

The Academy of Veterinary Technicians in Clinical Practice



Application Packet, Part 2

Small Animal

FELINE

2018 Case Year

AVTCP Small Animal (FELINE)

CASE LOGS – Additional Instructions/Guidelines

- A body condition score (BCS) is required in each case log entry. A 9-point BCS scale is recommended, but 5-point is acceptable.
- A numerical pain score is required in each case log entry. The use of the Glasgow Pain Scoring Chart for Felines is strongly recommended.

CASE REPORTS – Additional Instructions/Guidelines

- A body condition score (BCS) is required in each case report. A 9-point BCS scale is recommended, but 5-point is acceptable.
- A numerical pain score is required in each case report. The use of the Glasgow Pain Scoring Chart for Felines is strongly recommended.
- The appropriate use of pictures to complement your case report is encouraged, but not required. If images are included, they are considered supplementary material and are not to be included as part of the five-page maximum.

AVTCP Small Animal (FELINE)

KNOWLEDGE LIST

Knowledge of disease processes should include: causes, symptoms, modes of transmission, proper diagnosis, treatment options and prognosis.

Hospital Management skills not pertaining to practice management.

THE HOSPITAL

Hospital/Office Procedures

A limited role in many hospitals may occur due to practice management. One should be familiar with the process but not necessarily oversee the following:

- Controlled substance documentation and proper disposal
- Equipment care/management
- Disinfectants/OSHA Regulations
- Legal documentation/record keeping
- Hazardous material disposal
- Familiar with local state Veterinary Law, regulation and ethics.
- Familiar with Inventory control/ordering
- Excels in interpersonal and public relations

Infectious Disease

The technician must be familiar with zoonotic diseases specifically pertaining to the cat. If a technician is employed within a mixed practice, it is essential to know what diseases can cross species within the hospital.

<http://www.catvets.com/guidelines/practice-guidelines/zoonoses-guidelines>

- Bacterial
- Fungal
- Viral
- Proper sanitation protocols and isolation/quarantine of animal if necessary.

Pharmacology

The technician must have the ability to recognize pharmacological groups, mechanisms, and relevant side effects.

- Antibiotics
(http://www.catvets.com/public/PDFs/PracticeGuidelines/Guidelines/2014AntimicrobialsGuidelines%20AAHA_AAFP.pdf)
- Feline approved anti-inflammatories (NSAIDS)
- Anthelmintics
 - Injectable
 - Oral
- Antifungals

- Oral
- Topical
- Anticonvulsants
- Antiseptics
- Anti-parasitic
 - Oral
 - Topical
- Chemotherapeutics routinely used in private practice
- Controlled Substances
 - Injectable
 - Oral
 - Topical
- Fluid Therapy
 - Calculations
 - Isotonic Crystalloids, Colloids, Hypertonic Saline, Blood Products
 - Delivery systems
- Medication Calculations
 - Injectable
 - Oral
- Monitor Therapeutic Response/documentation
- Pain Management (non NSAID)
 - Injectable
 - Oral
 - Topical
- Proper Administration
 - Injectable
 - Oral
 - Topical
- Vaccines (AAFP GUIDELINES)
 - Core and non-core

<http://jfm.sagepub.com/content/15/9/785.full.pdf+html>

Toxins

The technician must be knowledgeable regarding common toxins found within or around the home pertaining to the feline species.

- Alcohol, nicotine, illicit drugs
- Ethylene glycol
- Food toxins (chocolate, onion, garlic, green tomato, grapes/raisins, avocado etc.)
- Household plants (<http://www.aspc.org/pet-care/animal-poison-control/toxic-and-non-toxic-plants>)
- NSAIDS/Cold Medication/drugs that treat mental illnesses
(<http://www.catvets.com/guidelines/practice-guidelines/nsaids-in-cats>)
- Rodenticides

- Topical pesticides (Organophosphates, pyrethrins, etc.. anything that your veterinary office would not carry!)
- Envenomations

THE BODY MECHANICS:

Cardiovascular

- Anatomy and physiology
- Arrhythmias
- Cardiac tamponade
- Chronic Heart Failure
- Congenital defects found in the cat
 - VSD/ASD (ventral septal defect/atrial septal defect)
 - Tetralogy of Fallot
 - Patent Ductus Arteriosus (PDA)
 - Aortic Stenosis
 - Pulmonic Stenosis
 - Mitral and Tricuspid Valve Dysplasia
 - Endocardial Fibroelastosis
 - Cor Triatriatum Sinister
- Heartworm disease
 - HARD (Heartworm Associated Respiratory Disease)
- Murmurs/Heart Sounds
 - Innocent
 - Normal Sounds
- Pericardial Effusion

