



Application  
for  
2020  
AVST  
Examination

## AVST APPLICANT INSTRUCTIONS

The Academy of Veterinary Surgical Technicians (AVST) appreciates your interest in becoming a Veterinary Technician Specialist in Surgery, VTS (Surgery). The AVST's goal is to assure the veterinary profession and the public that an AVST certified technician possesses the knowledge, skills and experience needed to practice surgical nursing at an advanced level of competency.

The requirements of eligibility for the examination are defined in the AVST Constitution and Bylaws. Although the academy requirements are rigorous, they are not designed to be obstacles to prevent candidates from becoming certified; they are intended to assure the public and the profession that technicians certified by the AVST have demonstrated a high degree of competence.

All forms demonstrated in this packet **MUST** be used for the application submission. They are available individually online at [www.avst-vts.org](http://www.avst-vts.org). All forms must be typed or word-processed. Download the blank forms from the website for use in your application. With exception of the AVST Small Animal Advanced Surgical Skills Form and other application-associated signatures, all forms must be word-processed. Hand written forms will not be accepted. **Include only the information requested. Extraneous documents will not be accepted and may result in your application being rejected.** This is a professional application and all efforts should be made by the applicant to ensure it is an example of their highest quality of work. Poor spelling and grammar may adversely affect the approval of your application. Plagiarism is unacceptable.

### **Form 1- Professional Experience and History Form**

You may begin working on your application after you have completed a minimum of 10,000 hours (equivalent to 5 years of full-time employment) of work as a **credentialed** technician. Before starting your AVST application, ensure that you have been employed for at least 6000 hours (3 years) in a small animal surgical environment. You must also document that at least 4500 hours (75% of 6000) of your time was dedicated exclusively to performing veterinary surgical duties. For the purpose of this eligibility requirement, the definition of 'surgery' as established by the Academy of Veterinary Surgical Technicians will be used.

Outline your experience working as a **credentialed** veterinary technician in the **five years prior** to the application submission date. Read the AVST Definition of Surgery and determine the number of hours you have spent providing surgical care.

List your NAVTA membership identification number on the form; NAVTA membership is strongly advised for all AVST candidates. List any other veterinary technician specialty (VTS) certifications you possess. If you have recently earned a VTS designation in another discipline it means that for the last 3 years you have spent at least 75% of your time working in that particular discipline. Since the same criteria are required for pursuing a specialty in surgery (dedicating 75% or more of your time to surgical-related duties) you must first complete a minimum of 6000 exclusively surgical-related hours (~ 3 years) before you could apply for this specialty.

### **License and Diploma**

Applicant must be a graduate of an AVMA approved Veterinary Technology Program **and/or** legally credentialed to practice as a veterinary technician in a state of the United States or province of another country. Applicant must provide proof of a **legal** credential to practice in a state or province. Include a **photocopy** of your **current** credentials (e.g. license, certification, registration.) If you are a graduate from an AVMA approved Veterinary Technology Program submit a **photocopy** of your diploma as proof of graduation as well. Canceled checks and other documents will not be accepted as proof. Your original date of credentialing, date of passing the VTNE (or its equivalent) and graduation date (if applicable) must be documented on the history form.

### **Form 2- Case Log**

Candidates must submit a case log of at least 50 (but not more than **75**) cases completed from **January 1, 2019 – December 31, 2019**. The case log will be used to demonstrate your experience as a surgical technician and your mastery of advanced surgical nursing skills. The 50 cases contained in the case log must meet the AVST Definition of Surgery. Additional case log entries may be submitted to demonstrate mastery of a skill where applicable. Please remember case log entries submitted to reference a skill that does not meet the AVST Definition of Surgery should not be included as part of the 50 required cases. In addition, if only 50 cases are submitted, a single unacceptable case could result in an application being rejected.

For the purpose of this exam the AVST will include **canine, feline, lagomorphs, avian, reptiles, primates, small exotic pets and small laboratory animals** as ‘small animal’ patients.

Each case log should include the following: name or ID number, date, patient information (species/breed, age, sex, weight), duration of surgical care, technician role, attending clinician’s name and credentials, the reason for surgery as well as the type of surgery performed. It should also concisely describe the preoperative diagnostics and preparation of patient, instrument, equipment and operating room preparations performed prior to surgery, a brief list of instruments and equipment used intraoperatively, as well as any postoperative diagnostics, external coaptation used, postoperative care performed, etc. Information supplied in the case logs is intended to provide a *summary* of the surgical procedure performed on a **variety of species** while succinctly demonstrating as many advanced surgical nursing skills as possible (as outlined on the AVST Advanced Surgical Skills Form.) **If you use a case to demonstrate mastery of a particular skill you MUST provide detailed verbiage pertaining to the use of that specific skill in the case summary (e.g. list the context in which you used the skill).** Each case log should also clearly outline your role in the surgical procedure and demonstrate how your actions helped contribute to a successful outcome.

Remember that the case log **MUST** demonstrate a variety of surgical procedures to represent the applicant’s diversity in the operating room (e.g. thoracic and abdominal surgery, neurologic surgery, orthopedic surgery, minimally invasive surgery, oncologic surgery, etc.) as well as the applicant’s use of advanced surgical skills and care throughout all phases of the case. Ensure that elective, common or routine surgical procedures **do not** comprise > 15% of your case log. Elective, common or routine case examples include onychectomy, ovariohysterectomy or orchietomy, dental extractions, patellar luxation or cranial cruciate ligament surgery, or minor mass removal. Furthermore, submitting > 5 similar surgical cases (i.e., routine, elective cruciate surgery example: submitting more than 5 combined tibial plateau leveling osteotomy, extracapsular cruciate ligament repair, and tibial tuberosity advancement, or submitting more than 5 splenectomies) may result in disqualification of the supplementary case log entries. Furthermore, copying passages (using ‘cut’ and ‘paste’ features) from one case log entry into another may adversely impact your application.

