthesia.
- Description:** The student will prepare all supplies needed for general inhalant anesthesia to ensure that materials needed for induction and maintenance of anesthesia are available and ready.
- Criteria:**
- The student chose at least 2 endotracheal tubes of appropriate size for the patient to be anesthetized, checked the cuffs for leaks, and placed them at the induction area.
 - The student placed a piece of non-stretch gauze near the endotracheal tubes for use in tying the tube. The piece was of adequate length to tie around the tube and the jaw.
 - The student placed a syringe near the endotracheal tubes for filling the cuff after intubation.
 - The student placed a syringe of heparinized saline at or near the induction site to verify intravenous catheter patency.
 - The student prepared an intravenous catheter of appropriate size for the patient being anesthetized. While leaving the catheter in the package, the student opened the catheter, removed the cap, flushed the catheter with heparinized saline and placed at or near the induction area.
 - The student provided tape for securing the catheter to the leg at or near the induction area.
 - The student placed clippers and aseptic preparation materials at or near the induction area for clipping and prepping the intravenous catheter site.
 - The student provided ophthalmic lubricating ointment at or near the induction area to lubricate the eye after induction.
 - The student calculated oxygen flow rate prior to induction.
 - The student provided an oxygen mask near the induction area to provide oxygen or inhalant agent prior to intubation if needed.
 - The student had a stethoscope and other monitoring devices (depending on practice standard operating procedure) ready for use at the induction area and verified they were in working order.
 - The student located and made others aware of the location of the emergency supplies in case they are needed during the procedure.
 - The student provided towels, blankets and other methods for keeping the patient warm at the anesthesia area.
 - The student set up intravenous fluids with an administration set at the induction area for use during anesthesia.
 - The student prepared the anesthesia record and placed it at the area for induction.

The student prepared the anesthesia induction agent for the canine case so it was ready to administer at time of induction, or prepared the non-rebreathing system with a mask for the feline case.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Preparation of Supplies Prior to General Inhalant Anesthesia skill, signed by Clinical Mentorship supervisor.
2. One video submission showing the student preparing the supplies for a canine case. The video should highlight the area that will be used for induction and clearly show all of the supplies mentioned in the criteria. A narrative should be provided while videoing. The videos should include a close up on checking of the endotracheal tube cuffs.
3. Written calculation of oxygen flow rate for this patient.
4. Written calculation of IV fluid rate for this patient.
5. Written calculation of induction agent for this patient.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

4. PRE-ANESTHETIC PREPARATION OF THE PATIENT FOR ANESTHESIA (CANINE)

- Goal:** The student will evaluate the patient prior to administration of pre-anesthetic or induction agents to ensure the patient is prepared and in appropriate condition for anesthesia.
- Description:** The student will review the patient chart and pertinent lab work, perform a physical exam, and review the procedure to be performed prior to general anesthesia. This will also allow the student to prepare for potential emergencies or special patient considerations prior to general anesthesia.
- Criteria:** The student identified the patient's chart and reviewed it to ensure that the appropriate laboratory tests had been performed as defined by the practice standard operating procedure.
- The veterinarian was consulted regarding results prior to premedication or induction of general anesthesia.
- The student performed a physical exam prior to administering any anesthetic premedications. Any abnormalities were brought to the attention of the veterinarian.
- The student reviewed the procedure to be performed and the patient's condition, and prepared according to the facility SOP for premedication, general anesthesia and maintenance.
- The student calculated the dosages of preanesthetic agents as prescribed by the veterinarian, and had the doses checked by the mentor prior to administration.
- The student administered the approved premedications to the patient at least 15-30 minutes prior to induction of general anesthesia.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Pre-anesthetic Preparation of the Patient for Anesthesia skill, signed by the Clinical Mentorship supervisor.
2. One video submission showing the student evaluating a canine patient as defined in the criteria. The student will also submit a copy of the anesthetic record for the patients being videoed. This record will include TPR, signalment, procedure and premedication agents with doses being administered. If laboratory tests were ordered, those results should accompany the anesthetic record.
3. Facility SOP for laboratory tests prior anesthesia.
4. Facility SOP for premedications.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

5. INDUCTION BY INJECTABLE AGENT (CANINE)

Goal: To induce anesthesia in a patient using an injectable anesthetic agent to facilitate intubation.

Description: The student will use one of the approved induction agents to induce a state of general anesthesia facilitating intubation.

