



AVNT Case Log Report
40 Minimum required- 60 maximum

Log 1

Applicants Name _____ Jane Doe or John Doe _____

Case log # _____ 1 _____ **Date** _____ December 26, 2016 _____

Patient ID _____ Fluffy _____

Species/ Breed _____ Feline/ DLH _____

Age _____ 4 year _____ **Sex** _____ Female (S) _____ **Wt.** _____ 10.4 lbs. _____ **Kg.** _____ 4.73 kg _____

Diagnosis

_____ Suspect renal failure (acute on chronic vs. acute). _____

Advanced Nutrition Skills & Procedures performed

_____ BCS (1), MCS (2), obtained nutritional history (3), physical exam (5), calculated RER (7), calculated caloric requirement (10), calculated feeding requirements (11), perform an automated CBC (25), performed urinalysis(26). _____

Advanced Nutrition Skills & Procedures assisted

_____ Nutrition plan (6), educated clients regarding diet use (52), educated clients regarding importance of diet compliance and disease management (53), educated clients regarding nutritional excesses and deficiencies (54). _____

Outcome

_____ Fluffy was discharged after 3 days in the hospital. Written instructions stressed the importance of feeding a canned diet, 2 cans a day rather than his normal dry kibble diet and increasing water intake. Suggestions to increase water intake included allowing to drink from faucet and water fountain. Rechecked 1 week post discharge revealed increase of kidney values and sodium. Recommended transition to Therapeutic renal food (name brand and name if like), 2 cans a day. Additional follow up to be provided by the referring veterinarian. _____

****Include a copy of the abbreviation list with case log report****



AVNT Case Log Report

Log 2

Case log # 2

Date December 27, 2016

Patient ID Sterling

Species/ Breed Canine/ Schnauzer

Age 8 year Sex Male (N) Wt. 21.8 lbs Kg. 9.9 kg

Diagnosis

Cushing's disease, diabetes mellitus, diabetic ketoacidosis, pancreatitis.

Advanced Nutrition Skills & Procedures performed

BCS (1), physical exam (5), calculated RER (7), CBC (25), urinalysis (26), ACTH stimulation test (35), client education regarding diet compliance and disease management (53).

Advanced Nutrition Skills & Procedures assisted

Developed a nutrition plan (6), calculated caloric requirements (10), and calculated feeding requirements (11).

Outcome

Sterling was discharged from the hospital with written discharges including a nutritional recommendation to feed ½ cup of canine maintenance food every 12 hours at time of insulin administration (12). Sterling continues to be monitored by the Internal Medicine service.

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AVNT Case Log Report

Log 3

Case log # 3

Date December 31, 2016

Patient ID Goldie

Species/ Breed Canine/ Golden

Age 6 year Sex Male (N) Wt. 74.5 lbs Kg. 33.8lbs

Diagnosis

Inflammatory bowel disease (IBD)

Advanced Nutrition Skills & Procedures performed

BCS (1), MCS (2), physical exam (5), resting cortisol (35), coblamin (36), folate, Spec cPL (36), IM and IV injections (20), canine endotracheal intubation (23) maintained on Isoflurane (21), patient positioning for endoscopy (44), endoscopic equipment care and maintenance (40), proper sterilization of equipment (42).

Advanced Nutrition Skills & Procedures assisted

Calculated and managed IV fluid therapy (19), upper GI endoscopy, obtained and submitted histopath (33) of stomach and duodenum, monitored progress of nutrition therapy (51), educated clients regarding diet use (52), educated clients regarding importance of diet compliance and disease management (53).

Outcome

Goldie was discharged from the hospital with a written plan to transition to Therapeutic food (Can name therapeutic food if like), 2 cups twice daily (52, 53). Goldie continues to follow up with the Internal Medicine service and at last recheck was doing well.

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AVNT Case Log Report

Log 4

Case log # 4

Date January 4, 2017

Patient ID Max

Species/ Breed Feline / DLH

Age 12 year Sex Male (N) Wt. 13.44 lbs. Kg. 6.1kg

Diagnosis

Diabetes mellitus, ketosis, metabolic alkalosis, elevated liver enzymes - suspect a combination of cholangiohepatitis and hepatic lipidosis but cannot be certain without a liver biopsy, possible chronic pancreatitis.

Advanced Nutrition Skills & Procedures performed

Physical exam (5), calculate RER (7), calculated caloric requirements (10), calculated feeding requirements (11), placed and managed NE tube (13), fluid therapy calculation and management (19), SQ drug administration (20), demonstrate advanced knowledge of anatomy and physiology as it relates to nutrition (41), obtained post procedure radiographs (45), sutured NE tube (46).

Advanced Nutrition Skills & Procedures assisted

Nutritional plan (6), monitor progress of nutrition therapy (51), educate clients regarding diet use (52), educate clients regarding importance of diet compliance and disease management (53), educate clients regarding nutritional excesses and deficiencies (54).

Outcome

Max was discharged from the hospital with a written nutritional plan (6) to feed Therapeutic food (can name therapeutic food) twice a day at the time of insulin administration. He returned for scheduled rechecks, his insulin and amount fed were adjusted as needed. Max has since gone into remission and currently requires no insulin therapy.

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AVNT Case Log Report

Log 5

Case log # 5

Date February 4, 2017

Patient ID Sandy

Species/ Breed Canine/ Shih Tzu

Age 12 years Sex Female (S) Wt. 9.25 lbs. Kg. 4.2 kg

Diagnosis

Anorexia, Inflammatory bowel disease (IBD).

Advanced Nutrition Skills & Procedures performed

BCS (1), physical exam (5), canine endotracheal intubation (23), esophageal feeding tube management in hospital (30), client education regarding feeding tube use and care (31), wound management (37), endoscopic equipment care and maintenance (40), proper sterilization of equipment (42), clip and sterile prep for e-tube placement (43), maintained patient on Isoflurane, patient positioning for endoscopy (44), post procedure radiograph (45), feeding tube management (49), diet use (52), nutritional excesses / deficiencies (54).

Advanced Nutrition Skills & Procedures assisted

Nutritional plan (6), Esophagostomy tube placement (14), diet transition from therapeutic diet to maintenance diet (18), calculated and managed IV fluid therapy (19), upper GI endoscopy, obtained and submitted histopath (33) of stomach and duodenum, feeding tube removal (50), and monitored progress of nutrition therapy (51).

Outcome

Sandy was discharged with an esophageal feeding tube in place. She improved over the next several weeks with at home assisted feedings and the feeding tube was removed. Additional details are included in a case report submitted with this case log.

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