

Pre-registration Candidate Objective Structured Clinical Examination (OSCE) Guide

Updated April 2024

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Introduction

This handbook provides information to individuals who are required to pass the RCVS Pre-registration Objective Structured Clinical Examination (OSCE). This includes;

- Student Veterinary Nurses enrolled with the RCVS completing a qualification which holds RCVS provisional accreditation.
- Holders of veterinary nursing qualifications issued outside the UK who have had their qualification and experience assessed as suitable for entering the Pre-registration examination.

This guidance provides details about entering the examination, the examination day, and the results process.

An OSCE is a multi-station practical examination where students have a fixed period of time to complete a series of complex and non-complex practical tasks. The examination covers the following topics:

- Assessment and Nursing Care
- Communication
- Dressings and Bandages
- Supporting Veterinary Anaesthesia
- Veterinary Diagnostic Imaging
- Veterinary Laboratory Techniques
- Veterinary Theatre Practice

The examination is designed to assess your skills, competences and practical application of clinical situations detailed in the RCVS Day One Skills for Veterinary Nurses. The examination is held up to three times a year. The examination dates and last entry dates are detailed in this guidance.

The content of the examination reflects current clinical procedures undertaken in the UK. These may differ from other countries and therefore you should ensure that you are familiar with the methodology you are required to follow.

The examination consists of ten OSCE stations. You have a maximum of ten minutes to complete each station. The scenario and a marking scheme are made available to you beforehand. It is strongly advised that you spend time in a UK veterinary practice going through these tasks and ask veterinary nurses to observe you. You will almost certainly be familiar with most of the techniques but the equipment available in the UK may differ.

Entry requirements – Educated outside the UK

To be eligible to enter the Pre-registration OSCE you must first have achieved a qualification, which has been accepted by the RCVS, and been informed that you need to pass the examination.

Entry requirements – UK students

UK Students studying on a course with provisional accreditation may enter the examination prior to completion of their qualification, but only once they have passed all modules referenced to the RCVS Day One Skills and RCVS Day One Competences, including the completion of 1,800 hours of clinical experience. If you have not completed the required hours, contact us to discuss the possibility of being permitted to enter the examination.

It should be noted that once you achieve your qualification your student status will end. You may continue to work in veterinary practice for the purposes of preparing for the examination but must enroll for a Period of Supervised Adaptation (PSA) if your role requires you to deliver nursing care or undertake surgical procedures. Individuals registered for the PSA must be supervised in the same way that they would have been when they were enrolled as student veterinary nurses.

For further information email prereg.vn@rcvs.org.uk

Format of the Examination

The RCVS Pre-registration Objective Structured Clinical Examination (OSCE) is set to standards outlined in the [RCVS Day One Skills for Veterinary Nurses](#). These are the minimum essential skills that the RCVS expects all UK educated veterinary nursing students to have met when they qualify.

The OSCE examination needs to be passed alongside the theory (Multiple Choice Question (MCQ)) examination. Information about the MCQ examination is contained in a separate candidate examination guide. The examinations can be attempted in any order, but all examinations (OSCE and MCQ) must be passed within an 18-month period of passing the first examination.

If you do not complete all assessments during this time period then you will only be required to resit any assessments you were unsuccessful in along with those you achieved outside the eighteen month window.

Important note – The Theory (MCQ examination was introduced at the end of 2023. Anyone who applied to have their qualification assessed before the examination was introduced is only required to complete the OSCE. Please check the letter sent to you detailing the assessments you are required to complete.

If your letter says

I am pleased to confirm that your qualification and experience has been deemed comparable to the qualification undertaken by veterinary nurses in the UK. You are therefore eligible to apply to sit the RCVS Pre-Registration OSCE (practical) examination.

then you only need to sit the OSCE. You will not be sent the theory examination guide.

If your letter says

I am pleased to confirm that your qualification and experience has been deemed comparable to the qualification undertaken by veterinary nurses in the UK. You are therefore eligible to apply to sit the RCVS Pre-Registration OSCE (practical) examination and Multiple-Choice Examination (theory).

Then you will need to sit the OSCE and theory examination.

UK graduates currently only need to complete the OSCE.

If you are unsure about which examinations you need to complete, then please contact the RCVS.

Entering the examination

To enter the examination please visit the RCVS 'My Account' area at www.rcvs.org.uk/login and log in using your username and password. Select the option 'Apply Pre registration exams'. Complete the form and make the payment.

Please note that your entry will not be accepted until the payment is received. If your payment is late, then you may not be able to enter the examination.

We will email you to confirm your application has been received. Once all applications have been received, we will confirm the date and time of your appointment along with the password you will need to open your examination results.

If your examination fee is being paid by your college, we will be able to send an invoice on receipt of a written request to do so. Please note that we are unable to invoice employers.

Please note the focus of the examination is normally small companion animals kept as pets in the UK. If you have a specific equine qualification, please discuss with us at least 4 months before the examination. You will be provided with a handbook containing the possible Equine OSCE stations

Maximum candidate numbers

Our examination centre is normally booked for two days, this allows us to examine a maximum of 40 candidates. If we exceed this number, we will try to accommodate everyone by arranging further examination sessions, but this is not always possible. Priority is given to those who enter the examination first. You are therefore advised to enter the examination as soon as possible.

The examination day

You must attend the examination at your allotted time. You will be given a briefing before the exam. It is important to arrive at least thirty minutes before your start time. The Examination will last for 2.5 - 3 hours.

You are required to bring 3 pairs of surgical gloves in your size. This is to ensure that you have correctly fitting gloves of a familiar type should any of the tasks require them.

You must bring your **passport** or driving licence as identification (national ID card for EU citizens also accepted). This must be an up-to-date, valid document. **If you arrive without the correct identification, you will be turned away from the examination** (if in doubt about the admissibility of your photo identification please contact the RCVS).

If you hold a qualification issued outside the UK you should bring your original qualification certificate(s) and Passport to the examination to be checked. If you do not bring your certificate(s) then you will be able to sit the examination but will not be able to enter the Register until these have been seen. This may mean that you will be required to bring them to the RCVS offices in London.

Normally a maximum of ten candidates will sit the exam at the same time. There may be several groups. Where applicants attend the same college or qualified in the same country, we will try and place them in the same group so that they can travel to the examination together.

When you enter the examination room you will see 10 screened booths. You will be assigned the first task. The task scenario will be placed on the chair outside.

An electronic timing system will be used. You will hear an announcement instructing you to read the scenario. You will be given approximately two minutes to do this. You will then be instructed to enter the booth. The examiner may provide you with additional instructions and the announcer will tell you to start the task.

After eight minutes you will be told that you have two minutes remaining. After 10 minutes you will be told to stop what you are doing and leave the station. Once all candidates have left the stations you will be moved to the next station. There will be a pause between stations to allow the examiners to complete their marking and reset the station. You will be told when to read the next scenario. This will continue until all the tasks have been completed.

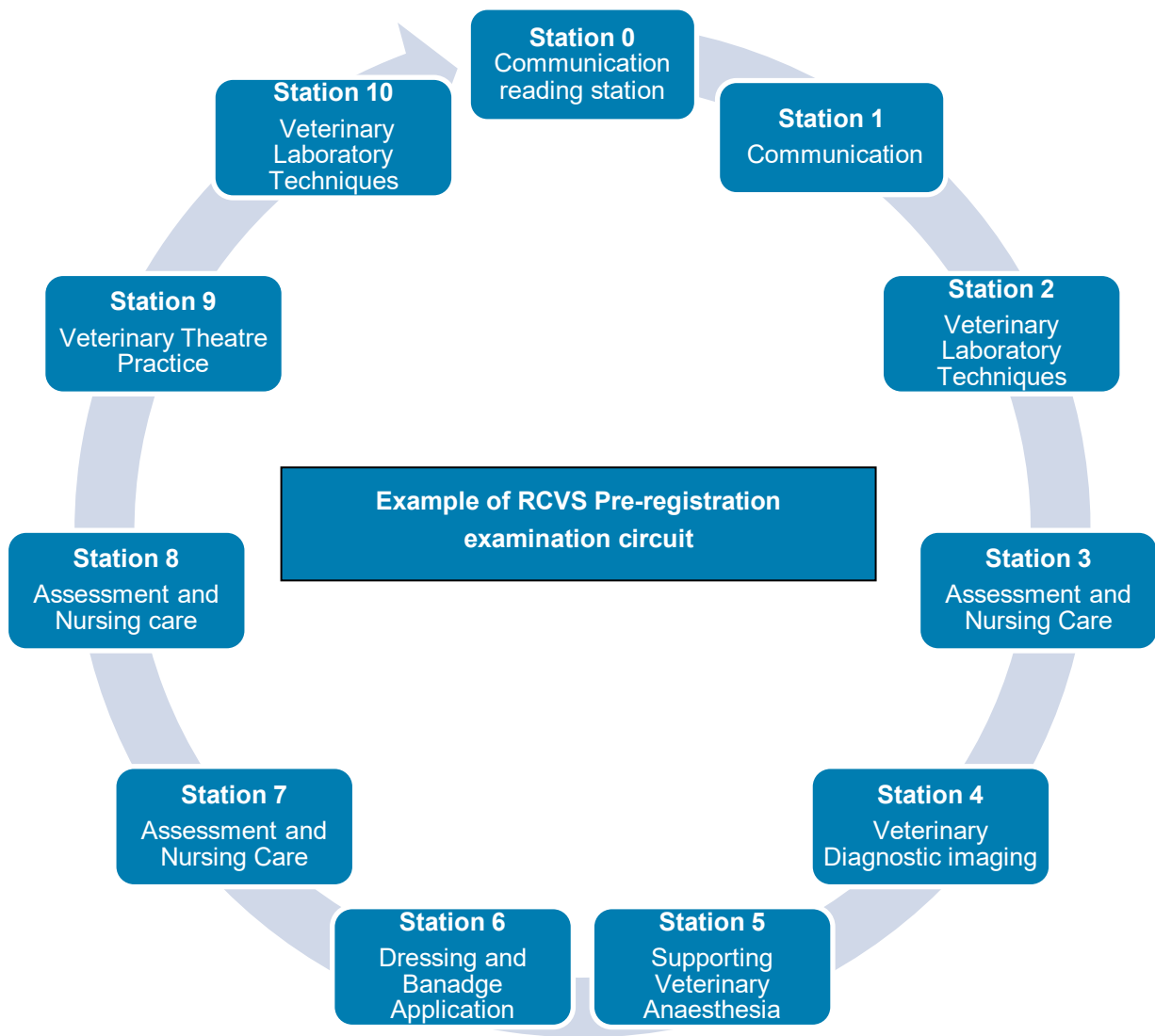
Short comfort breaks may be requested, but we ask that you keep these to a minimum because the entire examination circuit will be paused until you return to the room.