NOTE: *This task description ends prior to intubation. Actual videoing and performing this task will include intubation, which is a separate task. It is recommended that you read both this task and the intubation task before performing them.*

Criteria: The student checked the syringe to verify the amount drawn up in the syringe matched the calculations.

The student removed any air bubbles in the syringe

The student flushed the patient's catheter with heparinized saline to ensure its patency

The student checked the work area one last time to make sure all materials were ready

The student, with an assistant holding the patient, administered the induction agent according to practice standard protocol

The student attempted to open the patient's mouth to determine if more induction agent was needed to intubate

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Induction by Injectable Prior to Intubation skill, signed by the Clinical Mentorship supervisor.
2. One video submission showing the student inducing anesthesia in a dog, with an injectable agent.
3. The student will provide a narrative of the steps performed including the induction agent and how it is being administered (speed, volume).

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

6. INTUBATION OF A DOG

Goal: The student will intubate a dog without injury to the trachea or other oral structures, *using a laryngoscope*

Description: The student will intubate a dog after induction of general anesthesia and verify correct placement of the endotracheal tube.

Criteria: The student waited until the assistant opened the mouth and the dog did not resist opening of the mouth.

The student chose an appropriate endotracheal tube, and used the tube or the laryngoscope to push the tongue out to the side of the mouth so the assistant could grasp it with a gauze sponge and extend the tongue over the lower canine teeth. The assistant or student did not place their hands in the dog's mouth at any time.

The student visualized the opening of the trachea and placed the endotracheal tube in the trachea.

The student palpated the neck to verify that only one tubular structure existed and the endotracheal tube was properly placed in the trachea.

The student palpated at the thoracic inlet, moving the tube gently in and out, to verify that the tip of the endotracheal tube was not beyond the bifurcation.

The student attached the breathing tubes, and used roll gauze to secure the endotracheal tube.

The student bagged the patient to 20cm H₂O, listening for a leak around the cuff. If needed, the student inflated the cuff until no leak was heard when inflating the lungs to a pressure of 20cm H₂O. A small leak should be heard when inflating the lungs past 20cm H₂O.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for Intubation of a Dog skill, signed by the Clinical Mentorship supervisor.
2. One video showing dog intubation. The video should contain all steps outlined in the criteria.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

7. MAINTENANCE AND MONITORING OF GENERAL ANESTHESIA (CANINE)

Goal: The student will maintain a state of general anesthesia while monitoring the patient's vital signs, reflexes and overall depth of anesthesia *for a period of at least 30 minutes*. The student will keep parameters within normal limits for the particular breed/species, and minimize patient discomfort during the procedure.

Description: Following induction and intubation, the student will monitor anesthetic gas concentration and oxygen flow rate, patient vital signs and reflexes, and maintain those values within normal limits. The anesthetic episode should last at least 30 minutes.

Criteria: The student set the oxygen flow rate according to the patient's weight and requirement based on the breathing system.

The student adjusted the vaporizer setting to 1.5-3% based on the patient's response to the induction agent.

The student verified that the patient was breathing and recorded a heart rate before proceeding further to ensure the patient was stable following induction and intubation.

The student placed an esophageal stethoscope into the esophagus and secured it to the endotracheal tube (not mouth) in order to facilitate quick removal if an emergency arose.

The student attached the ECG, pulse oximeter, blood pressure monitor, and capnometer according to the practice standard operating procedure.

The student attached intravenous fluids to the catheter and set the rate for surgical maintenance as ordered by the veterinarian.

The student manually squeezed the rebreathing bag every 1-2 minutes, regardless of the patient's respiratory rate, to 15-20 cm H₂O.

The student recorded values including heart rate, respiratory rate, SPO₂, blood pressure, ETCO₂, and anesthetic gas concentration on the anesthesia record every 5 minutes (every 15-30 minutes for temperature and IV fluids). The student brought abnormal readings to the attention of the veterinarian.

The student checked the patient's reflexes (palpebral, pedal, jaw tone, eye position, depending on accessibility) to ensure the patient was neither too deep nor too light, and brought abnormal responses to the attention of the veterinarian.

The student observed the patient's respiratory function by observing the rebreathing bag to count rate and observing chest excursions to ensure adequate depth of each breath.

The student maintained the anesthetic gas concentration at the lowest level possible to achieve general anesthesia.

The student decreased the anesthetic concentration near the end of the procedure.