Dermatology

- Anatomy and physiology
- Allergy Testing
- Anal gland abscesses/disease/fistula
- Atopy
- Dermatophytosis (ringworm/fungal infection)
- Ectoparasites
 - Fleas
 - Lice
 - Mange (demodex, cheyletiellosis, otodectic, sarcoptic, notodectic, trombiculiasis)
- Eosinophilia (skin plaques)
- Food Hypersensitivity
- Neoplasia (mast cell, basal cell, cutaneous lymphoma, squamous cell carcinoma, fibrosarcoma, ceruminous gland tumors, melanoma, cysts, cutaneous metastases adenocarcinoma)
- Pyoderma

- Urticaria (hives)

Ear

- Anatomy
- Congenital defects
- Common diseases/infections
- Ectoparasites
- Blood glucose monitoring
- Ear tipping
- Aural hematoma

Endocrine/exocrine

- Anatomy and physiology
- Acromegaly
- Cushing's Disease
- Diabetes (Insipidus and Mellitus)
- Diabetic Ketoacidosis
- Euthyroid
- Insulinoma
- Hyperthyroidism
- Hypothyroidism (after treatment)
- Pancreatitis (acute, chronic, neoplasia)
- Pancreatic Insufficiency
- Thyroid Neoplasia

Fluid and electrolyte disorders

- Acid-base abnormalities
- Dehydration/overhydration
- Electrolyte abnormalities
- <http://www.catvets.com/guidelines/practice-guidelines/fluid-therapy-guidelines>

Gastrointestinal

- Anatomy and physiology
- Bacterial disease
- Constipation/obstipation (acute, chronic)
- Diarrhea (acute, chronic, infectious, colitis)
- Esophageal Stricture
- Foreign body/obstruction
- Gastric Ulcers
- Gastritis
- Ileus
- Intussusception
- Infiltrative disease
- Inflammatory Bowel Disease
- Malabsorption
- Megacolon

- Megaesophagus
- Neoplasia (GI and Oral)
- Parasites (common in cats)
- Pyloric Outflow Obstruction
- Large bowel disease
- Refeeding syndrome
- Small bowel disease
- Stomatitis (lymphocytic/plasmacytic)
- Triaditis in cats
- Vomiting vs regurgitation

Hematologic

- Anatomy and physiology
- Anemia (regenerative/non-regenerative)
- Blood Transfusions (include common blood types for cats)
- Coagulopathies
- DIC (Disseminated Intravascular Coagulation)
- Leukocyte disorders (leukemia, lymphoma, leukocytosis, leukopenia)
- Platelet disorders
- Polycythemia

Hepatobiliary

- Anatomy and physiology
- Biliary cysts
- Bile duct obstruction (neoplasia, stones)
- Cholecystic disease
- Cholangiohepatitis
- Gallbladder mucocele
- Hepatitis (acute/chronic)
- Neoplasia (adenoma, adenocarcinoma, sarcoma, mast cell, lymphoma, carcinoma)
- Portosystemic shunt (congenital vascular anomaly)
- Toxic hepatopathy

Immunological

<http://www.catvets.com/guidelines/practice-guidelines/retrovirus-management-guidelines>

- Anatomy and physiology
- Feline Leukemia
- Feline Infectious Peritonitis (dry and effusive)
- Feline Immunodeficiency Virus
- Immune Mediated Hemolytic Anemia
- Immune Mediated Thrombocytopenia
- Vaccine related adverse events

Musculoskeletal

- Anatomy and physiology
- Achondroplasia

- Arthropathies in the cat
- Avascular necrosis of the femoral head (Leggs Perthes Disease)
- Degenerative joint disease (DJD)
- Immune mediated arthritis/vaccine related arthritis symptoms
- Joint trauma (ligament damage/luxation)
- Nutritional Osteodystrophies in the cat
- Osteoarthritis
- Osteosarcoma
- Spondylosis

Neurogenic

- Anatomy and physiology
- Cerebellar Hypoplasia in cats
- Congenital (Hypokalemic myopathy of Burmese cats, Nemaline rod myopathy, Devon Rex cat hereditary myopathy)
- Diabetic Neuropathy
- Epilepsy
- Granulomatous meningoencephalitis (GME)
- Hydrocephalus
- Horner's Disease
- Intervertebral disc disease
- Laryngeal Paralysis
- Myasthenia Gravis
- Neoplasia
- Seizure disorders common in the cat
- Vestibular disease (polyps, infection etc.)