You are required to carry out the patient care in the way you will when you are a Registered Veterinary Nurse (RVN). We do not use live patients; instead, we use veterinary models, which have been adapted for the purpose of the examination. You are expected to provide the treatment as if the patient is a real animal.

You will be told if the patient is conscious or not.

At each OSCE station there will be one or more skills to complete. Inside each station you will find a copy of the scenario and all the necessary equipment required to complete the skill. This may include a

model patient and hospital record. Infection control equipment (hand gel, aprons, and gloves) will be available if you are expected to use them.





The examiner will assess you against the published marking criteria. You are being assessed on your practical skills. Some candidates find it useful to talk while completing the task, but unless specifically requested in the scenario you will not be marked on your verbal explanation. You must not talk to the other candidates while in the examination room.

You may leave the booth when you have completed everything you need to do. Do not worry if you complete the task early. Finishing early does not necessarily indicate that you have done something wrong; however, you should check that you have not forgotten to do something before leaving the station.

Once you have completed all the stations you will be allowed to leave the test centre. Your results will be sent to you by email within 4 weeks of the examination. We normally provide you with 24 hours notice that results are being published.

OSCE stations are revised from time to time. No changes will be made in the four weeks prior to the examination. The date of the last update is detailed on each OSCE station.

Video recording

During the exam, RCVS may take a video and audio recording of candidates within an OSCE station which will then be assessed at a later date or used for quality assurance processes.

This Data will be processed in compliance with the General Data Protection Regulations and Data Protection Act 2018.

We will be processing this data on a public task basis to carry out our functions in the public interest i.e.

in order to administer the Pre-registration examination and ensure its integrity.

The data will be stored for no longer than is necessary and technical and security measures are in place to ensure the data remains strictly confidential. Videos will normally be deleted after any examination appeals have been concluded.

For further information on how RCVS processes data and if you have any questions then please see our online privacy policy <https://www.rcvs.org.uk/privacypolicy/>

Disposing of waste

It is your responsibility to familiarise yourself with UK veterinary waste requirements. Helpful information is available on our website <https://www.rcvs.org.uk/news-and-views/news/hazardous-waste-responsibilities/>

Equipment

All equipment required to complete the examination will be provided with the exception of surgical gloves. You may bring pens, scissors and calculators if you wish, but these will be provided where required.

Calculations

Some of the OSCE stations require you to complete a calculation. These often relate to drug dosages. The way the dose rate is presented is taken from the manufacturers data sheets. You are not required to remember dose rates. These will be provided. You will either be provided with scales to weigh the patient, or the weight will be contained on the patient record. **You will also be provided with the concentration of the drug i.e. 10mg/ml.**

If you are unfamiliar with the way that manufacturers dose rates are written then it is advisable to view examples published in the Noah datasheet compendium, BSAVA formulary or online. We have also provided some examples below.

The use of calculators in the practical examination is permitted. These will be provided where required.

Examples of information you could be provided to calculate a dose of medication / drug to administer to a patient.

- 5 mg/kg bodyweight, corresponding to 1 ml/5 kg bodyweight, daily by subcutaneous injection for 5 days.
- 10 mg/kg bodyweight, corresponding to 2 ml/5 kg bodyweight, once daily by intramuscular injection for 10 consecutive days.
- 2.5 mg/10 kg bodyweight (equivalent to 0.5 ml/10 kg), twice daily for 10 days to be given orally in tablet or capsule.

- 1.7 mg/10 kg bodyweight (equivalent to 0.34 ml/10 kg), three times daily via intravenous injection.
- 50 mg/kg bodyweight per day (i.e. 0.4 ml/kg bodyweight), preferably given in two equally divided doses (i.e. 25 mg equivalent to 0.2 ml/kg bodyweight twice daily) for 5-7 days.
- mg/kg/day split into two equal doses to be administered subcutaneously.
- mg/kg body weight (i.e. 0.4 ml/10 kg bodyweight) given in one dose orally (liquid)
- 5 mg/kg body weight (0.2 ml/kg bodyweight) orally diluted in water, twice daily for 7 days.
- 40 mg/kg bodyweight daily by subcutaneous injection for 5 days.
- 0.10 ml/kg bodyweight twice daily for 10 days to be given orally as tablet or capsule.