The student narrated throughout the procedure, explaining what they were doing and why, as well as patient parameter changes and adjustments to anesthesia.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Maintenance and Monitoring of General Anesthesia skill, signed by the Clinical Mentorship supervisor.
2. One video of maintenance and monitoring of a dog. The video must show at least 15 minutes of uninterrupted video of what the student is doing (not the procedure). The student will provide a narrative of the steps performed, including anesthesia machine settings and changes during the procedure.
3. Clinic SOP for monitoring anesthetized patients.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

8. RECOVERY FROM GENERAL ANESTHESIA (CANINE)

- Goal:** The student will monitor the recovery of a patient from general anesthesia.
- Description:** The student will monitor the recovery of a patient from general anesthesia following an anesthetic episode that lasts **at least 30 minutes**. The patient will be closely monitored until extubation and will be periodically monitored until it is able to sit or stand unsupported.
- Criteria:**
- The student turned off the inhalant anesthetic gas and administered oxygen for a period of 2-5 minutes to scavenge waste gases prior to disconnecting the breathing circuit.
- The student inspected the oral cavity to insure it was free of secretions and/or objects that could impede respiration.
- The student maintained the patient's head in a normal position.
- The student deflated the endotracheal tube cuff and untied it from the patient to facilitate quick removal.
- The student removed the esophageal stethoscope and other monitoring devices prior to the patient awakening from general anesthesia.
- The student removed the endotracheal tube when the patient began to swallow (2-3 times) without stimulation.
- The student observed the patient following extubation for signs of respiratory distress and/or cyanosis, and informed the veterinarian if abnormalities were noted. If abnormalities were noted, the student administered oxygen while awaiting the arrival of the veterinarian.
- The student recorded heart rate, respiratory rate and temperature following extubation. Values were recorded **every 5 minutes for the first 15 minutes following extubation**. Abnormalities were brought to the attention of the veterinarian.
- The student used available means to elevate body temperature to normal. The student recorded the patient's temperature every 30 minutes to insure the patient did not become overheated. Heating methods were discontinued once the patient's temperature reached 100 degrees Fahrenheit.
- The student placed the patient (if recumbent) in the opposite recumbency as it was during the procedure to assist in ventilating the previously "down" lung field.
- If indicated, IV fluids were continued and the rate and catheter site monitored.
- The patient was monitored for signs of pain and analgesics administered as needed on the orders of a DVM, and recorded in the patient record.
- The patient was monitored closely for respiratory depression if narcotic analgesics were administered.
- The student recorded recovery parameters and notes at the bottom of the anesthetic record to become a part of the patient's permanent record.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for Recovery from General Anesthesia skill, signed by the Clinical Mentorship supervisor.
2. One video of recovery of a canine case. The student will provide a narrative of steps performed and will verbally state what is seen, heard and felt as they continue to monitor the patient.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

9. PRE-ANESTHETIC PREPARATION OF THE ANESTHETIC MACHINE (FELINE)

Goal: To prepare an anesthetic machine for use on a patient receiving inhalant anesthesia through a non-rebreathing system.

Description: The student will prepare the anesthetic machine for use on a feline patient that is to receive inhalant anesthesia following induction. This will be done prior to the case.

Criteria: The student checked the main oxygen source to verify there was enough oxygen to complete the procedure.

The student turned the oxygen on and verified the oxygen pressure gauge was working and the flow meter was functioning by turning on the flow meter temporarily to watch the ball move to the desired oxygen flow.

The student checked the vaporizer to make sure there was inhalant agent in the vaporizer and that it was at least half full and the dial moved smoothly.

The student attached the non-rebreathing system for the patient being anesthetized.

The student traced the flow from the oxygen source through the machine to the patient, from the patient and back to the scavenge system to ensure all connections were correctly assembled, narrating with correct names for all parts of the machine.

The student properly performed a low-pressure leak test to ensure all connections were secure and no leaking of gas would occur.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification form for the Pre-Anesthetic Preparation of Anesthetic Machine skill, signed by Clinical Mentorship supervisor.
2. One video of the student setting up and checking the machine with the non-rebreathing system. The student will show close up views of the bag during checking so the instructor can verify no leaks were present. The student should also provide a narrative of steps performed while videoing.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

10. PREPARATION OF SUPPLIES PRIOR TO GENERAL INHALANT ANESTHESIA (FELINE)

Goal: To prepare anesthetic supplies prior to general anesthesia.

Description: The student will prepare all supplies needed for general inhalant anesthesia to ensure that materials needed for induction and maintenance of anesthesia are available and ready.