Ophthalmology

- Anatomy and physiology of the feline eye
- Cataracts
- Conformational abnormalities seen in the cat (e.g.- entropion)
- Conjunctivitis
- Corneal ulcers
- Glaucoma
- Keratoconjunctivitis Sicca in cats (KCS-dry eye)
- Lens luxation
- Neoplasia (melanoma)
- Nuclear sclerosis
- Progressive Retinal Atrophy (seen in Abyssinian and other purebred cats)
- Retinal detachment (high blood pressure, taurine deficiency.)
- Uveitis

Dentistry/oral cavity

AVDC.org, AVDS-online.org

- Anatomy and physiology

- Disease grading system
- Fistulas
- Tooth Resorption
- Stomatitis (lymphocytic/plasmacytic)
- Malocclusion
- Neoplasia of the oral cavity (malignant and non-malignant)
- Full Mouth radiograph techniques in the cat
- Root abscess
- Periodontal Disease grading
- Triadan numbering system/dental formula
- Supernumerary teeth
- Retained deciduous teeth

Reproduction

- Anatomy and physiology
- Breeding/prevention
- Dystocia
- Eclampsia
- False pregnancy
- Mammary tumors
- Mastitis
- Neonatal care
- Pyometra/metritis
- Uterine prolapse

Respiratory

- Anatomy and physiology
- Asthma
- Brachiocephalic problems in cats
- Diaphragmatic hernia
- Epistaxis
- Feline Calicivirus
- Feline Viral Rhinotracheitis (feline herpes/URI diseases)
- Laryngeal Paralysis
- Nasal polyps/neoplasia/fungal infections common in cats
- Neoplasia
- Pleuritis/pleural effusions
- Pneumo/hemo/chylo/pyothorax
- Pneumonia (viral, bacterial, fungal)
- Pulmonary edema
- Pulmonary thromboembolism
- Tracheal bronchitis/collapse/stenosis

Urinary Tract

- IRIS Kidney Stages <http://www.iris-kidney.com/guidelines/staging.html>
- AKI <http://www.iris-kidney.com/guidelines/staging.html>

- Urinalysis
- Ureterolithiasis, renaliths, uroliths
- Cystaluria
- Sterile Cystitis
- FLUTD -Feline Lower Urinary Tract Disease
- Urinary blockage
- Urinary tract neoplasia
- Renal lymphoma
- Pyelonephritis

THE MIND PROCESS

Behavior in cats

<http://www.catvets.com/guidelines/practice-guidelines/house-soiling>

<http://www.catvets.com/guidelines/practice-guidelines/environmental-needs-guidelines>

<http://www.catvets.com/public/PDFs/PracticeGuidelines/FelineBehaviorGLS.pdf>

*Declawing is not an option for any behavior modification.

*Defanging cats is not an option for any behavior modification.

- Anxiety related disorders
- Aggression
- Body language
- Verbal language
- Destruction: alternatives
- Environmental enrichment
- House soiling/spraying/trouble shooting
- Kitten aggression/play
- Litterbox training
- Self-destruction
- Carrier Acclimation

NUTRITION IN CATS

Nutrition plays a vital role in a healthy cat. There are many opinions of type of the types of diets available. The Feline Technician should be familiar with conventional and non-conventional diets.

- Calculating RER and disease state requirements
- Prevention and treatment of disease states
- Proper nutrition for life stages/lifestyle
- Proper use and recommendation
- Parental/non-parental nutrition
- Obesity management
- RAW DIET and Homemade diet
- Taurine deficiency

AVTCP Small Animal (FELINE)

SUGGESTED READING LIST

Website References:

AAFP Practice Guidelines and Endorsements by the AAFP

<http://www.catvets.com/guidelines/practice-guidelines>

Cat Friendly GOLD Standard of Practice

<http://www.catvets.com/cfp/veterinary-professionals>

WINN Feline Foundation Journal Articles

<http://www.winnfelinefoundation.org/education/journal-articles>

Dr. Sophia Yin & Low Stress Handling

<https://drsophiayin.com/>

Fear Free Pets

<https://fearfreepets.com/>

Occupational Safety and Health Administration (OSHA)

<https://www.osha.gov/>

Books:

THE CAT, Clinical Medicine and Management. Susan Little. Elsevier. 2012. ISBN: 1437706606

**This book is the current 'ultimate guide' to the feline patient and is HIGHLY recommended to have in your library for study.*

August's Consultations in Feline Internal Medicine, Volume 7. 1st ed. Susan Little. Elsevier. 2016.