Examples of information you could be provided with to calculate Intravenous fluid therapy rates

You will be provided with the following information.

Maintenance rate calculations	X mls/kg/day
Drip factor	X drops/ml
Other information	Administer the fluid over a period of X hours

Example of information you could be provided with to calculate a fresh gas flow for Anaesthesia

You will be provided with the

- Weight of the patient
- Tidal Volume
- Respiration rate

You will not be provided with the system factor

You must show your workings on the sheet provided and remember to include the units. An example of the calculations sheet is included on the next page.

OSCE Exam Calculation Sheet (Example)

TASK: ANC 01

If more space is required, please continue overleaf.

Final Answer including correct unit of measurement:

Passing criteria

In order to pass the examination, you need to achieve and pass a minimum of 7 stations and achieve a minimum total score. Each of the steps within the OSCE is weighted. This means that some steps attribute one mark towards your final score while others contribute up to ten marks. The more important the step, the higher the mark. Steps where patient safety is paramount will be worth more marks. Due to the different complexity in each OSCE station the pass marks differ. RCVS use the Angoff method to set the pass mark. Pass marks are not published ahead of the examination, but you will be provided this information with your results.

Feedback

You will receive a summary report and copies of each of your mark sheets as completed by the examiner. This will detail the score you achieved in each OSCE station and your total score. The passing score for each station will also be provided. An example of a score report is provided on the next page.

Example of an OSCE summary report

RCVS Pre-Registration Veterinary Nursing Examinations (OSCE) April 2023

Results Summary for **Katie Francis Crafter**

To pass the RCVS Pre-Registration Objective Structured Practical Examination (OSCE) you need to achieve:

- A pass in a minimum of 7 stations
and
- A combined score for all questions (OSCE stations) equal to or higher than the total pass mark of all the questions used on the day of the examination. For April 2023, the minimum score is 795.

Please note each step on the mark sheet has a different number of marks assigned to it.

OSCE Station	Your Score (%)	Minimum Acceptable Score (%)	Achieved
CNA 06	92	80	Yes
CNA 09	81	79	Yes
MTS 07	100	80	Yes
PBT 02	80	79	Yes
PBT 05	80	76	Yes
PCT 01	93	85	Yes
RET 09	90	76	Yes
TYP 01	79	80	No
TYP 07	49	82	No
VPA 01	78	78	Yes

You achieved 8 OSCE stations and a total score of 822

Examiners

Examiners are Registered Veterinary Nurses (RVNs) or veterinary surgeons. All examiners receive training and attend standardisation sessions. The role of the examiner is to assess candidates carrying out the task. The examiner will observe you and complete the mark sheet as you progress through the task.

Dress code for the examination

You should wear the uniform you wear at work. It does not need to be a particular style or colour. Your shoes should enclose the whole foot. Open toe shoes or sandals are not permitted. The uniform and shoes should be clean and free from obvious dirt and stains. Hair should be clean and tidy. Long hair should be secured off the face. Nails should be clean and well-manicured (short), false nails and varnish should be removed. **It is advisable to remove all jewellery.** This is because a number of stations have marks attributed to this. If you are unable to remove your jewellery, then you will not achieve the marks.

How to prepare for the OSCE

The RCVS publishes the OSCE station scenarios and marking criteria. You can find a copy at the end of this document. Examiners accept that there may be several ways to complete each skill. You should refer to textbooks to confirm the methodology used in the UK. There are no specific books based on the OSCE examination for veterinary nurses. Many of the veterinary nursing textbooks and journals contain acceptable methods for carrying out each practical skill.

If you are a **Student Veterinary Nurse** or registered for the **Period of Supervised Adaptation (PSA)**, you are likely to be working alongside Registered Veterinary Nurses (RVNs). These nurses will have taken OSCE examinations. Talk to them about their experiences.

Use the checklists provided to practice the OSCE stations and become familiar with the marking criteria. When you are ready, ask others to observe you and provide you with feedback on your performance.

Colleges offering veterinary nurse training in the UK often run revision courses. A list of colleges can be found on the RCVS website. You are advised to attend at least one revision course before entering the examination. You should inform the college that you are entering the RCVS Pre-registration examination and ensure that they will be able to cover the skills required during the revision session.

The RCVS has developed some support material which is available via the RCVS Academy <https://academy.rcvs.org.uk/>. To access please use your RCVS login and password which was provided to you during your enrolment/application process. If you qualified outside the UK select the **Career Development tab** and **working in the UK for veterinary nurses**. The OSCE support material is located in part 2 of the veterinary nurse course. If you studied in the UK then select the tab for **Students & Newly Qualified** and **VN pre-registration examination support**. The courses are the same, but they contain different information about entering the examination.

If you complete the course and wish to join the online group meeting to discuss the OSCE stations shown in the activity, then please complete the form in the Academy.

The sessions will be held between 10:00 – 12:00 on the following dates:

- **Tuesday 21 May 2024**
- **Tuesday 1 October 2024**

The RCVS does not predetermine the pass rate and it is possible for all candidates to pass. Most candidates are successful the first time, but the examination is challenging and therefore you should ensure that you are fully prepared before you enter the examination.