Criteria: The student chose at least 2 endotracheal tubes of appropriate size for the patient to be anesthetized, checked the cuffs for leaks, and placed them at the induction area.

The student prepared lidocaine spray/gel and a stylet to aid in intubation.

The student placed a piece of non-stretch gauze near the endotracheal tubes for use in tying the tube. The piece was of adequate length to tie around the tube and the jaw.

The student placed a syringe near the endotracheal tubes for filling the cuff after intubation.

The student placed a syringe of heparinized saline at or near the induction site to verify intravenous catheter patency.

The student prepared an intravenous catheter of appropriate size for the patient being anesthetized. While leaving the catheter in the package, the student opened the catheter, removed the cap, flushed the catheter with heparinized saline and placed at or near the induction area.

The student provided tape for securing the catheter to the leg at or near the induction area.

The student placed clippers and aseptic preparation materials at or near the induction area for clipping and prepping the intravenous catheter site.

The student provided ophthalmic lubricating ointment at or near the induction area to lubricate the eye after induction.

The student calculated oxygen flow rate prior to induction.

The student provided an oxygen mask near the induction area to provide oxygen or inhalant agent prior to intubation if needed.

The student had a stethoscope and other monitoring devices (depending on practice standard operating procedure) ready for use at the induction area and verified they were in working order.

The student located and made others aware of the location of the emergency supplies in case they are needed during the procedure.

The student provided towels, blankets and other methods for keeping the patient warm at the anesthesia area.

The student set up intravenous fluids with an administration set at the induction area for use during anesthesia.

The student prepared the anesthesia record and placed it at the area for induction.

The student prepared the anesthesia induction agent for the canine case so it was ready to administer at time of induction, or prepared the non-rebreathing system with a mask for the feline case.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Preparation of Supplies Prior to General Inhalant Anesthesia skill, signed by Clinical Mentorship supervisor.
2. One video submission showing the student preparing the supplies for a feline case. The video should highlight the area that will be used for induction and clearly show all of the supplies mentioned in the criteria. A narrative should be provided while videoing. The videos should include a close up on checking of the endotracheal tube cuffs.
3. Written calculation of oxygen flow rate for this patient.
4. Written calculation of IV fluid rate for this patient.
5. Written calculation of induction agent for this patient.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

11. PRE-ANESTHETIC PREPARATION OF THE PATIENT FOR ANESTHESIA (FELINE)

Goal: The student will evaluate the patient prior to administration of pre-anesthetic or induction agents to ensure the patient is prepared and in appropriate condition for anesthesia.

Description: The student will review the patient chart and pertinent lab work, perform a physical exam, and review the procedure to be performed prior to general anesthesia. This will also allow the student to prepare for potential emergencies or special patient considerations prior to general anesthesia.

Criteria: The student identified the patient's chart and reviewed it to ensure that the appropriate laboratory tests had been performed as defined by the practice standard operating procedure.

The veterinarian was consulted regarding results prior to premedication or induction of general anesthesia.

The student performed a physical exam prior to administering any anesthetic premedications. Any abnormalities were brought to the attention of the veterinarian.

The student reviewed the procedure to be performed and the patient's condition, and prepared according to the facility SOP for premedication, general anesthesia and maintenance.

The student calculated the dosages of preanesthetic agents as prescribed by the veterinarian, and had the doses checked by the mentor prior to administration.

The student administered the approved premedications to the patient at least 15-30 minutes prior to induction of general anesthesia.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Pre-anesthetic Preparation of the Patient for Anesthesia skill, signed by the Clinical Mentorship supervisor.
2. One video submission showing the student evaluating a feline patient as defined in the criteria. The student will also submit a copy of the anesthetic record for the patients being videoed. This record will include TPR, signalment, procedure and premedication agents with doses being administered. If laboratory tests were ordered, those results should accompany the anesthetic record.
3. Facility SOP for laboratory tests prior anesthesia.
4. Facility SOP for premedications.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

12. INDUCTION BY INJECTABLE AGENT (FELINE)

Goal: To induce anesthesia in a patient using an injectable anesthetic agent to facilitate intubation.

Description: The student will use one of the approved induction agents to induce a state of general anesthesia facilitating intubation.

NOTE: *This task description ends prior to intubation. Actual videoing and performing this task will include intubation, which is a separate task. It is recommended that you read both this task and the intubation task before performing them.*

Criteria: The student checked the syringe to verify the amount drawn up in the syringe matched the calculations.