ISBN: 9780323226523

Feline Internal Medicine Secrets: Michael Lappin. Elsevier. 2001. ISBN: 9781560534617

Canine and Feline Endocrinology. 4th ed. Edward C. Feldman, Richard W. Nelson, Claudia Reusch, J.

Catherine Scott-Moncrieff. Elsevier. 2014. ISBN: 9781455744565

Small Animal Pediatrics: The First Twelve Months of Life: Michael Peterson & Michelle Kutlzer.

Saunders. 2011. ISBN: 1416048898

Feline Emergency and Critical Care. Kenneth J. Drobatz, Merilee F. Costello. Wiley-Blackwell. 2010.

ISBN: 978-0-8138-2311-9

Emergency Procedures for the Small Animal Veterinarian. 3rd ed. Signe Plunkett. Saunders. 2012.

ISBN: 9780702027680

Manual of Small Animal Emergency and Critical Care Medicine. MacIntire et al. Wiley-Blackwell.

2012. ISBN: 978-0-8138-2473-4

Veterinary Technician's Manual for Small Animal Emergency and Critical Care. Christopher Norkus. Wiley-Blackwell. 2011. ISBN: 0813810574

Advanced Monitoring and Procedures for Small Animal Emergency and Critical Care. Jamie Burkitt-Creedon and Harold Davis. Wiley-Blackwell. 2012. ISBN: 978-0-8138-1337-0

ECG For the Small Animal Practitioner. Larry Tilley, Naomi Burtnick. Teton NewMedia. 2009. ISBN: 9781893441002.

ECG Interpretation in the Critically Ill Dog and Cat. Thomas Day. Wiley-Blackwell. 2005. ISBN: 978-0-8138-0901-4

Manual of Canine and Feline Cardiology. 5th ed. Francis W. K. Smith et al. Elsevier. 2016. ISBN: 9780323188029

A Practical Guide to Canine & Feline Neurology. 3rd ed. Curtis W. Dewey & Ronaldo C. da Costa. Wiley-Blackwell. 2008. ISBN: 978-1-119-94611-3

Fluid Therapy for Veterinary Technicians and Nurses. Charlotte Donohoe. Wiley. 2012. ISBN: 978-0-8138-1484-1

Fluid, Electrolyte and Acid-Base Disorders in Small Animal Practice. 4th ed. Stephen DiBartola. Saunders. 2012. ISBN: 978-1-4377-0654-3

Feline Behavioral Health and Welfare: Ilona Rodan & Sarah Heath. Saunders. 2016. ISBN: 9781455774012

Nursing the Feline Patient. Linda Schmeltzer & Gary D. Noseworthy. Wiley-Blackwell. 2010. ISBN: 978-0-470-95901-5

**Any references to scruffing, face cones, muzzles and other unsafe anesthetic procedures(tanking/boxing) are an unacceptable form of restraint for the feline patient. Please do not refer to any guidelines in the book suggesting the use of those techniques.*

Feline Dentistry: Oral Assessment, Treatment, and Preventative Care. Jan Bellows. Wiley-Blackwell. 2010. ISBN: 978-0-8138-1613-5

Small Animal Dental Procedures for Veterinary Technicians and Nurses. Jeanna R. Perrone. Wiley. 2012. ISBN: 978-0-8138-2075-0

A Practical Guide to Feline Dermatology. Eric Gauguere & Pascal Prelaud. Translated by M. Craig Merial. 1999.

Small Animal Clinical Nutrition Quick Consult. Michael S. Hand, Steven C. Zinker, Bruce J. Novotny. Mark Morris Institute. 2011. ISBN: 0945837038

Canine and Feline Nutrition: A Resource for Companion Animal Professionals. 3rd ed. Linda P. Case, et. al. Mosby. 2011. ISBN: 978-0-323-06619-8

Small Animal Regional Anesthesia and Analgesia. Luis Campoy, Matt Read. Wiley-Blackwell. 2013. ISBN: 978-0-8138-1994-5

**Any references to unsafe anesthetic procedures (tanking/boxing) are an unacceptable form of restraint for the feline patient. Please do not refer to any guidelines in the book suggesting the use of those techniques.*

