

## AVECCTN Case Log Examples

### Case Logs

#### Case Log 1

**Date Admitted**

11/2/2020

**Date Discharged/Care Ended**

11/4/2020

**Days of Care**

3.00

**Case Identifier**

123456

**Age**

4 yo

**Sex**

Male

**Species (can type in species if not in list)**

Dog

**Weight (kg)**

10.00

**Diagnosis**

Hemorrhagic Gastroenteritis (HGE)

**Nursing Procedures I performed:**

Initial triage, full TPR, placed IVC, obtained VBG, CBC, biochemical profile, PCV/TS, PT/PTT, ECG, Oscillometric BP, SpO2. Provided oxygen flowby, 20ml/kg PLA bolus over 15 minutes, hydromorphone IV, ampicillin IV, enrofloxacin IV. Once stabilized, placed on 2x maint PLA, fentanyl CRI. Pain score q 1hr, monitored TS and administered FFP 200 mls. TPR, BP q 4 hr, ECG continuous.

**Outcome**

Discharged

**Is this case one of your 4 case reports?**

Yes

## Case Log 2

**Date Admitted**

11/17/2020

**Date Discharged/Care Ended**

11/26/2020

**Days of Care**

10.00

**Case Identifier**

345678

**Age**

7 year

**Sex**

Male

**Species (can type in species if not in list)**

Dog

**Weight (kg)**

78.00

**Diagnosis**

Gastric Dilatation Volvulus (GDV)

**Nursing Procedures I performed:**

Initial triage, full TPR, placed 2 IVC in both cephalics, obtained VBC, PCV/TS, PT/PTT, ECG, oscillometric BP, SpO2. 2L PLA bolus over 20 minutes, fentanyl IV, diazepam IV, intubated, then attempted orogastric intubation, unsuccessful. Prepped and assisted with gastric trocharization, arterial line placed. Transferred to surgery, post-op placement of ucath, continuously monitored ECG, IBP, TPR, fluid status and urine output.

**Outcome**

Discharged

**Is this case one of your 4 case reports?**

No

### Case Log 3

**Date Admitted**

12/3/2020

**Date Discharged/Care Ended**

12/5/2020

**Days of Care**

3.00

**Case Identifier**

678910

**Age**

10 year

**Sex**

Male

**Species (can type in species if not in list)**

Dog

**Weight (kg)**

6.00

**Diagnosis**

Diabetic Ketoacidosis

**Nursing Procedures I performed:**

initial triage, full TPR, placed IVC, obtained VBG, CBC, biochemical profile, PCV/TS, PT/PTT, ECG, Oscillometric BP. Gave 10 ml/kg PLA over 15 min, then placed on 2.5 x maint x 6 hrs. Reassessed BG q1 hr, electrolytes q 2 hr. Prepared insulin CRI and dextrose CRI, gave regular insulin bolus IV. Placed central line in rt jugular, started insulin CRI, BG checks q 1 hr, dextrose and insulin adjusted per BG.

**Outcome**

Euthanized

**Is this case one of your 4 case reports?**

Yes

### **Abbreviations Used in Case Logs**

BG- Blood Glucose

CBC Complete Blood Count

PCV/TS Packed Cell Volume, Total Solids

PT/PTT- Prothrombin Time/Partial Thromboplastin Time

IVC Intravenous catheter (peripheral)

ECG Electrocardiogram

BP Blood pressure

IBP Invasive blood pressure

CRI Constant rate infusion

IV intravenous

rt right

TPR Temperature, pulse respiration

VBG venous blood gas

PLA Plasmalyte A

ucath urinary catheter

FFP fresh frozen plasma