

## AVECCTN Case Log Examples

### Case Log 1

**Date Admitted**  
12/4/2019

**Date Discharged/Care Ended**  
12/6/2019

**Days of Care**  
3.00

**Case Identifier**  
123456

**Age**  
4 years

**Sex**  
Male

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

**Weight (kg)**  
12.00

**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, 20 ml/kg bolus PLA over 15 minutes, hydromorphone 0.05mg/kg IV, ampicillin 22mg/kg IV, enrofloxacin 10 mg/kg IV diluted and slow. Once stabilized, placed on 2 x maint PLA, fentanyl CRI at 2-6 mcg/kg/hr, pain score q 1 hr, monitored TS and administered FFP x 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**  
11/6/2019

**Date Discharged/Care Ended**  
11/8/2019

**Days of Care**  
3.00

**Case Identifier**  
321456

**Age**  
7

**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 VBG, PCV/TS, PT/PTT, ECG, Oscillometric BP, SpO2. 2L PLA bolus over 20 minutes, fentanyl 3 mcg/kg IV, diazepam 0.5 mg/kg IV. Intubated, then attempted orogastric intubation, unsuccessful, prepped and assisted with gastric trocharization, arterial line placed. Transferred to surgery, post-op placed ucath, continuously monitored ECG, IBP, TPR, fluid status, urine output.

**Outcome**  
Patient was discharged

**Is this case one of your 4 case reports?**  
No

### Case Log 3

**Date Admitted**  
12/25/2019

**Date Discharged/Care Ended**  
12/31/2019

**Days of Care**  
7.00

**Case Identifier**  
987654

**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, BG, CBC, Biochemical Profile, PCV/TS, PT/PTT, ECG, Oscillometric BP. Gave 10 ml/kg PLA over 15 min, then placed on 2.5 maint x 6 hrs. Reassessed BG q 1hr, and electrolytes q 2 hr. Prepared insulin CRI, gave regular insulin 0.1 U/kg bolus IV. Placed central line in rt jugular, started insulin CRI (1-10 ml/hr), BG checks q1hr, dextrose (0-5%) and insulin adjusted per BG.

**Outcome**  
Euthanized

**Is this case one of your 4 case reports?**  
No

### 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 balanced crystalloid solution