The student removed any air bubbles in the syringe

The student flushed the patient's catheter with heparinized saline to ensure its patency

The student checked the work area one last time to make sure all materials were ready

The student, with an assistant holding the patient, administered the induction agent according to practice standard protocol

The student attempted to open the patient's mouth to determine if more induction agent was needed to intubate

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Induction by Injectable Prior to Intubation skill, signed by the Clinical Mentorship supervisor.
2. One video submission showing the student inducing anesthesia in a cat, with an injectable agent.
3. The student will provide a narrative of the steps performed including the induction agent and how it is being administered (speed, volume).

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

13. INTUBATION OF A CAT

Goal: The student will intubate a cat without injury to the trachea or other oral structures, *using a laryngoscope.*

Description: The student will intubate a cat after induction of general anesthesia and will verify correct placement.

Criteria: The student waited until the assistant opened the mouth and the cat did not resist opening of the mouth to apply lidocaine to the larynx.

The student chose an endotracheal tube, placed a stylet in the tube and used the tube or the laryngoscope to push the tongue out to the side of the mouth so the assistant could grasp it with a gauze sponge and extend the tongue over the lower canine teeth. The assistant or student did not place their hands in the mouth at any time.

The student visualized the opening of the trachea, placed the tube in the trachea without force, and pulled the stylet from the tube.

The student palpated the neck to verify that only one tubular structure existed and the endotracheal tube was properly placed in the trachea.

The student palpated at the thoracic inlet, moving the tube gently in and out, to verify that the tip of the endotracheal tube was not beyond the bifurcation.

The student attached the non-rebreathing system, and used roll gauze to tie the endotracheal tube behind the cat's head, and behind both ears.

The student bagged the patient, listening for a leak around the cuff. If needed, the student inflated the cuff until no leak was heard when inflating the lungs.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Intubation of a Cat skill, signed by the Clinical Mentorship supervisor.
2. A video showing cat intubation. The video should contain all steps outlined in the criteria.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

14. MAINTENANCE AND MONITORING OF GENERAL ANESTHESIA (FELINE)

Goal: The student will maintain a state of general anesthesia while monitoring the patient's vital signs, reflexes and overall depth of anesthesia *for a period of at least 30 minutes*. The student will keep parameters within normal limits for the particular breed/species, and minimize patient discomfort during the procedure.

Description: Following induction and intubation, the student will monitor anesthetic gas concentration and oxygen flow rate, patient vital signs and reflexes, and maintain those values within normal limits. The anesthetic episode should last at least 30 minutes.

Criteria: The student set the oxygen flow rate according to the patient's weight and requirement based on the breathing system.

The student adjusted the vaporizer setting to 1.5-3% based on the patient's response to the induction agent.

The student verified that the patient was breathing and recorded a heart rate before proceeding further to ensure the patient was stable following induction and intubation.

The student placed an esophageal stethoscope into the esophagus and secured it to the endotracheal tube (not mouth) in order to facilitate quick removal if an emergency arose.

The student attached the ECG, pulse oximeter, blood pressure monitor, and capnometer according to the practice standard operating procedure.

The student attached intravenous fluids to the catheter and set the rate for surgical maintenance as ordered by the veterinarian.

The student manually squeezed the rebreathing bag every 1-2 minutes, regardless of the patient's respiratory rate.

The student recorded values including heart rate, respiratory rate, SPO₂, blood pressure, ETCO₂, and anesthetic gas concentration on the anesthesia record every 5 minutes (every 15-30 minutes for temperature and IV fluids). The student brought abnormal readings to the attention of the veterinarian.

The student checked the patient's reflexes (palpebral, pedal, jaw tone, eye position, depending on accessibility) to ensure the patient was neither too deep nor too light, and brought abnormal responses to the attention of the veterinarian.

The student observed the patient's respiratory function by observing the rebreathing bag to count rate and observing chest excursions to ensure adequate depth of each breath.

The student maintained the anesthetic gas concentration at the lowest level possible to achieve general anesthesia.

The student decreased the anesthetic concentration near the end of the procedure.