Handbook Veterinary Pain Management. 3rd ed. James S. Gaynor and William W. Muir. Mosby. 2015. ISBN: 9780323089357

Target, The Antimicrobial Reference Guide to Effective Treatment. 5th ed. David Aucoin. North American Compendiums, Inc. 2015. ISBN: 1934880132

Boothe's Small Animal Formulary. 7th ed. Dawn Merton Boothe. AAHA Press. 2015. ISBN: 978-1-58326-206-1

Plumb's Veterinary Drug Handbook, Donald C. Plumb, 8th Ed. Wiley-Blackwell. 2015. ISBN: 978-1-118-91193-8

Merck Veterinary Manual. Cynthia M. Kahn and Scott Line. 11th ed. Wiley. 2016. ISBN: 978-0911910612

The Art of Veterinary Practice Management. 2nd ed. Mark Opperman & Sheila Grosdidier. Advanstar Communications. 2014. ISBN: 1607592827

AVTCP Small Animal (FELINE) Skills List

A minimum of 80% of the skills must be mastered. Skills must be demonstrated and cross referenced in your case logs.

Skill	Case Log Number(s)	Signature of Veterinarian or VTS
General Nursing		
1. Perform a comprehensive physical exam on at least on FOUR cats. One of each life stage (Kitten <12 weeks, Young adult 9m-6 years, Senior 7-14 years, Geriatric >14 years). Assess and document findings including weight, temperature, heart rate, pulse rate, respiratory rate, heart/lung sounds, BCS, numerical pain score, hydration status, and any abnormal findings.		
2. Recognize and document signs of respiratory failure and/or shock.		
3. Accurately and efficiently triage patients presenting for emergent conditions. Document presenting condition, observations, vitals, and steps taken in response in patient status.		
4. In association with other medical team members, administer CPR, evaluate effectiveness, and institute therapy. <i>Adherence to current RECOVER CPR guidelines is strongly encouraged.</i>		
5. Demonstrate knowledge of substances/items that, when ingested, result in toxicity/foreign body and appropriate interventions.		
6. Demonstrate efficient and accurate calculation of drug doses, IV fluid rates, and constant rate infusions (CRIs). Calculations must be included in log.		
7. Demonstrate thorough knowledge of metric conversions using both kg and m ² . Calculations must be included in log.		
8. Demonstrate mastery of venipuncture in healthy, sick and/or debilitated feline patients in a variety of locations. Log location.		
9. Demonstrate mastery of peripheral IV catheter placement in a variety of sites in healthy, sick and/or debilitated feline patients and demonstrate proper care and use of the catheter and IV line. Log at least two different locations.		
10. Demonstrate central line, PICC, and/or jugular catheter placement in a feline patient and demonstrate proper care and use of the catheter and IV line.		
11. Demonstrate arterial catheter placement in a feline patient and demonstrate proper care and use of the catheter and IV line.		
12. Demonstrate through the needle catheter placement in a feline patient and demonstrate proper care and use of the catheter and IV line.		
13. Demonstrate intraosseous catheter placement in a feline patient and demonstrate proper care and use of the catheter and IV line.		
14. Set up and maintain an IV fluid pump, be able to troubleshoot equipment malfunction, note administration problems, and take corrective measures. Log details.		
15. Set up and maintain a syringe pump, be able to troubleshoot equipment malfunction, note administration problems, and take corrective measures. Log details.		

