Veterinary Technology Applicant

WORK EXPERIENCE LOG

Instructions for logging work experience

All applicants to the VTEC program must log a minimum of 80 hours work experience in a Veterinary Hospital and submit proof of that work experience using the Task observation form at the end of this document.

Applicants will be scored according to the number of hours/ days/ weeks/ month/ years they have spent working in a veterinary hospital (voluntary or paid work). Additional points will be scored based on the *variety* of other experiences the applicant has had working with animals (e.g. working as a dog groomer, stable hand, wildlife rescue, etc). The higher the score for each section of the application, the more likely the applicant will receive a seat offer.

For all work experiences, please log the experience in one of the boxes below (print as many sheets as needed). For all Veterinary Hospital work experience hours please fill in both the table below AND the Task Observation for each clinic/ hospital the applicant has worked at.

Sincerely,

Dr Jennifer Wakeling MA, VetMB, PhD

Program Coordinator Veterinary Technology Program Faculty of Science & Technology Douglas College



Name of Facility						
Summary of tasks performed or observed	5					
Number of hours worked (circle)	0-80 (1-2 weeks)	80-160 (2-4 weeks)	160-900 (1-6 months)	>900 (>6 months)	Start and end date of work/ experience	
Supervisor's name					Supervisor's role/ title	
Supervisor's signature					Date signed	
Name of Facility						
Summary of tasks performed or observed						
Number of hours worked (circle)	0-80 (1-2 weeks)	80-160 (2-4 weeks)	160-900 (1-6 months)	>900 (>6 months)	Start and end date of work/ experience	
Supervisor's name					Supervisor's role/ title	
Supervisor's signature					Date signed	
Name of Facility						
Summary of tasks performed or observed						
Number of hours worked (circle)	0-80	80-160	160-900	>900	Start and end date of	
	(1-2 weeks)	(2-4 weeks)	(1-6 months)	(>6 months)	work/ experience	
Supervisor's name					Supervisor's role/ title	
Supervisor's signature					Date signed	



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	(1-2 weeks)	(2-4 weeks)	(1-6 months)	(>6 months)	work/ experience	
Supervisor's name					Supervisor's role/ title	
Supervisor's signature					Date signed	

Veterinary Technology Applicant

TASK OBSERVATION FORM

For the attention of Veterinary clinic/ Hospital Staff

Dear Veterinarian /Veterinary Technologist/ Hospital manager:

Applicants to the VTEC program at Douglas College must obtain a minimum of 80 hours work experience in a Veterinary Hospital Facility (Paid or volunteer). The reverse of this letter lists a number of tasks that we hope each student will be able to observe in order to gain a realistic view of how a veterinary hospital team operates on a day-to-day basis. If the applicant is a volunteer they are not required to "perform" any of the tasks but only to observe them.

Thank you for making an accurate record of the applicant's work experience. It is critically important for applicants to the veterinary technology to have a good understanding of the profession before entering the VTEC program.

Please give a completed copy of the form to the applicant, for them to submit to our registrar for admissions processing. If you have any questions, please do not hesitate to contact me at (604) 777-6322.

Sincerely,

Dr Jennifer Wakeling MA, VetMB, PhD

Program Coordinator Veterinary Technology Program Faculty of Science & Technology Douglas College

TASK OBSERVATION FORM

Student Name	:Student Number:
Doctor or Tech	nician: Please place your initials next to the tasks once they have been observed. Not all tasks
are required, b	ut <u>~70- 80%</u> of these tasks should be observed.
NURSING	
Observ	e daily animal care (i.e., cage/run/stall cleaning, exercising, feeding)
Observ	e daily treatments of hospitalized patients (i.e., rounds, patient orders)
Observ	e administration of meds via the oral, injectable and intravenous routes
Observ	e physical examination
Observ	e client interaction (i.e., history taking, behavior or nutrition counseling)
Observ	re emergency triage
Observ	re euthanasia
Discuss	s the diagnostic points of a radiograph or observe ultrasonography
(NOTE: Please	DO NOT expose applicant to radiation)
SURGERY	
	e major surgery (i.e., open abdominal surgery, orthopedic surgery)
Observ	e minor surgery (i.e., draining abscess, debriding traumatic wound)
Observ	e dental prophylaxis
Discuss	s operation of a gas anesthesia machine
LABORATORY	
Observ	e external parasites on the animal
	e external parasites by skin scraping
	e internal parasites and/or eggs under a microscope
	e blood cells and/or urine sediment under a microscope
	e in-house blood testing (i.e., FeLV, FIV, heartworm, serum chemistry)
Observ	re intravenous blood draw
FRONT OFFICE	
	re telephone procedures
	re making appointments
Observ	e dispensing prescriptions and/or over-the-counter medications
I attest that _	hours were logged by this applicant at this hospital/clinic/veterinary facility.

Veterinarian's/Technician's Name (Print)

Date:

Veterinarian's/Technician's Signature

Hospital/Clinic name & address: