

The Academy of Veterinary Technicians in Clinical Practice



**Application Packet
2020 Case Year**

SUBMISSION GUIDELINES

The application year begins 12:01am January 1, 2020 and ends at 11:59pm December 31, 2020. All skills, logs, reports, and signatures must be obtained during the application year.

Submissions, including all applicable documents, attachments, letters of recommendation, and payment, will be accepted up to 11:59pm PST Thursday, December 31, 2020. No application will be accepted beyond the due date and time.

All documents must be scanned and/or filled out digitally to be submitted online. Submissions will be accepted via email, Dropbox, or other digital format emailed to AVTCPinformation@gmail.com.

Application fees of \$50 should be made via the Paypal link: [AVTCP Paypal](https://www.paypal.me/AVTCP) (<https://www.paypal.me/AVTCP>). Please allow enough time to set up your Paypal account in order for AVTCP to receive payment by the due date and time.

International applicants must ensure their fee is paid in US dollars.

Please be very careful to have all parts of all forms filled out, signed, and scanned. Incomplete applications will not be reviewed/considered.

LETTER OF INTENT

A letter of intent is required by 11:59pm, July 1st of each application year. **This letter is mandatory for consideration. Verbally telling an AVTCP member, or emailing a mentor does not qualify as a letter of intent.** The following guidelines must be followed:

- Letter should indicate applicant's name and chosen practice category
- Letter of intent is due each year, regardless of whether or not applicant submitted a letter of intent in previous years
- The letter should include how many times, if any, applicant has submitted a letter of intent or applied
- Letters of intent should include basic information and do not require resumes or CVs
- Letters should be emailed to AVTCPinformation@gmail.com

LETTERS OF RECOMMENDATION

- There must be one letter of recommendation from:
 - An AVTCP academy member OR another NAVTA approved VTS academy OR Certified Veterinary Pain Practitioner (CVPP) OR
 - A Diplomate of any AVMA recognized veterinary specialty organization (RVSO)
- There must be a second letter from:
 - Any of the above list OR
 - A doctor of veterinary medicine (DVM or VMD)
- The specialty of the veterinarian/s or the technician/s do not have to be the same as the chosen specialty of the applicant
- Letters should be from people who have observed the applicant's work technically and professionally
- Letters should describe the applicant's knowledge and technical ability as well as what makes them stand out from non-VTS credentialed technicians
- Letters must be emailed directly to avtcpinformation@gmail.com prior to December 31st of the application year
- Letters must be hand-signed and emailed directly from the person writing the recommendation letter
- Please do not submit more than 2 letters

WAIVER, RELEASE, AND INDEMNITY AGREEMENT

I hereby submit my credentials to the Academy of Veterinary Technicians in Clinical Practice (AVTCP) for consideration for examination in accordance with its rules and enclose the required application fee. I agree that prior to or subsequent to my examination, the AVTCP Board of Regents may investigate my standing as a technician, including my reputation for complying with the standards of ethics of the profession. I understand and agree that the application fee shall be nonrefundable.

I agree to abide by the decisions of the Board of Regents and thereby voluntarily release, discharge, waive and relinquish any and all claims, actions, or causes of actions against the Academy of Veterinary Technicians in Clinical Practice, the Board of Regents, and each member, regent, officer, examiner, and agent of AVTCP or the Board of Regents (collectively the "Released Parties", individually a "Released Party"), and hereby voluntarily release and discharge each of the Released Parties from any and all liability whatsoever, arising out of or in any way related to any decision or act made by a Released Party in connection with my application to AVTCP, the AVTCP examination, the grades on such examination and/or the grant or issuance of, or failure to grant or issue, any certificate (each, an "AVTCP Decision"). I hereby agree to defend, indemnify and hold harmless each Released Party from and against any and all claims, actions, causes of action, demands, costs, including but not limited to court costs and attorney's fees, and liabilities brought by or for me or prosecuted or otherwise pursued for my benefit, whether known or unknown at this time, arising out of or in any way related to an AVTCP decision. I further agree that any certificate which may be granted and issued to me by AVTCP shall be and remain the property of AVTCP.