16. Administer crystalloids and/or colloids, monitor administration, and adjust administration in response to therapy and patient status.		
17. Administer blood or blood products, monitor administration and adjust administration as required. Log component used, monitoring, and any intervention required.		
18. Demonstrate mastery of cystocentesis in the feline patient, either blind or ultrasound guided. Log any adverse events if indicated (e.g. vagal response, hemorrhage, uroabdomen).		
19. Demonstrate proficiency in urinary catheter placement in a male and female feline patient.		
20. Demonstrate proficiency in urinary catheter maintenance in the feline patient.		
21. Set up and perform diagnostic non-invasive blood pressure measurement in a feline patient. Specify the method used (oscillometric, Doppler, etc.) and log values.		
22. Set up and perform diagnostic invasive blood pressure measurement via pressure transducer or aneroid manometer in a feline patient. Specify the steps performed and log values.		
23. Set up and perform a diagnostic ECG. Log heart rate and rhythm.		
24. Recognize normal and abnormal ECG tracings. Log observed arrhythmia.		
25. Demonstrate mastery of proper wound management techniques and/or bandage placement. Log at least TWO different wounds/bandages - specifying location and bandage type (supportive, protective, wet to dry, etc.).		
26. Demonstrate mastery of proper application of splints. Log location and type.		
27. Accurately and efficiently perform ocular diagnostic tests (including tonometry, fluorescein staining and/or Schirmer tear test). Log at least TWO tests.		
28. Determine nutritional requirements for different life stages, life styles, and disease processes in the feline patient. Log calculations.		
29. Calculate and administer nutritional support through a variety of techniques (assisted feeding, feeding tubes, parenteral nutrition, etc.). Log calculations.		
30. Demonstrate proper placement and/or maintenance of at least TWO of the following types of enteral feeding tubes: nasogastric, nasoesophageal, orogastric, esophagostomy, or PEG. Include feeding tube maintenance and tube feeding protocols.		
31. Administer thoracic physiotherapy to a feline patient (nebulization, coupage, etc.).		
32. Demonstrate proficiency in appropriately performing in TWO rehabilitation techniques including massage therapy, cryo/heat therapy, range of motion, low level laser therapy, etc. Specify laser class and appropriate PPE if indicated.		
33. Demonstrate proper nursing care techniques for the recumbent patient including passive range of motion, urinary bladder care, proper bedding, safe manipulation of position, etc.		
34. Demonstrate proper isolation procedures, care of isolation suite, and isolation protocols.		
35. Demonstrate proper nursing care of neonates in the hospital setting. Log all nutritional interventions and techniques.		
Anesthesia/ Analgesia		
36. Assign appropriate ASA status after reviewing patient history, PE, and diagnostic results in collaboration with a veterinarian. Log the justification for your choice.		

37. Assign appropriate numerical pain score after reviewing patient history and physical examination in conjunction with evaluation of any prescribed analgesic plans to provide effective pain management. Log the justification for your choices. <i>The Glasgow Pain Scoring Chart for Felines is strongly recommended.</i>		
38. Develop anesthetic and peri-anesthetic protocols for veterinarian review and implementation to provide effective pain management and maximum anesthetic safety and effectiveness. Log the justification for your choices. BOXING or TANKING is UNACCEPTABLE as an anesthetic protocol for the feline patient.		
39. Perform regional nerve blocks (dental, biopsy site, testicular, or linea). Perform at least FOUR. <i>Local blocks for declaws will only be accepted for the removal of a diseased/compromised digit. Elective declaw procedures are not accepted.</i>		
40. Evaluate the effects of common pre-anesthetic, induction, and maintenance drugs. Describe evaluation and results in log.		
41. Evaluate and respond to adverse reactions to and/or complications from pre-anesthetic, induction, and anesthesia maintenance drugs.		
42. Implement appropriate pre-oxygenation technique and state rationale for need.		
43. Demonstrate mastery of endotracheal intubation and tube placement noting selection process in regard to length and size, and safe technique for sealing cuff.		
44. Set up a pulse oximeter, evaluate oxygen status, and if applicable note any abnormalities and corrective actions taken in log.		
45. Set up a capnograph end-tidal CO ₂ monitor, evaluate ventilation status, and troubleshoot equipment malfunction. Log any abnormalities and appropriate interventions.		
46. Set up a continuous respiratory rate monitor, evaluate respiratory rate status, and troubleshoot equipment malfunction. Log any abnormalities and appropriate interventions.		
47. Set up and monitor core body temperature (esophageal or rectal), evaluate patient status, and troubleshoot equipment malfunction. Log any abnormalities and appropriate interventions.		
48. Implement techniques to prevent hypothermia/hyperthermia and resolve these issues by safely and effectively using devices such as warm air blankets, circulating water blankets, and IV fluid warmers. Log type of warming device used.		
49. Monitor and evaluate patient status and anesthetic depth using established parameters such as outward involuntary physical responses (i.e., jaw tone, palpebral reflex, eye position), blood pressure, ECG, pulse oximetry, heart rate, respiratory rate, and ventilation status.		
50. Administer and evaluate the effects of IV crystalloid and/or colloid therapy during anesthesia. Log any changes made to fluid therapy administration including rationale.		
51. Perform manual intermittent positive pressure ventilation with an ambu or anesthesia reservoir bag and evaluate its effectiveness.		
52. Demonstrate proficiency in the use of a mechanical anesthetic ventilator. Log technique and rationale for use, and troubleshoot equipment.		