The facilities at MYF Training are leased to the RCVS. Their staff are not involved in the development of the examinations and **cannot** provide tours of the facilities beforehand. Please direct all questions to the RCVS examinations team.

Resource list

We are not able to recommend textbooks, but you might find the information in these resources helpful to prepare you for working in a UK practice.

- Anaesthesia for Veterinary Nurses (L Walsh)
- BSAVA Textbook of Veterinary Nursing
- Clinical Procedures in Veterinary Nursing (V Aspinall)
- Handbook of Veterinary Communication Skills (C Gray and J Moffett)
- Practical Radiography for Veterinary Nurses (S Easton)
- RCVS Code of Professional Conduct supporting Guidance <https://www.rcvs.org.uk/setting-standards/advice-and-guidance/code-of-professional-conduct-for-veterinary-surgeons/supporting-guidance/>
- RCVS Day One Skills for Veterinary Nurses <https://www.rcvs.org.uk/document-library/rcvs-day-one-skills-for-veterinary-nurses/>
- The Complete Textbook of Veterinary Nursing, Victoria Aspinall
- The Millpledge Bandage book (Millpledge) <https://millpledge.com/content-page/millpledge-bandage-book>
- University of Bristol Clinical Skills Booklets <https://www.bristol.ac.uk/vet-school/research/comparative-clinical/veterinary-education/clinical-skills-booklets/>
- Veterinary Clinical Skills Manual (N Coombes and A Silva Fletcher)

Common mistakes in the examination

The OSCE stations cover common and important skills that veterinary nurses encounter in the UK. The methodology may differ from what you are used to in the country you trained in. Common mistakes include:

- Not preparing for the examination before hand
- Being unfamiliar with the marking criteria for the OSCE stations
- Not reading the instructions carefully
- Misinterpreting the instructions
- Incorrectly calculating dose rates for medications
- Not including the correct units in calculations
- Not using an aseptic technique
- Wearing jewellery
- Taking more than 10 minutes to complete the task

Reasonable adjustment

If you have any special educational or other needs/disability, which may require special provision to be made in the examinations you can apply for adjustments to be made in your examination.

Applications must be received at least two months before your examination. You will receive a letter confirming the adjustments we will make. If you have been permitted to have adjustments made, then you should indicate this on the examination entry form. Assessments for special educational needs made before you were sixteen must have been made within two years of the application for entry to the examinations or an updated report will be required. If the report was made after your sixteenth birthday, then no updated report will be necessary, even if it is more than two years old.

If you believe that you will have difficulty completing any of the OSCE stations due to an issue with the equipment provided, for example an allergy or other unavoidable challenge, you should notify the RCVS before the examination entry closing date.

A current medical letter must accompany applications made for medical reasons.

Mitigating circumstances

If you wish to notify the RCVS of circumstances, which may have unduly affected your examination performance, you must do so within 5 days of sitting the examination. You must use the appropriate form, which can be obtained on request from the RCVS or at the examination centre.

The RCVS will give consideration to personal circumstances (such as illness or serious personal problems) which occurred unexpectedly and immediately prior to, or during, the examination. We will also take into consideration events occurring during the examination itself (such as undue disturbance). If we consider that such circumstances have unduly affected your performance, your mark may be adjusted, or the examination attempt may be nullified. You should note that adjustment of marks applies only in the case of borderline failure.

Illness cannot be used as a reason for special consideration – if you are unwell, you should withdraw from the examination and re-apply when you are fit to sit.

Examination results enquiry and appeals

If you have an enquiry concerning the accuracy of your examination results you must submit the Examination Enquiry form within 14 days of the results being published. The form can be obtained from the RCVS. There is a fee for the enquiry, which will be refunded if the investigation identifies an irregularity in your examination.

If you are not satisfied with the result of the enquiry or you feel that an enquiry is not necessary, you may submit an examination appeal. Examination appeals may be made only against the **conduct and conditions** of the examination **and not against the marks awarded**. An appeal must be made, in writing and using the RCVS Appeal Form available from the RCVS, within 28 days of the date of the letter advising of your examination result or 14 days after the letter informing you of the result of your enquiry.

Candidates awaiting the outcome of an appeal or investigation are advised to enter future examinations. If the appeal is successful, the RCVS will refund examination fees and all out of pocket expenses.

Re-sitting the examination

You are permitted to re-sit the examination as often as you like. You will be required to pay the full fee for each examination attempt. You will, however, be required to provide evidence that you are taking remedial action before entering your fourth and subsequent examinations.

Refreshments

MYF Training is situated in the town of Aldershot. You can purchase refreshments locally. You are permitted to bring water into the examination. The RCVS are reducing the use of single use plastics. We therefore request that those attending the examination bring their own refillable water bottle. Drinking water will be provided to enable these to be topped up.



Examination dates for 2024

Examination Date	Closing Date
2-4 February 2024	Friday 29 December 2023
21-23 June 2024	Friday 17 May 2024
9-10 November 2024	Friday 4 October 2024

Fees for 2024

The entry fee for the 2024 practical examinations is **£460** for each attempt. This fee reflects the true cost of delivering the examination. The RCVS does not seek to make a profit, but to cover the costs incurred in delivering the examination. Examination fees for 2025 will be provided in December 2024.

Payment, withdrawal and refunds

Receipt of your payment does not indicate your entry has been accepted. In some instances, there may be follow-up action required:

- a) If notice of withdrawal is received in writing at the RCVS **on or before** the closing date for the receipt of entries, a full refund of the fee, subject to a deduction of 10% for administrative costs, will be made.
- b) If notice of withdrawal is received in writing at the RCVS **after the closing date for entries but no less than 10 working days** before the date on which your practical examination is due to be held, a 50% refund will be made.
- c) If you withdraw **less than ten days before the examination or fail to appear** at the examination, you will not be entitled to a refund of any portion of the fee paid (except as provided below).

In special circumstances, consideration will be given to a full refund if there are medical or compassionate reasons for withdrawal or failure to appear for the examination. Any such refunds will be subject to a deduction of 10% for administrative costs.

Location of the Examination (2024)

The examination will be held in the Veterinary Nursing Clinical Skills suite at the following address:

MYF Training
Tutor House
78-82 Victoria Road
Aldershot
Hampshire
GU11 1SS

MYF Training is located in Aldershot, Hampshire

By Car

From the M3 Southbound

At junction 4 take the A331 exit to Guildford/Farnham/Farnborough

At the roundabout, take the 2nd exit onto the A331

Take the A23 exit toward Aldershot/Woking/A324

At the roundabout, take the 4th exit onto Ash Road/A323

Turn Left toward Windsor Way/B3008

Slight left onto Windsor Way/B3008

Turn right onto Arthur St

Turn right onto Victoria Road/B3008

The car park is situated at the rear of the building. Take the next left and left again. The entrance to the car park is on the left

From the M3 Northbound

At junction 5, take the B3349/A287 exit to Hook

At the roundabout take the 4th exit onto the A287

At the roundabout, take the 2nd exit and stay on A287

At the roundabout, take the 2nd exit onto Farnham Road/A287

Continue onto Upper Hale Road/A3016

Turn left onto Alma Lane/B3305

At the roundabout, take the 2nd exit onto Cranmore Lane/B3008

Turn right onto Ayling Hill

Continue onto Church Lane

Turn Left to stay on Church Lane

Turn left onto Grovenor Riad/B3007

Turn right onto Halimote Road

Halimote Road turns left and becomes The Grove

Continue onto Station Road

Turn right onto Victoria Road/B3008

The car park is situated at the rear of building. Take the next left and left again the entrance to the car park is on the left.

MYF Training is also easily accessible via the M4 and A3

Parking

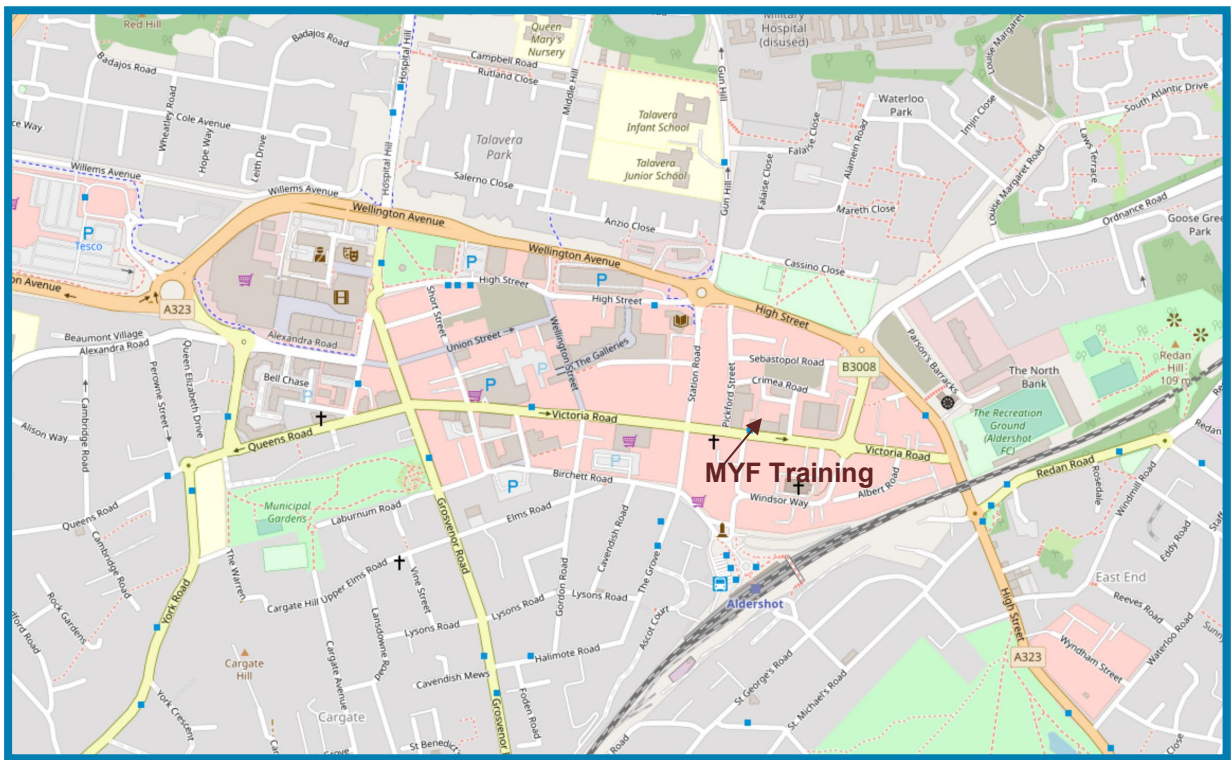
Please park in the main car park to the rear of the building.