I understand that as part of the application submitted herewith I am being asked to suggest issues, questions and ideas which AVTCP can include in future examinations. I hereby assign to AVTCP all right, title and interest in and to any and all such issues, questions and ideas which I may submit to AVTCP now or in the future.

I certify that all information provided by me on the application submitted herewith is true and correct. I acknowledge that I have read, understand and agree to abide by the terms and conditions stated above.

(Signature)

(Date)

(Please print your name)

AVTCP PROFESSIONAL HISTORY AND EMPLOYMENT

- **Employment history must include a minimum of 5 years full-time (10,000 hours) employment in Clinical Practice as a “qualified technician”. Of the 10,000 hours, a minimum of 75% (7500 hours) must be in the selected Practice Category. All experience must be completed within ten years prior to application.**
- **For the purposes of this application, AVTCP will use the term “qualified technician” as described by one of the following criteria:**
 - **An applicant who has graduated from an American Veterinary Medical Association (AVMA) accredited technician school *and*, if they are employed in a state/province that offers licensing credentials, they have obtained those credentials.**
 - **The date of credentialing will determine the start of their “qualified technician” date.**
 - **An applicant who has graduated from an AVMA accredited technician school and they are employed in a state that *does not* offer licensing credentials; AVTCP *will still consider them* a “qualified technician”.**
 - **An applicant has obtained licensing/credentialing in the state or country they reside in which allows them to legally practice as a veterinary technician or nurse.**
- **If an applicant works in a state/province that offers licensing credentials, and they *have not* obtained those credentials, AVTCP *will not consider* them a “qualified technician” and will therefore not accept their application.**
- **For the purposes of this application, “Clinical Practice” work refers to time actively practicing with companion animals or production animals relevant to applicant’s chosen specialty category. Hours worked in or taken from zoo medicine, laboratory medicine, shelter medicine, or wildlife medicine will not be accepted.**

Name: _____
Last First MI

Address: _____
Street City State Zip Code

Phone: (____) ____ - _____ E-mail Address: _____ Practice Category: _____

Have you graduated from an AVMA approved School of Veterinary Technology? Yes ☐ No ☐

School: _____ Graduation Date: _____

****Photocopy of diploma in veterinary technology and/or photocopy of current veterinary technician credentials required****

Are you currently Licensed/ Registered/ Certified or possess credentials to legally practice? Yes ☐ No ☐

State/Province of Licensure/Registration/Certification: _____ Legally Credentialed since: _____

Are you a member of any professional veterinary organizations (such as NAVTA)? Yes ☐ No ☐

Please specify: _____

Veterinary Technician Employment History

- Employment history must include a minimum of 5 years with 10,000 hours of experience as a “qualified technician” in Clinical Practice with 75% in the selected Practice Category.
- Acceptable work history hours in Clinical Practice must be taken from experience obtained while practicing with companion animals or production animals relevant to your specialty category. Hours worked in or taken from zoo medicine, laboratory medicine, shelter medicine, or wildlife medicine will not be accepted.
- All experience must be completed within ten years prior to application.

Name of Practice/City/State	Type of Practice	Average number of hours worked per week	% of Time spent in Practice Category	Starting Date/Ending Date

To figure hours = (hours per week) x (percent in specialty) x (weeks worked at job) = **Total hours experience**_____

AVTCP CONTINUING EDUCATION LOG

- CE must be RACE certified or its equivalent. Applicants cannot use their own lectures for CE credit.
- Forty (40) hours minimum of approved CE must be completed within five (5) years of application due date. Applicants are encouraged to submit > 40 hours of CE.
- A minimum of 60% (24 hours) must be in-person (conference, seminars, etc.)
- No more than 40% (16 hours) of submitted CE is accepted from interactive-distance (web-based, teleconference, etc.) format.
- A minimum of 75% in the practice category in which the specialty recognition is sought is required.
- All CE must be in advanced clinical practice. CE should be well rounded and comprised of several domains. If CE is all from one domain (ie: Behavior or management or dentistry), it will NOT be accepted.
- All instructors are required to be a board certified veterinarian (diplomate from ABVP, American College or European College) or Veterinary Technician Specialist (specialty recognized by NAVTA/CVTS) or Certified Veterinary Pain Practitioner (CVPP) or Certified Veterinary Practice Manager (CVPM). You must indicate speaker credentials (e.g. ABVP (Avian), VTS (ECC), etc) for approval.
- Production Medicine applicants are encouraged to review the Production Medicine application for specific CE requirements/guidelines.
- Lectures are to be listed **individually** with title and speaker credentials evident. CE will not be accepted if listed by conference.