The student narrated throughout the procedure, explaining what they were doing and why, as well as patient parameter changes and adjustments to anesthesia.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Maintenance and Monitoring of General Anesthesia skill, signed by the Clinical Mentorship supervisor.
2. One video of maintenance and monitoring of a cat. The video must show at least 15 minutes of uninterrupted video of what the student is doing (not the procedure). The student will provide a narrative of the steps performed, including anesthesia machine settings and changes during the procedure.
3. Clinic SOP for monitoring anesthetized patients.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

15. RECOVERY FROM GENERAL ANESTHESIA (FELINE)

- Goal:** The student will monitor the recovery of a patient from general anesthesia.
- Description:** The student will monitor the recovery of a patient from general anesthesia following an anesthetic episode that lasts **at least 30 minutes**. The patient will be closely monitored until extubation and will be periodically monitored until it is able to sit or stand unsupported.
- Criteria:**
- The student turned off the inhalant anesthetic gas and administered oxygen for a period of 2-5 minutes to scavenge waste gases prior to disconnecting the breathing circuit.
 - The student inspected the oral cavity to insure it was free of secretions and/or objects that could impede respiration.
 - The student maintained the patient's head in a normal position.
 - The student deflated the endotracheal tube cuff and untied it from the patient to facilitate quick removal.
 - The student removed the esophageal stethoscope and other monitoring devices prior to the patient awakening from general anesthesia.
 - The student removed the endotracheal tube when the patient began to swallow (2-3 times) without stimulation.
 - The student observed the patient following extubation for signs of respiratory distress and/or cyanosis, and informed the veterinarian if abnormalities were noted. If abnormalities were noted, the student administered oxygen while awaiting the arrival of the veterinarian.
 - The student recorded heart rate, respiratory rate and temperature following extubation. Values were recorded **every 5 minutes for the first 15 minutes following extubation**. Abnormalities were brought to the attention of the veterinarian.
 - The student used available means to elevate body temperature to normal. The student recorded the patient's temperature every 30 minutes to insure the patient did not become overheated. Heating methods were discontinued once the patient's temperature reached 100 degrees Fahrenheit.
 - The student placed the patient (if recumbent) in the opposite recumbency as it was during the procedure to assist in ventilating the previously "down" lung field.
 - If indicated, IV fluids were continued and the rate and catheter site monitored.
 - The patient was monitored for signs of pain and analgesics administered as needed on the orders of a DVM, and recorded in the patient record.
 - The patient was monitored closely for respiratory depression if narcotic analgesics were administered.
 - The student recorded recovery parameters and notes at the bottom of the anesthetic record to become a part of the patient's permanent record.

Number of Times Task Needs to be Successfully Performed: 1

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for Recovery from General Anesthesia skill, signed by the Clinical Mentorship supervisor.
2. One video of recovery of a feline case. The student will provide a narrative of steps performed and will verbally state what is seen, heard and felt as they continue to monitor the patient.

Student Name: _____

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

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

16. ANESTHESIA RECORD PROCEDURES (CANINE AND FELINE)

Goal: The student will record various parameters during general anesthesia on an anesthetic record. This is a legal document that will be a permanent part of the patient's record.

Description: The student will record various parameters outlined in the criteria during general anesthesia. This record will be part of the patient's permanent record.

Criteria: The anesthetic record included the following information:

- Patient name
- Date
- Signalment
- Weight
- Procedure
- Special precautions or patient conditions pertinent to anesthesia
- TPR prior to premedication (taken same day as procedure), preferably at rest
- Preanesthetic, induction agent and any other agents administered in the pre- or peri anesthetic period, including the dose given, and the time
- Heart rate, respiratory rate, SPO₂, blood pressure, ETCO₂, and anesthetic gas concentration recorded every 5 minutes on the anesthesia record
- Temperature recorded every 15-30 minutes
- IV fluid volume every 15-30 minutes plus total at end of procedure
- Notes pertaining to major anesthetic or surgical events
- Post-operative pain medication (if given) agent and amount
- Time of beginning and end of anesthesia, the procedure, and extubation
- Synopsis of patient recovery and overall anesthetic episode
- TPR – post extubation and every 5 minutes for 15 minutes or until normal

Black or blue ink was used, and the record was legible and able to be interpreted

Number of Times Task Needs to be Successfully Performed: 1 dog, 1 cat

Materials Submitted for Evaluation and Verification:

1. Task Verification Form for the Anesthesia Record Procedure skill, signed by the Clinical Mentorship supervisor.
2. Submit the written anesthesia record for the dog and the cat used in the videos. The name of the patient will be announced on the video and should correspond to the anesthetic record.