By Train

The nearest train station is Aldershot - Trains run regularly from London Waterloo Train Station please visit www.nationalrail.co.uk for train tickets and times. MYF Training is about a five-minute walk from the station.

Accommodation

There are a number of hotels in Aldershot details can be found using accommodation search mechanisms online.





Contacting the RCVS

Please contact the RCVS Veterinary nursing Examination team on 020 7202 0788 or prereg.vn@rcvs.org.uk.

OSCE stations scenarios and mark schemes

The pre-registration practical examination comprises a series of Objectively Structured Clinical Examinations (OSCE). Each OSCE station is designed to test the practical skills contained within the RCVS Day-One Skills for veterinary nurses.

The OSCE stations are published to allow candidates to prepare for the exam. Please note changes may be made up to 4 weeks prior to the examination. You will be sent the handbook after every update.

The scenarios and marking schemes are the intellectual property of the RCVS and must not be copied and used by other organisations without prior written consent.

Assessment and Nursing Care

The following OSCE stations could be used in your examination

ANC 01 Intravenous fluid preparation and administration of medication

ANC 02 Intravenous fluid preparation

ANC 03 Accommodation cleaning

ANC 04 Assisted feeding

ANC 05 Administer medication

ANC 06 Dispensing medication

ANC 07 IV Catheter placement

ANC 08 This station is not currently in use

ANC 09 Administer IV medication

ANC 10 Administer IV Controlled Drug

Feedback from the examiners

Intravenous fluid therapy

Candidates are reminded to check the fluid bag provided is appropriate for use and explain the checks that they are making.

Examiners also remind candidates to select and prepare all the equipment required for the placement of the IV catheter. It should be possible to place the catheter without further preparation of the equipment.

Patient restraint

Unless the candidate has reason to believe that the patient's temperament is good, they should always ask the patient to be restrained by the assistant.

Accommodation cleaning

Candidates need to remember that there are seven sides of a kennel. Candidates often omit to clean one of the sides, the roof or both sides of the door.

Many candidates are not familiar with the correct method to use a ratio when diluting disinfectant. The ratio will be provided to candidates, but they need to decide how much water and disinfectant need to be used.

Injection technique

When administering medication via a subcutaneous route candidates omit to massage the injection site to disperse the medication. Candidates also fail to use an aseptic technique when drawing up the calculated volume of medication.

Calculation of medication

Candidates sometimes calculate the correct daily dose of medication but then fail to consider the number of times the medication is to be administered in the day. Scenarios may request the daily dose is given in one or more equally divided doses. Giving the entire daily dose at the same time may lead to overdose and will affect the marks awarded.

Selection and preparation of all necessary equipment

When selecting equipment candidates often fail to prepare it fully or check that items are in full working order.

Assisted feeding

Candidates often fail to safely check the position and patency of the feeding tube.

Administration of a controlled drug

Candidates are provided with the hub amount or amount wasted but they sometimes do not consider this information when completing the controlled drug register. Examples of controlled drug registers used in the UK and other resources can be found online <https://www.gov.uk/guidance/controlled-drugs-veterinary-medicines>

<https://www.rcvs.org.uk/setting-standards/advice-and-guidance/code-of-professional-conduct-for-veterinary-surgeons/supporting-guidance/veterinary-medicines/>

<https://www.rcvs.org.uk/news-and-views/features/a-reminder-from-the-rcvs-and-vmd-of-the-requirements-for/>

https://www.bsavalibrary.com/docserver/fulltext/10.22233/9781905319862/BSAVA_Medicine_Guide_2_9781905319862.4.10-17.pdf?expires=1659532363&id=id&accname=guest&checksum=6F38598A0DA3FA53A9BACCA36C41A054

Completing patient hospital records

Candidates often provide incomplete information on the patient record. There are clear prompts about what information needs to be provided in each of the sections of the record.

RCVS Pre-Registration OSCE

OSCE Code ANC 01

You are required to administer medication to a patient via an intravenous (IV) route. The patient has an IV catheter connected to a T-connector, which was placed 2 hours ago.

Using the information provided;

- a. Calculate the quantity of medication to be given.
- b. Prepare and administer the medication via the IV catheter. *The examiner will check the syringe prior to you administering the medication.*
- c. Record the administration of the medication on the patient hospital record provided.