Photocopies of certificate of attendance or other proof of attendance for these events are required. Please attach to this form.

Date	Title of Lecture	Speaker/credentials	Location/Convention	Hours

Total hours _____

AVTCP KNOWLEDGE LISTS

A qualified candidate will understand and recognize the disease states and conditions contained in the knowledge list. The knowledge list can be used as an aid in preparation for sitting the examination in your clinical practice category. The topics listed are in addition to your skill list, and though some overlap will occur, any topic that appears on either list is suitable information for examination. However, unlike the skills list, you are not required to provide proof of competence for the knowledge lists. The examination will provide this information.

I have read the above information and the advanced knowledge list in the following area of expertise (please check only one)

- ☐ Small Animal (Canine/Feline)
- ☐ Small Animal (Feline)
- ☐ Exotic Companion Animal
- ☐ Production Medicine

Please acknowledge that you have read the above statement and return this form with your application packet.

Signed _____

Please print applicant's name _____

AVTCP EXAM QUESTION FORM

- Please submit 5 exam questions specific to your practice category for committee review for possible use on future AVTCP examinations.
- These questions must be advanced in nature and follow the AVTCP format.
- Questions must be submitted in a WORD document only.

Question # _____

Question: (Stem)

Responses: (Please list the correct response **first**, capitalize first letter of each response)

- A.
- B.
- C.
- D.

Reference: (Source you would quote to prove the correct answer is in fact correct)

Author:

Title:

Publisher:

Year:

Page(s):

Rationale: (A short statement explaining the testing point)

Name:

Contact information:

E-mail address:

Practice Category

☐ Canine/Feline ☐ Feline ☐ Exotic Companion Animal ☐ Production Medicine

Domain

<input type="checkbox"/> Anesthesia and Analgesia	<input type="checkbox"/> Body Mechanics & Systems
<input type="checkbox"/> Diagnostic & Laboratory	<input type="checkbox"/> Diseases
<input type="checkbox"/> Pharmacology	<input type="checkbox"/> Animal Care & Treatment
<input type="checkbox"/> Surgical Nursing	<input type="checkbox"/> Dentistry
<input type="checkbox"/> Behavior	<input type="checkbox"/> Practice Management

AVTCP CASE LOGS – Instructions/Guidelines

- A *minimum* of 50 cases (maximum of 75) reflecting the mastery of advanced clinical practice knowledge and skills are required. Applicants are encouraged to submit > 50 cases as cases may be rejected.
- Logs must be submitted in 1 complete WORD document, not multiple separately saved documents or as PDF's.
- Acceptable Case Logs in Clinical Practice must be taken from experience obtained while practicing with companion animals or production animals relevant to your specialty category. Case logs taken from zoo medicine, laboratory medicine, shelter medicine, or wildlife medicine will not be accepted.
- Case Logs will not be accepted from patients belonging to the applicant.
- Cases submitted must take place between January 1st to December 31st of the application year, and should be listed in sequential order from oldest to newest.
- A *minimum* of 80% of the skills list must be cross-referenced in the Case Logs. Please indicate the skill number in parentheses after citation. You are encouraged to select cases that demonstrate more than one advanced skill. Submission of multiple similar/repetitive cases is discouraged.
- Skills list items should be referenced by skill number and description of skill performed.
- Please be sure to specify details, such as sites/locations for skills list items such as IV catheter placement, venipuncture, drug administration sites, etc.
- The AVTCP case log outline should be utilized. Each case log should be numbered individually and no case log should be longer than one page in length.
- Each case log should only include details for a single patient visit. Multiple visits by the same patient count as only one case unless presented for an entirely new problem. Multiple patient visits can be utilized to demonstrate advanced nursing skills but they will not count towards your total case count after the initial entry.
- Abbreviations should be expanded on first mention if not on AVTCP's acceptable abbreviation list.
- Logs should be written in 3rd person with perfect spelling and grammar.
- Logs should be written in Times New Roman 10pt with 1" margins.
- Medications should be referred to by drug name, not brand or trade name.
- Drug dosages must be expressed in metric units with specific dosage, time intervals, and route of administration.
 - *Correct – enrofloxacin (10mg/kg) 200 mg IV q12h ; Incorrect – Baytril ® 8.8 mL bid.*
- ***Please see any additional case log requirements in your specific practice category application.***

