

Case Scenario

Surgical emergency

Ambassador notes

This document is intended to provide you with ideas for running a session based on a 'clinical scenario' to demonstrate the aspects of patient care and the role the veterinary nurse has in this journey.

This style of session is more appropriate for older age-groups – from 10 years and older. The scenario and terms used can be tailored to the age-group.

You may decide to use a different scenario, maybe based on one from your recent experience and caseload for example.

Key words marked in bold are potential areas for questions, discussion, and explanation.

You may wish to simplify some of these terms for younger age-groups.

More advanced terms will give you an opportunity to teach children new words and concepts around veterinary medicine and nursing.

There are different ways you could present the scenario.

For example:

Use of a stuffed toy, demonstrating some of the aspects of the case as you talk through it.

Use of an illustrated PowerPoint presentation.

Use of images (remember that consent procedures and best practice for images have been followed).

Student-led – so for example, presentation of the opening scenario, and then asking students to discuss and decide what should or could happen next in the scenario.

Surgical emergency “The dog who disappeared” and the role of the veterinary nurse.

Key words marked in **bold** are potential areas for questions, discussion and explanation. Some areas are more basic (for younger children), and some more advanced. The more advanced terms will hopefully give you an opportunity to teach children new words and concepts around veterinary nursing.

1. There's a phone call from a member of the public. They have just accidentally hit a dog that ran out in front of their car. The dog is alive but limping.
 2. The veterinary nurse asks the driver to **bring the dog** in (if possible and with care) as soon as they can so the veterinary team can assess the dog and check the **microchip** details.
 3. When the dog arrives, she is **triaged** by the veterinary nurse and then **assessed** by the veterinary surgeon and the veterinary nurse scans the dog for a microchip. A number is found, and they call the **database** to retrieve the dog's name and the owner's contact details and call the owner.
 4. The vet tells the veterinary nurse to place an **intravenous catheter** to administer **pain relief** and **fluids** to help **stabilize** the dog as she is in **shock**, and she has suffered a **broken leg**.
 5. The veterinary nurse **weighs** the dog and **calculates the fluid rate** for the dog and works out the dose of the **analgesic**.
 6. The owner is contacted and was unaware the dog was missing as she was being walked in the park by the dog walker. The owner makes her way to the clinic to see her.
 7. A **hospital chart** is made up for the dog to record the **observations** and **medications** whilst she is in the clinic.
 8. The owner visits the dog and the vet explains that she has a broken leg and would need to have **radiographs** and possibly the leg **surgically repaired**. The owner is given an **estimate** for the **procedure** and signs a **consent form** allowing the vet to provide the treatment.
 9. The dog was **stabilised** and **monitored** overnight and **food withheld** prior to surgery.
 10. Based on the dogs' weight, a **pre-med dose** was calculated by the veterinary nurse and given to the dog.
 11. The dog was **anaesthetised** by the vet and the dog **intubated** and connected to the **anaesthetic machine**.
 12. The dogs' **respiratory rate, heart rate, temperature, eye position, gum colour and capillary refill time** are taken at **regular intervals** during the procedure.
 13. A '**multiparameter**' **monitor** is used to assess **blood pressure, ECG and capnography**.
 14. The dogs' leg was **radiographed** in **2 positions** to show the extent of the fracture
 15. The leg was **prepared for surgery** by the veterinary nurse, **clipped of fur** and the **skin disinfected**.
 16. The vet **repaired the leg surgically** with the assistance of the **scrubbed in** veterinary nurse, and once completed, dog was transferred to the x-ray table and the veterinary nurse positioned the dog for **postoperative radiographs**.
 17. Once the vet had **viewed the radiographs** and was satisfied with the result of the operation, the dog was **taken off the anaesthetic** and the nurse **monitored** the dog until she was **awake**.
 18. Upon recovery, the dog was offered some **food and water**, and further **pain relief** and **antibiotics** were given and recorded. The **fluids** continued until the following day.
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19. During **ward rounds**, the vet decided the dog could go home later that day and the veterinary nurse prepared the **discharge sheet** for the owner.
20. The nurse was involved in the post-operative care of the dog for several weeks after surgery, providing **check-up** appointments, **removal of sutures** and basic **physiotherapy**.

Examples of practical options and/or potential areas for further discussion

Some of these topics are quite advanced and should be simplified for younger children.

1. Assessing an animal – what would you check and why? (Demonstrate on stuffed toy).
2. What is an intravenous catheter, and why do we use them? (Show, demonstrate).
3. Example of a hospital chart, students can fill this in with their own observations.
4. Intubation – why and how? (Demonstrate using an ET tube).
5. Calculate dose rates for i/v fluids or medications – provide a scenario sheet and calculator including a body weight, drug, and strength. Provide a scenario sheet with a dog's weight and fluid calculation.
6. Example of anaesthetic monitoring form, and why and how we fill this in.
7. Anaesthetic monitoring considerations, for example, increased heart and respiratory rate – what could this mean?
8. Provide some large fluffy dog toys and simulate handling for i/v placement, intubation, radiographic positioning, postoperative recovery.
9. Prepare a dog for radiographic positioning.
10. Show examples of what happens if we only take one view (if you have radiographs you can use them to demonstrate).
11. Bandaging a limb of a toy – what to be careful of, why we use padding.
12. Name the skeletal bones. Provide a skeleton model or pictures with the main bone labels and ask the children place them correctly.
13. Think about what may be considered to fill in a discharge form for the owner (restricted exercise, medication, rest, postoperative appointments, physiotherapy, wound care, food restriction if cage rested to prevent weight gain, Elizabethan collar, suture removal, bandage care) Have blank discharge forms and ideas like the above to think about.
14. What exercises might we perform for basic physiotherapy? (Demonstrate on stuffed toy)

This is an example case, and you can recreate a similar activity using any clinical scenario that you think would be appropriate. For younger children you may choose to use something much simpler.