Student Name: _____

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

Patient Name: _____ **Date:** _____

Patient Name: _____ **Date:** _____

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

Signature of Clinical Mentorship Supervisor: _____

Purdue University VTH Anesthesia Record

Patient Label	Date:		Pre-op Diagnosis:				Page of				
	Weight: kg		lbs		Pre-anesthetic Drug		Dose Admin.	Route	Time		
	PCV	TP	MM				mg				
	GLU	BUN	CRT				mg				
	HR	RR	ASA		Pre-op Effect		none	slight	moderate	profound	adverse
	Temperature		1 2 3 4 5 E		Induction Drug		Dose Admin.	Route	Time		
	Record Reviewed By:		Procedure				mg				
	Anesthesiologist:		Relevant Clinical Data				mg				
	Surgeons:						mg				
	Anesthetist:						mg				

Time	0	0	1	5	3	0	4	5	0	0	1	5	3	0	4	5	0	0	1	5	3	0	4	5	0	0	Tube Size: mm							
IV Sol.																													System	Agent				
Temperature:																													Rebreathing	Q	Sevoflurane	Q		
Agent	7%																												Non-rebreathing	Q	Isoflurane	Q		
Anesthesia	6%																												Mechanical	Q	Halothane	Q		
	5%																												O2: U/min					
	4%																												Body Position					
Anesth. Depth	3%																												Q Lateral:	Right Q	Left Q			
	2%																												Q Sternal:	Q Dorsal				
	1%																												Q Head Up:	Q Head Down				
	0%																												Monitoring					
Codes	220																												ECG	Q	Temp.	Q	ETCO2	Q
Begin End	200																												NIBP	Q	IBP	Q	SPO2	Q
Spon. Resp	S---S																												Total Anesth. Time:					
Rad.	R---7																												Total Surgery Time:					
Anesth.	A---@																												Extubation Time:					
Surg.	O---																												Standing Time:					
Cont. Vent.	C---C																												Recovery Score:					
SPO2																													Post-op	Total Fluids				
HR	•																												Temp:					
RR	o																												HR:					
ETCO2	Q																												RR:					
B.P. Sys	v																												Regional Anesthesia:					
B.P. Diast.	^																																	
B.P. Mean	+																																	

Blood Gas:	#1	#2	#3	#4	#5	REMARKS:
Time:						
pH:						
pCO2:						
pO2:						
HCO3:						
tCO2:						
BE:						
O2 Sat:						

Please check box: Q arterial Q venous

Purdue University VTH Anesthesia Record

Patient Label	Date:		Pre-op Diagnosis:				Page of																					
	Weight: kg		lbs		Pre-anesthetic Drug		Dose Admin.	Route	Time																			
	PCV	TP	MM				mg																					
	GLU	BUN	CRT				mg																					
	HR	RR	ASA		Pre-op Effect		none	slight	moderate	profound	adverse																	
	Temperature		1 2 3 4 5 E		Induction Drug		Dose Admin.	Route	Time																			
Record Reviewed By:		Procedure				mg																						
Anesthesiologist:		Relevant Clinical Data				mg																						
Surgeons:						mg																						
Anesthetist:						mg																						
Time	0	0	1	5	3	0	4	5	0	0	1	5	3	0	4	5	0	0	1	5	3	0	4	5	0	0	Tube Size: mm	
IV Sol.																									System		Agent	
Temperature:																									Rebreathing Q		Sevoflurane Q	
Agent																									Non-rebreathing Q		Isoflurane Q	
Anesthesia																									Mechanical Q		Halothane Q	
Anesth. Depth																									O2: L/min		Body Position	
Codes																									Q Lateral: Right Q Left Q		Q Sternal Q Dorsal	
Spon. Resp																									Q Head Up Q Head Down		Monitoring	
Rad.																									ECG Q Temp. Q ETCO2 Q		NIBP Q IBP Q SPO2 Q	
Anesth.																									Total Anesth. Time:		Total Surgery Time:	
Surg.																									Extubation Time:		Standing Time:	
Cont. Vent.																									Recovery Score:		Post-op Total Fluids	
SPO2																									Temp:		HR:	
HR																									RR:		Regional Anesthesia:	
RR																												
ETCO2																												
B.P. Sys																												
B.P. Diast.																												
B.P. Mean																												
Blood Gas:	#1	#2	#3	#4	#5	REMARKS:																						
Time:																												
pH:																												
pCO2:																												
pO2:																												
HCO3:																												
tCO2:																												
BE:																												
O2 Sat:																												
Please check box: Q arterial Q venous																												