AVTCP CASE LOG - Format

Applicant's name: _____

Case log # _____ **Date** _____ **Patient ID** _____

Species/Breed _____ **Age** _____ **Sex** _____ **Wt** _____ (kg) **BCS** _____

Diagnosis _____

Treatment Plan _____

Advanced skills & procedures performed _____

Advanced skills & procedures assisted _____

Outcome _____

AVTCP CASE REPORTS – Instructions/Guidelines

- Four (4) complete case reports are required.
- Only cases that take place after the applicant reaches the employment history requirements will be accepted.
- Acceptable case reports in Clinical Practice must be taken from experience obtained while practicing with companion animals or production animals relevant to your specialty category. Case reports taken from zoo medicine, laboratory medicine, shelter medicine, or wildlife medicine will not be accepted.
- Case Reports will not be accepted from patients belonging to the applicant.
- Reports must be no more than five (5) pages each, 1" margins, Times New Roman 10pt., and double-spaced. References and any appendices (i.e. laboratory and/or diagnostic imaging reports, etc.) are not included as part of the five page maximum.
- The case report must be taken from the case logs. The case log # must be included in the case report.
- Narrative should follow a problem-oriented medical record.
- Abbreviations should be expanded on first mention if not on AVTCP's acceptable abbreviation list.
- Reports must demonstrate expertise in the management and treatment of clinical cases and will be reviewed for overall quality of nursing care, therapy instituted by the technician, goals of care and therapy, and the technician's role in the management as it relates to the case.
- All case reports involving procedures with animals that are heavily sedated or anesthetized must include an anesthetic monitoring log. This report is not included as part of the 5-page maximum.
- Case reports will be scored on writing (style, grammar, syntax, ability to communicate clearly, concisely yet thoroughly), disease/condition (demonstrating a clear understanding of the disease/condition and explaining the relevant anatomy, pathology and pathophysiology), diagnostics (explanation of diagnostics including reason for test, role in performing test, both normal & abnormal results and nursing response to test), and nursing care and therapy (explanation of goals of nursing care and therapy and role in care).
- Appendices may be included if necessary/desired (ECG tracings, chemotherapy protocols, radiology reports, etc.).
- Reports should be written in 3rd person with perfect spelling and grammar.
- The use of references is encouraged. Plagiarism will not be tolerated.
- Medications should be referred to by drug name, not brand or trade name.
- Drug dosages must be expressed in metric units with specific dosage, time intervals, and route of administration.
 - *Correct – enrofloxacin (10mg/kg) 200 mg IV q12h ; Incorrect – Baytril ® 8.8 mL bid.*
- Any attached laboratory reports should be reported in Conventional Units. The following internet conversion page is acceptable to use: [AMA Manual of Style Conversion Calculator](#)
- ***Please see any additional case report requirements in your specific practice category application.***

AVTCP CASE REPORTS - Format

AVTCP Case Report #

Case Log#

Title

Author

Signalment

Presenting Complaint

History

Physical Exam Findings/Observations (admit/first contact)

Problem List/Differential Diagnosis

Diagnostic Approach

State whether lab work was performed in-house or at an outside laboratory.

Treatment Plan

Final Diagnosis

Outcome

Necropsy and postmortem testing is included here if appropriate.