The applicant must utilize the AVST Abbreviations List in all of the case logs and case reports. Download the AVST Abbreviations List document and include it as the first page of your case log. If you use an abbreviation that is not listed then you must concisely define the abbreviation the first time you use it in your case log (e.g. laryngeal paralysis [LarPar]). Alternatively, you can include an ‘abbreviations addendum’ page with your application packet. On the abbreviations addendum page you can include all of the new abbreviations with definitions that are contained in your case log entries and case reports. Please put your abbreviations addendum page behind the AVST Abbreviations page in your application packet.

The case log form should not contain more than 2 case log entries per page. Do not exceed this limit. Be sure the case log is detailed, neat, spell checked and clearly written. **Please do not include personal client information such as owner name, address, phone numbers, etc.**

**All cases included in the applicant's log must be completed at the facility where the applicant is employed or while under the supervision of the employer at a different location.** (e.g. your practice takes patients to a separate MRI facility.)

Please review the AVST Case Log SAMPLE on page 10.

## **Four Case Reports**

Select four cases from your case log that best demonstrate your diversity and expertise in surgery to submit as case reports. These four case reports should be carefully chosen and will allow you the opportunity to elaborate on your mastery of as many of the AVST Advanced Surgical Skills as possible. All information from the case log should be included in the report. You must also document the case log number as a reference to confirm the case is entered as part of your case log. In addition to the information from the case log, the case reports **MUST** demonstrate your knowledge, skills and abilities in advanced surgical nursing techniques on a **variety** of surgical **patient species** undergoing assorted (e.g. soft tissue, orthopedic, oncologic, minimally invasive, thoracotomy, ophthalmic, neurologic) and challenging (e.g. non-routine or non-elective) surgical procedures.

The case report should describe, in detail, how the patient was evaluated and managed during all phases of the surgical care. It is imperative that the information contained in your case report is clearly understood. Present each case in a logical manner. Be sure to check your spelling and define any abbreviations not found on the AVST Abbreviations list (page 11), by adding them to the AVST ABBREVIATIONS ADDENDUM template. It is important to show how you participated in the evaluation and management of the patient and were not just an observer. Consider some of the following ways of demonstrating your knowledge and experience:

1. Show how your veterinary team assessed the patient and developed a surgical plan.
2. Discuss the relevant pathophysiology of the patient and include the reason for the surgical procedure.
3. Detail the patient's history, including laboratory data, current medication(s), any prior procedure(s), and describe diagnostic imaging techniques used.
4. Discuss proposed outcome of surgery being performed. Why was this procedure chosen over another? (e.g. limb salvage over a limb amputation) Identify potential complications.
5. Explain preoperative patient preparation details for each procedure such as anatomic landmarks for the surgical clip margins, agents and aseptic technique used, rationalization for antimicrobial agent choice, and intraoperative patient position or positioning devices.
6. Detail the preoperative preparations and intraoperative setup for the procedure.
7. Explain the surgical approach, pertinent anatomy and physiology, and a complete synopsis of the full intraoperative procedure. Discuss any particular intraoperative challenges, unique supplies, instrumentation, equipment and suture material requirements as well as their purpose during the procedure.
8. Discuss the immediate and extended postoperative nursing plan, including nutritional recommendations, rehabilitation, bandaging techniques, and wound care.
9. Discuss detailed client education and provide a follow-up report summarizing the final laboratory test results and prognosis or final outcome.
10. Provide a list of the surgical instruments, equipment and supplies used as well as information on their proper care; also detail the sterilization techniques and methods employed to ensure sterility. List wrapping materials used and other pertinent data.
11. Include a list of references.

Each case report will contain a maximum of 7 pages and may contain a maximum of **five** 8.5 x 11 inch pages of case report content, a 1 page listing of all surgical instruments and equipment used, and 1 page stating references used, following the format provided. Each case report must be printed in a 10-point Times New Roman font, double-spaced, left and right justified, and with 0.5-inch page margins. *Case reports that do not meet these requirements will be rejected.* The case reports must be the original work of the applicant. **Please do not include personal client information such as owner name, address, phone numbers, etc.**

*Please review detailed AVST Case Report content instructions beginning on page 13. An AVST Case Report SAMPLE begins on page 15.*

### **Form 3 - AVST Small Animal Advanced Surgical Skills Form**

The AVST requires a licensed veterinarian or a VTS who has mastered the skill attest to your ability to perform the task. Small animal applicants must complete the Small Animal Advanced Surgical Skills Form. Interested potential large animal applicants must contact the AVST Past President at Hreusslamky@avst-vts.org.

Your testifier **must** sign at the bottom of the form to validate their initials throughout the form. If the testifier signing and validating any particular skill is a veterinary surgeon, ensure their name is also listed as the primary clinician in your case log summary or on your case report. **Mastery is defined as being able to perform the task safely, with a high degree of success, and without being coached or prompted. Mastery requires having performed the task in a wide variety of patients and situations.** The applicant must demonstrate mastery of **90%** of the skills on this form (equivalent to mastering 70 of the 78 listed skills for the Small Animal Advanced Surgical Skills Form). **The skills you have mastered must be demonstrated in your case logs and case reports.**

The AVST understands that some of the skills contained on the Small Animal Advanced Surgical Skills Form may be difficult to demonstrate in a typical surgical case log summary. Once you have documented at least 50 valid surgical cases in your case log you may utilize any remaining case log entries for the sole purpose of documenting these skills (e.g. “Dr. Roberts verified my ability to use an ultrasonic cleaner to process surgical instruments”, “Dr. Smith verified that I correctly identified orthopedic plating instrumentation and properly operated nitrogen powered equipment.” “Dr. Jones witnessed me safely and properly handling gluteraldehyde during cold sterilization of the arthroscope.” “Drs. Daniels and Murphy verified my OR conduct and ability to properly maintain asepsis.”) See the AVST Case Log Sample on page 10 for other creative ways to demonstrate these skills. **Please do not exceed 75 case log entries.**

If a skill was mastered at a prior place of employment during the current application period listed in your employment history, it must be validated by the veterinarian associated with the prior employment in the form of a signature on the Small Animal Advanced Surgical Skills Form or by a letter stating such.

The AVST Small Animal Advanced Surgical Skills Form example begins on page 22.

### **Form 4 - Waiver, Release and Indemnity Agreement**

This form must be signed and included in your application submission.

### **Form 5 - Continuing Education Record**

Applicant must submit a **minimum of forty (40) qualifying hours** of advanced continuing education (CE) pertaining to surgical procedures or associated topics that can be directly correlated to any of the AVST Advanced Surgical Skills. **However, no more than five (5) hours of anesthesia-related or analgesia-related CE will be accepted.** More than 40 hours of CE may be

submitted in order to compensate for any hours that may be deemed unqualified and subsequently rejected. Continuing education programs **MUST** be presented by a VTS member (in any of the specialty academies) or a veterinary diplomate of an American or European college from any of the following approved disciplines: American College of Veterinary Surgeons\*\* (ACVS), American College of Veterinary Internal Medicine (ACVIM to include small and large animal internal medicine, cardiology, oncology and neurology), American College of Veterinary Ophthalmologists (ACVO), American College of Veterinary Anesthesia and Analgesia (ACVAA), American College of Veterinary Emergency and Critical Care (ACVECC), American College of Veterinary Pathologists (ACVP), American College of Veterinary Radiology (ACVR), American College of Veterinary Clinical Pharmacology (ACVCP), American Veterinary Dental College (AVDC), American College of Veterinary Dermatology (ACVD), American College of Veterinary Sports Medicine and Rehabilitation (Canine) or (Equine) (ACVSMR), and the European College of Veterinary Surgeons (ECVS). You **MUST** list the CE provider's **diplomate/credential** status (DACVS, DACVAA, DACVIM, DECVS, VTS, etc.) on the CE form. **Failure to include the speaker's credentials will result in those hours being rejected.**

Only the continuing education activities outlined below will be applicable for this academy. Furthermore, submitting continuing education activities analogous to self-study (e.g. reading journal articles and passing an associated quiz) will not be accepted.

You must use the **Continuing Education Record** to submit only the continuing education attended by the applicant from **January 1, 2015** to the date you submit your application (previous 5 years.)

A photocopy of a CE Certificate provided by the organization or speaker must be provided as proof of attendance and should follow each CE sheet. Cancelled checks or other documents will not be accepted as proof of attendance.

Use the AVST's definition of continuing education to determine whether or not your CE meets the requirements regarding content. If the title of the CE does not provide enough information to show the CE was related to surgery, you may submit photocopies of the course description provided by the organization providing the CE. Each meeting attended should be listed on a **separate** copy of this form. For a particular meeting, each lecture attended should be listed on the form. In evaluating the CE resources, the AVST Credential's Committee is looking for diversity in the percentage of CE obtained from in-house, online, and meeting/conference attendance, therefore **no more than 50% (20 hours)** of in-house and online combined CE will be accepted. If more than 20 hours total of in-house and online CE are submitted, they will not contribute towards the total hours needed. **This means that it is MANDATORY that at least 20 hours of CE must come from national, state or local meetings. Furthermore, ensure that the people providing the CE are AVST approved speakers.**

### Continuing Education Definitions

#### **Nationally recognized meeting:**

A gathering of people for the purpose of providing continuing education in the field of veterinary medicine. National meetings are announced in journals typically read by professionals in the field of veterinary medicine. There is an expectation that continuing education at a nationally recognized meeting will be provided by lecturers or instructors who are considered experts in the subject they are discussing. You will need an official CE certificate. **Please be aware:** the people providing instruction may not meet the AVST requirements for acceptable CE.

#### **Local meeting:**

A gathering of people for the purpose of providing continuing education in the field of veterinary medicine. Local meetings are announced by state/city organizations. There is an expectation that continuing education at a local meeting will be provided by lecturers or instructors who are considered experts in the subject they are discussing. You will need an

official CE certificate. **Please be aware:** the people providing instruction may not meet the AVST requirements for acceptable CE.