53. Assess appropriate extubation time with regard to brachycephalics, regurgitation/aspiration, and emergence from anesthesia. Log any complications and appropriate interventions.		
54. Set up, test, and/or troubleshoot a rebreathing system. Log testing steps.		
55. Set up, test, and/or troubleshoot a non-rebreathing system. Log testing steps.		
56. Set up, test, and/or troubleshoot an anesthesia machine (oxygen tank/compressor, vaporizer, CO2 absorbent canister). Log testing steps.		
57. Set up, test, and/or troubleshoot a waste gas scavenging system. Log testing steps.		
Surgical Nursing		
58. Demonstrate extensive knowledge of and ability to set up necessary equipment and supplies for a variety of surgeries (i.e., reproductive tract, GI tract, ophthalmic, orthopedic, soft tissue, endoscopy, laparoscopy). Log at least FIVE different surgical procedures.		
59. Coordinate the process of preparation and positioning of patients for a variety of surgical procedures (i.e., reproductive tract, GI tract, ophthalmic, orthopedic, soft tissue, endoscopy, laparoscopy). Log at least FIVE different surgical procedures.		
60. Coordinate the process of preparation, safe use, and maintenance of suction equipment, electrocautery, smoke evacuator, and/or surgical laser units. <i>The use of laser/electrocautery for declaws will only be accepted for the removal of a diseased/compromised digit. Elective declaw procedures are not accepted.</i>		
61. Demonstrate proper pre-operative nursing care of surgical patients. Log any abnormalities that may cause anesthetic complications.		
62. Demonstrate proper post-operative nursing care of surgical patients. Log any complications.		
63. Demonstrate the proper care of surgical instruments. Log instrument processing details.		
64. Demonstrate proper sterilization procedures (autoclave, ethylene oxide). Log instrument processing details.		
Laboratory		
65. Mastery of all basic laboratory testing (PCV, TP, UA, fecal analysis, external parasite analysis, basic cytology, blood smear evaluation) and evaluation of results. All skills must be logged.		
66. Utilize, run quality control (QC), and troubleshoot in-house hematology and clinical chemistry analyzers and evaluate results. Log equipment maintenance and QC.		
67. Demonstrate the ability to perform at least TWO different in-house clotting tests (BMBT, ACT, Platelet evaluation, PT, APTT).		
68. Demonstrate mastery of in-house blood typing and crossmatching.		
69. Demonstrate the ability to obtain samples for tests such as, but not limited to: ACTH stimulation test, HDDST, LDDST, thyroid testing, bile acids, cobalamin/folate, tli, pli, and therapeutic drug monitoring. Note appropriate fasting protocols, correct timing of sample collection, and correct sample collection and handling. Log at least THREE different tests.		
70. Properly collect and/or handle and process an arterial blood gas sample. Log details.		

71. Properly collect and/or handle, store, and submit samples of an excretion, secretion, or effusion for laboratory evaluation.		
72. Properly collect and/or handle, store, and submit cytology samples for laboratory evaluation. Log type of sample (i.e. FNA, direct, impression).		
73. Properly collect and/or handle, store, and submit samples for bacterial and/or fungal cultures. Log source and culture medium.		
74. Properly collect and/or handle, store, and submit samples for histopathology.		
Diagnostic Imaging (Digital/machine or hand processing)		
75. Safely coordinate the radiographic process by directing team members to consistently and efficiently produce radiographs of diagnostic quality.		
76. Demonstrate proficiency in evaluating the patient's condition (medical, surgical, behavioral) and adapting the radiographic procedures to those conditions. Log any adaptations.		
77. Demonstrate accuracy, efficiency, and safety in positioning patients for a variety of radiographic studies (thorax, abdomen, spine, skull, extremity, shoulder, pelvis). Log at least FIVE different studies.		
78. Demonstrate accurate and consistent evaluation and modification of radiographic technique or positioning. Log results of evaluation and modification.		
79. Perform and/or demonstrate the ability to set up and assist in contrast studies (i.e. GI studies, cystograms, myelograms) including the set up of necessary equipment, patient preparation, and administration of contrast media. Log any abnormalities.		
80. Demonstrate the ability to set up, maintain equipment, and assist with or perform ultrasonography.		
Radioactive Iodine		
81. Demonstrate proper radioactive iodine related techniques. Using proper protocols, perform and/or assist in the administration of radioactive iodine and provide appropriate inpatient care with established safety procedures. Log steps taken.		
82. Demonstrate radioactive iodine knowledge regarding pre- and post-administration client education and the maintenance of all appropriate facility records and logs to remain compliance with regulatory guidelines.		
Dentistry		
83. Demonstrate thorough knowledge of dental anatomy abnormalities including periodontal disease/oral resorptive lesions and accurate dental charting. Log abnormalities and the type of dental chart used.		
84. Efficiently perform a comprehensive oral exam demonstrated in proper dental charting and notes.		
85. Readily identify oral pathology and anatomic abnormalities.		
86. Demonstrate proper use and care of dental hand instruments (including sharpening and instrument processing protocols) and power instruments.		
87. Perform thorough and efficient dental prophylaxis.		
88. Efficiently and consistently produce full mouth dental radiographs of diagnostic quality. Log techniques and machine type (i.e. wall mount or handheld).		