Conclusion/Case Summary

Include information on the disease/condition, the typical history and presentation, the diagnostic approach, treatment and management options, expected outcome and prognosis, and any other pertinent information. Information should be current and high quality; standard textbooks and peer-reviewed journal articles are preferred. All researched information is to be cited.

Discussion

The Discussion section is used to evaluate and critique the case. Unlike the actual Case Report, which is an objective recording of the facts of the case, the Discussion is a subjective analysis of the case management. Explain any deficiencies or potential errors in the case, and justify any steps taken or choices made that differ from case management.

AVTCP ACCEPTABLE ABBREVIATIONS

These abbreviations may be used without expansion in AVTCP applications:

Ab	antibody
ACT	activated clotting time
aPTT	activated partial thromboplastin time
ASA	American Society of Anesthesiologists
AS	left ear
AD	right ear
AU	both ears
BAR	bright, alert, and responsive
BMBT	buccal mucosal bleeding time
BP	blood pressure
bpm	beats per minute
brpm	breaths per minute
BUN	blood urea nitrogen
°C	degree Celsius
Ca	Calcium
C1, C2...	cervical vertebrae
C/M	castrated male
CBC	complete blood count
cc	cubic centimeter
cm	centimeter
CNS	central nervous system
CO ₂	carbon dioxide
CPK	creatinine phosphokinase
CPR, CPR	cardiopulmonary resuscitation, cardiopulmonary cerebral resuscitation
CRI	constant rate infusion
CRT	capillary refill time
CSF	cerebrospinal fluid
CT	computed tomography
d	day
dl	deciliter
DNA	deoxyribonucleic acid
ECG/EKG	electrocardiogram or electrocardiograph
EDTA	ethylenediaminetetraacetic acid
ELISA	enzyme-linked immunosorbent assay
ET	endotracheal
ETCO ₂	end-tidal carbon dioxide
°F	degree Fahrenheit
F/S	female/spayed
FeLV	feline leukemia virus
FIP	feline infectious peritonitis
FIV	feline immunodeficiency virus
g	gram(s)
gr	grain(s)
h/hr	hour(s)
Hct	hematocrit

Hgb	hemoglobin
hpf	high power field
IFA	indirect fluorescent antibody
IM	intramuscular
IN	intranasal
IO	intraosseous
IP	intraperitoneal
ICe	intracoelomic
IV	intravenous
kg	kilogram
L1, L2...	lumbar vertebrae
L	liter
lpf	low power field
m	meter
MM	mucus membranes
M/N	male/neutered
MCH	mean corpuscular hemoglobin
MCHC	mean corpuscular hemoglobin concentration
MCV	mean corpuscular volume
min	minute
mg	milligrams
mL	milliliter
MMOL/L	millimole per liter
MRI	magnetic resonance imaging
NPO	nothing by mouth (nil per os)
NIBP	non-invasive blood pressure
NSAID	non-steroidal anti-inflammatory drug
O ₂	oxygen
OD	right eye (oculus dexter)
OS	left eye (oculus sinister)
OU	both eyes
PCV	packed cell volume
PE	physical exam
pH	measure of the acidity of a solution
PO	per os
POTZ	preferred optimal temperature zone
PT	prothrombin time
q	every
QAR	quiet, alert, and responsive
QD	once daily
Q72H	every 72 hours
Q48H	every 48 hours
Q24H	every 24 hours
Q12H	every 12 hours
Q8H	every 8 hours
Q4H	every 4 hours
RBC	red blood cell
rDVM	referring doctor of veterinary medicine
RER	resting energy requirement
RNA	ribonucleic acid
Rx	take, receive – used to indicate a prescription or treatment
SC	subcutaneous

SpO2	peripheral capillary oxygen saturation
T1, T2...	thoracic vertebrae
T ₄	thyroxine
T ₃	triiodothyronine
TP	total proteins
TS	total solids
TSH	thyroid stimulating hormone
UA	urine analysis
WBC	white blood cell
wk	week
WNL	within normal limits
wt	weight
yr	year