#### **In-house training:**

Continuing education provided for people who work at a particular practice or institution. This type of continuing education is not open to the veterinary profession at large and lecturers or instructors often work at the practice or institution. You must be currently employed at the facility providing the in-house training. You may hire an outside speaker to come talk to your practice as part of in-house training. **Please be aware:** the people providing instruction may not meet the AVST requirements for acceptable CE. If part of your CE is in-house (meetings accessible only to technicians inside your facility) you will need an official CE certificate or a signed letter from the person supervising your attendance. The CE certificate or letter should detail where and when the training took place, the name and diplomate status of the CE provider, the objectives and goals, a statement of your satisfactory performance and the total hours provided. (1 hour of lecture = 1 hour of CE)

#### **Online training:**

Requires an official CE certificate or a signed letter from the person supervising your attendance in the program. The CE certificate or letter should detail when the training took place, the name and diplomate status of the CE provider, the objectives and goals of the training program, a statement of your satisfactory performance and the total hours provided. **Please be aware:** the people providing instruction may not meet the AVST requirements for acceptable CE.

### **Letter of Intent and Curriculum Vitae**

Please provide a brief letter that describes who you are and why you are interested in becoming an AVST member. Please tell us what you feel you can contribute to the AVST and what you plan to do with the certification once you have achieved it. Letters should be a maximum of ONE page in length, single-spaced, using 12-point font Times New Roman, and 1-inch margins. You must also include a current copy of your curriculum vitae.

### **Letters of Recommendation**

You must include **two signed letters** of recommendation with **each** copy of the application submitted. One of the letters must be from an ACVS/ECVS diplomate or a VTS member (any academy). The second letter must be from your supervising veterinarian. The letters should include details on training, ethical behavior and quality of skills. The letters may be sealed at the wish of the writer.

### **Final Instructions**

The AVST designed the application forms so you can complete most of the forms using your computer. You will need to complete the forms and print them out. With exception of the AVST Small Animal Advanced Surgical Skills Form and other application-associated signatures, all forms must be word-processed. Hand written forms will not be accepted. Remember, this is a professional application; spelling/grammar and overall presentation will be considered when the application is reviewed. The AVST reserves the right to contact the applicant and ask for additional documentation to verify information contained in the application.

You must submit **FIVE (5)** copies of your application packet; each copy **must** be professionally **bound** or **secured** in a binder. Loose forms will not be accepted or reviewed.

You may submit the **\$35.00** application fee using the PayPal page or you may enclose a check for **\$35.00** made out to: AVST Treasurer. Mail the completed applications to:

**ACADEMY OF VETERINARY SURGICAL TECHNICIANS  
6516 MONONA DR. # 246  
MADISON, WISCONSIN 53716**

Applications must be postmarked on or before **February 1, 2020**. Applications postmarked after this date will not be accepted. All submissions are final. Nothing may be added to an application after it has been received.

Included at the end of this application packet is a checklist to help assure you complete all the necessary steps to submit your application. **If your application is incomplete or late, it will be rejected.** You will receive notification of your eligibility to participate in the certification exam in **April 2020**. You may take the examination a total of 3 times in 3 years with the acceptance of the application.

## **Appeals**

If your application is rejected, you may appeal the decision within 30 days of the notification of rejection. Your appeal must be made in writing to the AVST Secretary and submitted to AVST, 6516 Monona Dr. #246, Madison, Wisconsin 53716. All appeal decisions will be based on the **original submitted application**. You may not submit **additional data** to augment the original application, therefore ensure the original application is complete and accurately reflects your qualifications.

### **Academy of Veterinary Surgical Technicians (AVST) Definition of Surgery**

- A. Veterinary Surgery includes the advanced knowledge of surgical procedures and instrumentation (including instrument identification and care), proper sterilization techniques, principles of infection control, aseptic techniques, perioperative patient care, physical rehabilitation and a thorough knowledge of the anatomy and pathophysiology of animals.
- B. Surgery is defined as the branch of medicine that deals with the diagnosis and treatment of injury, deformity and disease by manual and instrumental means. A procedure is considered surgical when it involves cutting of tissues or closure of a previously sustained wound. A surgical procedure may include elective, emergency, reconstructive, transplantation, replantation, cosmetic or minimally invasive procedures such as arthroscopy, laparoscopy, thoracoscopy and laser surgery.



**Professional History and Experience Form**

**Form 1**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Present Occupation/Title: \_\_\_\_\_

Are you a graduate of an AVMA accredited veterinary technology program? Y-N    Graduation Date: \_\_\_\_\_

Are you currently licensed/registered/possess a credential to legally practice in your state or province? Y-N  
Pass date of VTNE (or equivalent): \_\_\_\_\_

Are you a NAVTA member? Y-N    If Yes, please provide NAVTA member ID number: \_\_\_\_\_

Have you previously earned a VTS designation in any other discipline? Y-N  
If Yes, please list discipline and date VTS designation achieved: \_\_\_\_\_

List your employment history for only the previous 5 years.

Name of Practice/Institution:	Start Date:	End Date:
Type of Practice:	Average number of hours worked per week:	Percent of time devoted to surgery:
		Total surgery hours:

Name of Practice/Institution:	Start Date:	End Date:
Type of Practice:	Average number of hours worked per week:	Percent of time devoted to surgery:
		Total surgery hours:

Name of Practice/Institution:	Start Date:	End Date:
Type of Practice:	Average number of hours worked per week:	Percent of time devoted to surgery:
		Total surgery hours:

Name of Practice/Institution:	Start Date:	End Date:
Type of Practice:	Average number of hours worked per week:	Percent of time devoted to surgery:
		Total surgery hours:

Total surgery hours: \_\_\_\_\_

**SAMPLE**  
**You MUST download this form on the AVST Application Page!**  
**2020 History and Experience**































	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
12	Properly set-up an OR and possess anticipatory skills regarding needed equipment and instrumentation for a variety of orthopedic and neurologic procedures ( <u>minimum of 4</u> ) (e.g. fracture repair, TPLO, corrective osteotomies, hemilaminectomies, ventral slots)			
13	Properly set-up an OR and possess anticipatory skills regarding needed equipment and instrumentation for minimally invasive surgical procedures (e.g. laparoscopic procedures, arthroscopy, MIPO, C-Arm fluoroscopy guided procedures)			
14	Properly set-up an OR and possess anticipatory skills regarding needed equipment and instrumentation for ophthalmic surgical procedures (e.g. enucleation, blepharoplasty, phacoemulsification)			
	<b>SCRUB NURSE DUTIES:</b>			
15	Possess anticipatory skills and demonstrate appropriate tissue handling and/or passing of instrumentation while assisting the surgeon during abdominal procedures			

SAMPLE

You MUST download this form on the AVST Application Page

It is labeled 2020 Skills List



	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
16	Possess anticipatory skills and demonstrate appropriate tissue handling and/or passing of instrumentation while assisting the surgeon during thoracic procedures			
17	Possess anticipatory skills and demonstrate appropriate tissue handling and/or passing of instrumentation while assisting the surgeon during orthopedic and neurologic procedures			
18	Possess anticipatory skills and demonstrate appropriate tissue handling and/or passing of instrumentation while assisting the surgeon during minimally invasive procedures			

## Equipment

A VTS (Surgery) must have knowledge of various equipment specific to surgery, including proper applications, identification, care, maintenance, and troubleshooting.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
19	The ability/knowledge to set-up, maintain, and troubleshoot various types of equipment used for orthopedic and neurologic surgery ( <u>minimum of 4</u> ) (e.g. nitrogen powered equipment, battery powered equipment)			

	<b>Skill</b>	<b>Mastered</b> (Date observed)	<b>Signature of</b> <b>DVM/VTs</b>	<b>Reference</b> <b>Case #(s)</b>
20	The ability/knowledge to set-up, maintain, and troubleshoot various types of equipment used for arthroscopic surgery ( <u>minimum of 4</u> ) (e.g. video/picture capture devices, arthroscopic shaving devices, fluid delivery systems and camera and arthroscope handling)			
21	The ability/knowledge to set-up, maintain, and troubleshoot various types of equipment used for laparoscopic and thoroscopic surgery ( <u>minimum of 4</u> ) (e.g. video/picture capture devices, insufflation devices/equipment, and suction/lavage systems)			
22	The ability/knowledge to set-up, maintain, and troubleshoot equipment used for class IV, CO2 and diode laser surgery (e.g. appropriate PPE, signs, laser tips, suction)			
23	The ability/knowledge to set-up, maintain, troubleshoot and understand indications for various stapling or vessel sealing equipment ( <u>minimum of 4</u> ) (e.g. LDS, GIA, EEA, TA, Ligasure™, Surgiclip™, Hemoclips)			
24	The ability/knowledge to set-up, maintain, troubleshoot, and understand indications for electrocautery units			

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
25	The ability/knowledge to set-up, maintain, troubleshoot, and understand indications for portable or central suction units and suction instrumentation			

## **Instrumentation**

A VTS (Surgery) must demonstrate advanced knowledge in the application or use of all surgical instrumentation, including care and maintenance.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
<b>PROCEDURE SPECIFIC INSTRUMENTATION:</b>				
26	Identify, maintain, and explain indications of specific soft tissue surgical instrumentation for a variety of soft tissue procedures ( <u>minimum of 4</u> ) (e.g. Satinsky clamps, doyens, right angled clamps, ameroid constrictors)			
27	Identify, maintain, and explain indications of orthopedic and neurologic surgical instrumentation for a variety of procedures ( <u>minimum of 4</u> ) (e.g. ronguers, burrs, elevators, dural hooks, drill sleeves, drill guides, taps and countersinks, various screw, IM pin sizes and types)			
28	Identify, maintain, and explain indications for specific ophthalmic instrumentation (e.g. speculums, Castroviejo needle holders, lacrimal cannulas, Iris scissors)			
29	Identify, maintain, and explain indications for joint replacement instrumentation (e.g. power equipment types, reaming devices, cemented vs. non cemented uses)			

## Surgical Instrument Care and Sterilization Methods

A VTS (Surgery) must have knowledge of various sterilization methods. Sterilization is the process of destroying all microorganisms in or on a given environment to prevent infection.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
30	Know products and application recommendations for enzymatic vs detergent cleaning of surgical instruments			
31	Know application, maintenance, and troubleshooting of ultrasonic cleaners			
32	Know appropriate application of products used for the lubrication of surgical instruments			
33	Know appropriate use, application and disposal of products used for high-level disinfection of surgical instruments (e.g. glutaraldehyde, OPA)			
34	Set-up, load, maintain, troubleshoot, and know how to assess sterility when using either ethylene oxide or hydrogen peroxide gas plasma sterilization			
35	Set-up, load, maintain, troubleshoot, and know how to assess sterility when using steam sterilization			

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTs</b>	<b>Reference Case #(s)</b>
36	Obtain certification for use of either ethylene oxide or hydrogen peroxide gas plasma sterilization			
37	Demonstrate proficiency in preparing surgical packs using class II wraps (drape materials made of paper, linen or SMS polypropylene)			
38	Demonstrate proficiency in proper use of peel pouches (plastic/paper combinations) for individually processed items, including double pouch techniques			
39	Demonstrate knowledge of shelf life of sterile goods for various sterilization methods ( <u>minimum of 2</u> ) such as EO, hydrogen peroxide gas plasma, or steam			
40	Perform a biological test for any type of sterilizer and evaluate the results			

## **Surgical Procedures**

A VTS (Surgery) must have a diverse surgical procedure knowledge base. A surgical procedure is a medical procedure involving an incision with instruments performed to repair damage or arrest disease in a living body.