Purdue University VTH Anesthesia Record

Patient Label	Date:		Pre-op Diagnosis:				Page of																								
	Weight: kg		lbs		Pre-anesthetic Drug		Dose Admin.	Route	Time																						
	PCV	TP	MM				mg																								
	GLU	BUN	CRT				mg																								
	HR	RR	ASA		Pre-op Effect		none	slight	moderate	profound	adverse																				
	Temperature		1 2 3 4 5 E		Induction Drug		Dose Admin.	Route	Time																						
Record Reviewed By:		Procedure				mg																									
Anesthesiologist:		Relevant Clinical Data				mg																									
Surgeons:						mg																									
Anesthetist:						mg																									
Time	0	0	1	5	3	0	4	5	0	0	1	5	3	0	4	5	0	0	1	5	3	0	4	5	0	0	Tube Size:	mm			
IV Sol.																									System		Agent				
Temperature:																									Rebreathing	Q	Sevoflurane	Q			
Agent	7%																									Non-rebreathing	Q	Isoflurane	Q		
Anesthesia	6%																									Mechanical	Q	Halothane	Q		
	5%																									O2:		L/min			
	4%																									Body Position					
	3%																									Q Lateral:	Right Q	Left Q			
	2%																									Q Sternal	Q Dorsal				
	1%																									Q Head Up	Q Head Down				
	0%																									Monitoring					
Anesth. Depth	light																									ECG	Q	Temp.	Q	ETCO2	Q
	medium																									NIBP	Q	IBP	Q	SPO2	Q
	deep																									Total Anesth. Time:					
Codes	220																									Total Surgery Time:					
Begin	End																									Extubation Time:					
Spon. Resp	S---S																									Standing Time:					
Rad.	R---7																									Recovery Score:					
Anesth.	A---@																									Post-op	Total Fluids				
Surg.	O---																									Temp:					
Cont. Vent.	C---C																									HR:					
SPO2	80																									RR:					
HR	•																									Regional Anesthesia:					
RR	o																														
ETCO2	Q																														
B.P. Sys	V																														
B.P. Diast.	^																														
B.P. Mean	+																														
Blood Gas:	#1	#2	#3	#4	#5	REMARKS:																									
Time:																															
pH:																															
pCO2:																															
pO2:																															
HCO3:																															
tCO2:																															
BE:																															
O2 Sat:																															
Please check box: Q arterial Q venous																															

17. Completion of One Non-Routine Anesthetic Episode Project

The student will anesthetize a patient for a non-routine anesthetic episode that will span at least 30 minutes. The goal of this task is for the student to gain experience in anesthetizing a patient that is higher risk and would be more challenging to anesthetize. Contact the mentorship supervisor if you have any questions on the appropriateness of a certain case.

Examples would be:

- Geriatric dog or cat receiving a dental prophylaxis or surgical procedure.
- Brachycephalic breed (i.e. – Bulldog, Boston Terrier) undergoing anesthesia
- Dog or cat with kidney or liver disease undergoing a surgical procedure

The student must provide the following information, written in their own words:

- Signalment
- History and Physical exam findings
- Results of any additional testing done prior to anesthesia (hematology, etc.) This may be photocopied and attached
- Procedure to be performed and why patient is receiving this procedure. The student will also describe what aspects of the procedure may be particularly risky to the patient, and how the student will respond.
- Anesthetic plan (including drugs, monitoring and positioning)
- Synopsis of procedure (describe induction, maintenance and recovery)
- A copy of the anesthetic record
- Self-assessment of student performance, including aspects that went well/as planned, as well as aspects that need improvement or that the student would do differently, given another opportunity.

18. Emergency Drugs Project

- a. Choose five emergency drugs from the list provided below, available in your clinic, that might be used during an anesthetic emergency and address the following for each:
- Specific use/purpose of the drug (in what situation would it be used?)
 - Systemic effects of the drug
 - Contraindications/situations in which to avoid use of the drug
 - Cite references used: Title, Author, page numbers, or web address

Choose five of the following emergency drugs that are available in your clinic:

Atropine	Epinephrine	Lidocaine
Dopamine	Sodium bicarbonate	Glycopyrrolate
Doxapram	Dexamethasone	Prednisolone sodium succinate
Diazepam	Naloxone	Dobutamine
Dopamine	Vasopressin	Furosemide
Mannitol	Atipamezole	

- b. What is your practice standard operating procedure regarding emergency drugs?
- Is there a central location (i.e.: a tackle box, drawer, cabinet)?
 - Are the agents inventoried on a regular basis?
 - How often are the agents checked for outdates?
 - How could the current system be improved? Offer specific suggestions to improve efficiency in an emergency, and to better manage emergency drugs.