89. Set up, maintain and troubleshoot all dental equipment for prophylaxis and oral surgery.		
Pharmacology		
90. Demonstrate extensive knowledge of groups of drugs, their mechanisms of action, clinically relevant side effects, and evaluation of therapeutic responses. Log drugs from at least THREE categories noting drug category, side effects, and therapeutic effect.		
91. Demonstrate extensive knowledge of types of vaccines (core and non-core), their immunological mechanisms, current recommendations, and administration schedules. Log future vaccine recommendations.		
92. Recognize adverse vaccine reactions and demonstrate proper response and interventions.		
93. Demonstrate proper handling, preparation, and administration of chemotherapeutics with appropriate safety protocols. Log specific administration protocols and PPE.		
Behavior		
94. Demonstrate knowledge of feline behavior including head and body language.		
95. Recognize appropriate and inappropriate elimination behaviors in the feline patient and provide client counseling regarding current scientifically based techniques of training, management, and behavior modification. Log observations and recommendations.		
96. Demonstrate feline friendly/minimal effective safe restraint while doing a variety of procedures (physical exam, blood draw, cystocentesis etc.). Log method of restraint.		
97. Recognize signs/symptoms of pain/discomfort in the feline patient in the home setting (from client history) and in the hospital (head pressing, hiding, sudden aggression etc.) Log pain scale used and interventions to address pain management..		
98. Recognize stress when handling a patient and implement protocols that are feline friendly (i.e. AAFP guidelines). This may include necessary and appropriate sedation/chemical restraint. Log protocols and any administered medications including dose and calculation.		
99. Recognize and troubleshoot redirected aggression behavior. Log diagnostics performed, final diagnosis, and protocol for necessary behavior modification.		
Practice Management		
100. Participate in the development and/or maintenance of all appropriate facility records and logs in compliance with regulatory guidelines (x-ray, surgery, anesthesia, laboratory, controlled substance).		
101. Participate in the development and/or maintenance of appropriate sanitation and hospital-acquired infection protocols for a veterinary facility, including patient and laboratory areas.		
102. Participate in the development and/or maintenance of infectious disease protocols and staff education including the recognition of potentially infectious cases and the proper handling and housing of those patients.		
103. Demonstrate proficiency at developing and providing client education in a clear and accurate manner at a level the client understands (i.e., oral and written, including educational handouts).		
Euthanasia		

104. Demonstrate skilled application of crisis intervention/grief management skills with clients.		
105. Assist with and document ONE euthanasia protocol including sedatives, catheter placement, administration, and euthanasia solution used. Include doses and calculations of all sedatives and euthanasia solution. Document client counseling for euthanasia, method of body disposal, and any referral for grief counseling. Document proper/respectful care and handling of deceased patient.		

The AVTCP reserves the right to verify any information that the candidate provides in the application packet

The AVTCP requires that a licensed veterinarian or a Veterinary Technician Specialist who has mastered the skill, attest to your ability to perform the task. Mastery is defined as being able to perform the task safely, with a high degree of success, and without being coached or prompted no less than four (4) times. Mastery requires having performed the task in a wide variety of patients and situations. The applicant must have mastered a minimum of 80% of the skills listed. The skills mastered must be demonstrated in the case logs and reports.

I, the undersigned, declare that I have read the entire AVTCP application packet. I further attest that the above-named applicant has achieved the AVTCP definition of mastery for the above skills that are marked with my signature.

Name _____ / _____ Degree _____
Printed Name Signature

Name _____ / _____ Degree _____
Printed Name Signature

Name _____ / _____ Degree _____
Printed Name Signature

Name _____ / _____ Degree _____
Printed Name Signature

Name _____ / _____ Degree _____
Printed Name Signature

Please provide the names and credentials of all persons who have signed this form attesting to your mastery of advanced skills in clinical practice.