	<b>Skill</b>	<b>Mastered</b> (Date observed)	<b>Signature of</b> <b>DVM/VTS</b>	<b>Reference</b> <b>Case #(s)</b>
	<b>PATIENT PREPARATION AND POSITIONING:</b>			
41	Perform an appropriate surgical clip and aseptic prep application on intact epithelium			
42	Perform an appropriate surgical clip and aseptic prep application on torn or denuded epithelium			
43	Identify the appropriate anatomic landmarks for various soft tissue surgical procedures ( <u>minimum of 4</u> ) (e.g. adrenalectomy, thyroidectomy, perineal hernia) including performing an appropriate surgical clip, aseptic prep application and properly positioning the patient for surgery			
44	Identify appropriate anatomic landmarks for various orthopedic and neurologic procedures ( <u>minimum of 4</u> ) (e.g. ligament repair, joint replacement, ventral slot, hemilaminectomy), perform an appropriate surgical clip, aseptic prep application, and properly position the patient for surgery			
45	Identify appropriate anatomic landmarks for various minimally invasive procedures ( <u>minimum of 4</u> ) (e.g. laparoscopic cryptorchidectomy or liver biopsy, arthroscopy, C-Arm/fluoroscopy guided procedures), perform an appropriate surgical clip, aseptic prep application, and properly position the patient for surgery			

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
46	Identify appropriate anatomic landmarks for various ophthalmologic procedures ( <u>minimum of 2</u> ) (e.g. enucleation, eyelid mass removal, periocular mass) and perform an appropriate surgical clip, aseptic prep application, and properly position the patient for surgery			
<b>SURGICAL CARE EXPERTISE:</b>				
47	Demonstrate an advanced knowledge of various types of soft tissue procedures ( <u>minimum of 4</u> ) including, but not limited to: abdominal, thoracic, perineal, urogenital, integument, endocrine, head/ neck and aural procedures			
48	Demonstrate an advanced knowledge of various methods used for orthopedic and neurologic procedures ( <u>minimum of 4</u> ) such as using minimally invasive or external fixation techniques (e.g. external ring fixators), ORIF (e.g. plating or IM pin fixation), tenotomy or neurectomy procedures and/or joint replacement techniques			
49	Demonstrate knowledge of orthopedic surgical procedures utilizing allograft products or autograft techniques			
50	Demonstrate an advanced knowledge of various types of minimally invasive surgical procedures ( <u>minimum of 4</u> ) (laparoscopic, arthroscopic, etc.)			
51	Demonstrate an advanced knowledge of ophthalmic surgical procedures			

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
52	Identify various suture patterns and indications ( <u>minimum of 2</u> )			
53	Demonstrate knowledge of the appropriate use of various suture materials ( <u>minimum of 2</u> ) in different procedures, tissue layers or organs			
54	Demonstrate knowledge of intraoperative coagulation aids (e.g. Surgicel®, Gelfoam®)			

## **Bandaging and Wound Management**

Bandages are materials used to protect, immobilize, compress, or support a wound or injured area of the body. A VTS (Surgery) must possess knowledge in external coaptation methods and wound care techniques.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
55	Demonstrate knowledge regarding the phases of wound healing and proper wound management			
56	Demonstrate knowledge of moist wound healing and different primary layers available (e.g. calcium alginate, polyurethane, honey, hydrogel)			
57	Identify bandage materials and properly place a variety of bandages ( <u>minimum of 2</u> ) including, but not limited to: tie-over bandages, Robert Jones, modified Robert Jones, and wet-to-dry bandages			
58	Demonstrate an advanced knowledge of and indications for coaptation, including proper placement of splints and casts			



	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
59	Evaluate a variety of bandages ( <u>minimum of 4</u> ) and demonstrate knowledge of potential complications			
60	Perform a proper wound lavage and select an appropriate solution or product for wounds			
61	Demonstrate the proper care of skin grafts or flaps			
62	Evaluate surgical wounds and incisions for potential complications (e.g. seroma, infection, dehiscence)			
63	Demonstrate knowledge and appropriate use of novel wound treatment therapies (biotherapy [e.g. maggots or leeches], hyperbaric oxygen chamber, class IIIa or IIIb low level laser therapy [LLLT])			
64	Maintain and know the indication for passive, active and vacuum assisted drains			

## **Pharmacology and Laboratory**

A VTS (Surgery) needs to understand indications and usage guidelines for a variety of antimicrobial agents used in the perioperative period.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
65	Demonstrate indications and appropriate use of peri-operative antibiotics including beta-lactam and fluoroquinolone antibiotics			
66	Demonstrate indications and appropriate use of antimicrobials used for topical wound management and/or burns			

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTs</b>	<b>Reference Case #(s)</b>
67	Demonstrate indications and appropriate use of time-released antibiotic impregnated gels/liquids (e.g. Clinzgard®, R-Gel)			
68	Demonstrate proper tissue handling of samples submitted for histology (e.g. formalin ratios, inking or labeling margins)			
69	Demonstrate proper specimen handling of fluid and tissue samples collected for culture and cytology			

## Personal Safety

Maintaining an individual's safety is imperative while working in a surgical environment.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTs</b>	<b>Reference Case #(s)</b>
70	Demonstrate proper radiation safety and the importance of limited exposure			
71	Demonstrate proper fluoroscopy/C-ARM safety in a surgical setting			

## Adjunct Surgical Skills

A VTS (Surgery) needs to be well rounded and have advanced knowledge and skills in other areas considered pivotal in the management of surgical patients.

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTs</b>	<b>Reference Case #(s)</b>
72	Demonstrate advanced knowledge and ability to obtain high-quality diagnostic orthopedic radiographs for a variety of procedures ( <u>minimum of 2</u> )			

	<b>Skill</b>	<b>Mastered (Date observed)</b>	<b>Signature of DVM/VTS</b>	<b>Reference Case #(s)</b>
73	Demonstrate use of interventional radiology techniques (e.g. tracheal stent placement, fluoroscopy-assisted closed fracture reduction)			
74	Demonstrate knowledge, indications for and ability to care for and maintain chest tubes			
75	Demonstrate knowledge and ability to place purse string and/or finger trap suture			
76	Demonstrate knowledge and use of stem cell therapy			
77	Demonstrate knowledge and capabilities to perform industry accepted modalities of rehabilitation (e.g. heat therapy, cryotherapy, low level laser therapy [LLLT], extra-corporeal shock wave therapy [ESWT])			
78	Demonstrate advanced knowledge of at least <u>4</u> different methods of providing <b>analgesia</b> under a variety of circumstances (e.g. regional/epidural, parenteral, transdermal, local)			

### **Anatomy and Physiology Knowledge**

To assist in surgery, a VTS (Surgery) must have a thorough understanding of the structures of the body and how they function. Throughout your logs and case reports we should be able to see that you have advanced knowledge of anatomy and physiology related to each surgical procedure (as outlined in skills 11-14) and be able to identify potential complications and post-operative considerations for each.

**The AVST Small Animal Advanced Surgical Skills validation form follows on next page:**

# Academy of Veterinary Surgical Technicians

## Small Animal Advanced Surgical Skills Form - Form 3

The applicant is required to state whether or not he/she has mastered the skills on this form. The AVST is aware that some states or provinces may not allow a task to be performed by a credentialed veterinary technician. The AVST requires that a Veterinary Technician Specialist (of any specialty) or a veterinarian who has mastered the skill attest to your mastery of each skill on this form. Your testifier **must** sign at the bottom of the form to validate their initials throughout the form. If the testifier signing and validating any particular skill is a veterinary surgeon, ensure their name is also listed as the primary clinician in your case log summary or on your case report.

*Mastery is defined as possessing an outstanding skill or having expertise. The applicant must be able to perform the task safely, with a high degree of success, and without being coached or prompted. Mastery requires having performed the task in a wide variety of patients, situations, and a multitude of times.*

**Applicant Name:** \_\_\_\_\_

I, the undersigned, declare that **I have read the AVST Small Animal Advanced Surgical Skills Form**. I further attest that the above-named applicant has achieved the **AVST definition of mastery** for the above skills that are marked with my signature.

_____ <b>Printed Name</b>	_____ <b>Signature</b>	_____ <b>Initials</b>	_____ <b>Degree</b>
------------------------------	---------------------------	--------------------------	------------------------

_____ <b>Printed Name</b>	_____ <b>Signature</b>	_____ <b>Initials</b>	_____ <b>Degree</b>
------------------------------	---------------------------	--------------------------	------------------------

_____ <b>Printed Name</b>	_____ <b>Signature</b>	_____ <b>Initials</b>	_____ <b>Degree</b>
------------------------------	---------------------------	--------------------------	------------------------

_____ <b>Printed Name</b>	_____ <b>Signature</b>	_____ <b>Initials</b>	_____ <b>Degree</b>
------------------------------	---------------------------	--------------------------	------------------------

**Waiver, Release and Indemnity**

**Form - 4**

I hereby submit my credentials to the Academy of Veterinary Surgical Technicians (AVST) 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 AVST Credentials Committee 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 AVST Credentials Committee and thereby voluntarily release, discharge, waive and relinquish any and all actions or causes of actions against the Academy of Veterinary Surgical Technicians and each and all of its members, committees, officers, examiners and assigns from and against any liability whatsoever in respect of any decisions or acts that they may make in connection with this application, the examination, the grades on such examinations and/or the granting or issuance, or failure thereof, of any certificate, except as specifically provided by the Constitution and Bylaws of this organization. I agree to exempt and relieve, defend and indemnify, and hold harmless the Academy of Veterinary Surgical Technicians, and each and all of its members, committees, officers, examiners and assigns against any and all claims, demands and/or proceedings, including court costs and attorney's fees, brought by or prosecuted for my benefit, extended to all claims of every kind and nature whatsoever whether known or unknown at this time. I further agree that any certificate which may be granted and issued to me shall be and remain the property of the Academy of Veterinary Surgical Technicians.

I certify that all information provided by me on the application is true and correct. I acknowledge that I have read, understand and agree to abide by the above two paragraphs.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Please print your name)

**CONTINUING EDUCATION RECORD**

**Form 5**

Date(s) of Conference:

Name of conference, meeting, etc:

Organization or Person providing the CE:

<b>Speaker Name</b>	<b>Credentials</b>	<b>Title of Presentation</b>	<b>Hours</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Total Time** \_\_\_\_\_

**Type of CE:**

Continuing education programs **MUST** be presented by a VTS member (in any of the specialty academies), a veterinary diplomate of an American or European college, or other qualified speakers as outlined in the AVST Application Packet. You **MUST** list the CE provider's **diplomate/credential** status (DACVS, DACVAA, DACVIM, DECVS, VTS, etc.) on the CE form. **Failure to include the speaker's credentials will result in those hours being rejected.**

To: Supervising Veterinarian or Veterinary Technician Specialist mentor:

This letter has been presented to you by a credentialed veterinary technician currently employed at your facility who has an interest in pursuing membership in the Academy of Veterinary Surgical Technicians (AVST). In order to achieve this objective your technician will complete a two-step process of submitting an application packet for approval by the credentials committee and sitting for a comprehensive examination. Successful completion of both steps will earn your technician the title of Veterinary Technician Specialist in Surgery. A technician with VTS (Surgery) certification demonstrates superior knowledge in the care and management of veterinary surgical cases while promoting patient safety, consumer protection and professionalism.

The application process is especially time consuming and your technician will need your support and guidance throughout the process. I recommend that you read the entire application packet to become familiar with the areas in which your technician will require your assistance. Listed below are some areas of the application that are particularly important as well as some suggestions and guidelines to assist you in helping your technician prepare an application for submission.

- All cases contained in the case log must be performed **within the year** prior to the application deadline of December 31.
- All cases must be performed at the facility where the technician is employed or while under the supervision of the employer at a different location (i.e., your clinic performs an MRI at a different location but you and your technician are still in charge of the case and perform the surgery).
- Allow your technician to assist in developing a surgical plan from start to finish. The technician should be able to anticipate the needs of the surgeon in performing the surgical procedure, including instrumentation, equipment, suture, aseptic technique, post operative care, bandages, diagnostics, etc. that is specific for each surgical case and discuss with you why they selected each instrument, piece of equipment, suture, bandage, radiographic view, etc.
- The AVST requires that a licensed veterinarian or VTS member attest to the technician's ability to **master** the required percentage of **skills** on the AVST Advanced Surgical Skills Form. Mastery is defined as being able to perform the task safely, with a high degree of success and without being coached or prompted. Mastery requires having performed the task in a wide variety of patients and situations.
  - Look over the skills list completely and **only** sign off on a skill if you feel confident that your technician meets the definition of mastery.
  - All signed skills must be demonstrated in the case logs.
  - Assist your technician in acquiring new skills for the application process.
- Send your technician to at least one national meeting a year to give them ample exposure to the most current information related to surgery and allow them to accumulate continuing education credits.

On behalf of the Academy of Veterinary Surgical Technicians, I would like to thank you for supporting your technician through the application process. If you have any questions please do not hesitate to contact me at [Heusslamky@avst-vts.org](mailto:Heusslamky@avst-vts.org).

Sincerely,



Heidi Reuss-Lamky, LVT, VTS (Anesthesia & Analgesia, Surgery) , FFCP  
Past President of the Academy of Veterinary Surgical Technicians

# Academy of Veterinary Surgical Technicians Application Checklist

PLEASE INCLUDE A COPY OF THIS CHECKLIST IN YOUR APPLICATION PACKET  
**YOU MUST PLACE EACH ITEM BELOW IN YOUR APPLICATION PACKET IN  
EXACTLY THE FOLLOWING ORDER:**

- 1. Professional History and Experience Form. **(Form 1)**
- 2. Photocopy of your current in-date license, registration, or certification and photocopy of your diploma (if applicable) from an AVMA approved program.
- 3. Case Log of at least 50 cases, but not more than 75. **(Form 2)** Include the AVST Abbreviation List.
- 4. Four Case Reports – include the Case Log number.
- 5. AVST Small Animal Advanced Surgical Skills Form. **(Form 3)**
- 6. Waiver, Release and Indemnity Agreement. **(Form 4)**
- 7. Continuing Education Record for each meeting attended. **(Form 5)**
  - a. At least 40 hours, but not more than 20 hours from in-house/online.
  - b. Proof of attendance should follow each meeting page.
  - c. Providers credential status must be listed for all speakers.
- 8. Include your letter of intent and curriculum vitae, and two letters of recommendation. One of the letters must be from an ACVS/ECVS diplomate or a VTS member (any academy). The second letter must be from your supervising veterinarian.
- 9. Include the \$35.00 application fee made out to the AVST. Provide a **copy of your PayPal receipt** if you paid the application fee online, or include a **check** for \$35.00 payable to the AVST Treasurer. If enclosing a check as payment, please put it in a separate envelope labeled “AVST PAYMENT” and place it on top of the 5 copies of your application packet.
- 10. FIVE (5) copies of your application packet professionally bound or secured in a binder.

Mail all copies of your application packet to:

**ACADEMY OF VETERINARY SURGICAL TECHNICIANS  
6516 MONONA DR. # 246  
MADISON, WISCONSIN 53716**

**All applications must be postmarked on or before February 1, 2020.**