Additional notes

An IV catheter with T-connector has already been placed in the model. You are not required to change the patient's IV catheter or bandage.

Assume that your hands have been cleaned prior to starting the procedure.

This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.10	Administer medicines prescribed by the veterinary surgeon in accordance with instructions from the manufacturer to include intravenous administration of medicines.
4.12	Manage intravenous catheters.
Section 7 - Dispensing	
7.1	Ensure safe handling and management of pharmaceuticals in accordance with legislation and manufacturer guidelines to include handle medicines in line with legislative guidelines and SPC requirements.
7.2	Interpret prescriptions and prepare medicines for dispensing to include calculate drug dosages and confirm with an appropriately qualified member of the veterinary team.
7.3	Maintain appropriate records to include hospital charts.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation to include dispose of non-hazardous waste and medications.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC01 - Intravenous fluid preparation and administration of medication		Achieved	Not achieved
1.	Correctly calculated the dose of medication to be administered to the patient.		
2.	Units included in final answer.		
3.	Correct medication selected, expiry date and date of first opening checked.		
4.	Selected and aseptically prepared the equipment required to administer the medication.		
5.	Personal protective equipment worn to prevent medication from coming into contact with nurse's skin.		
6.	Correct and aseptic technique used to draw up the correct volume of medication.		
7.	IV catheter checked to ensure patency.		
8.	Correct volume of medication administered slowly via the correct route, using an appropriate and aseptic technique.		
9.	Medication flushed through the catheter.		
10.	Administration of medication recorded fully on patient hospital record.		
11.	Needle(s) not resheathed at any time or resheathed safely.		
12.	Waste material disposed of into appropriate waste receptacle.		
13.	Procedure performed without contamination of self or injury.		

RCVS Pre-Registration OSCE

OSCE Code ANC 02

You are required to prepare and set up the equipment to treat a patient requiring fluid replacement therapy.

You are required to;

- a. Select and prepare the equipment for infusion of intravenous (IV) fluid. Leave this ready for use. Explain to the examiner the checks you are making.
- b. Select and prepare the equipment required for the placement of an intravenous (IV) cannula. *Explain to the examiner the checks you are making.*
- c. Calculate;
 - I. The total daily maintenance requirement.
 - II. mls per hour.
 - III. The fluid administration rate (drops per second or frequency of drops).

Additional Information

Assume that your hands have been cleaned prior to starting the procedure.

Show all workings including units. It is acceptable to round your final answer up or down to the nearest whole number.

Updated April 2022

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.12	Provide fluid therapy to in-patients, to include: Select appropriate fluids according to veterinary surgeon instructions. Select and prepare administration equipment. Place intravenous catheters into appropriate veins. Manage intravenous catheters. Calculate amount and rate of fluid to administer. Report any concerns to an appropriate member of the team. Observe and monitor patients receiving fluid therapy.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation to include dispose of hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 02 - Intravenous fluid preparation

		Achieved	Not achieved
1.	Intravenous fluid checked and prepared.		
2.	Fluid administration set checked, and fluid set up using an aseptic technique.		
3.	No significant air bubbles left within the drip line.		
4.	All necessary equipment selected and prepared for the placement of the IV cannula.		
5.	Selected and prepared a T-connector and left ready for use.		
6.	Correctly calculated fluid administration rate.		
7.	Units included in final answer.		
8.	Administration set left hanging over the drip stand or secured safely without breaking asepsis.		
9.	Waste material disposed of into appropriate waste receptacle.		

RCVS Pre-Registration OSCE

OSCE Code ANC 03

During recovery from routine surgery, a patient has soiled its hospital accommodation.

You are required to;

- a. Clean the accommodation.
- b. Record your observations on the hospital record.

Additional notes

Your patient has already been removed from the kennel and is being looked after by another member of staff.

You will be provided with the dilution rate and contact time of the disinfectant.

Your hands have been cleaned prior to starting the procedure.

You are not required to set up the accommodation or return the patient to it.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 - Communication	
2.1	Communicate effectively using a variety of different communication models, to include communicating with colleagues.
Section 4 – Nursing Care	
4.5	Provide husbandry to patients, considering accommodation, nutrition, and excretions, to include consider age, species, condition, demeanour, and enrichment.
Section 8 – Infection Control	
8.2	Formulate and implement an appropriate infection control strategy according to practice protocol, to include constitute appropriate cleaning and disinfectant solutions.
8.2	Formulate and implement an appropriate infection control strategy according to practice protocol, to include prepare, clean, and maintain patient accommodation that maximises the welfare of hospitalised patients with non-infectious diseases.
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include dispose of hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 03 - Accommodation Cleaning

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse.		
2.	Gross soiling removed from the bedding.		
3.	Bedding removed and placed into the laundry basket.		
4.	Accommodation lining removed.		
5.	Hair and debris removed from the accommodation.		
6.	Detergent/disinfectant solution prepared according to the manufacturer's instructions.		
7.	Door and internal surfaces of the accommodation cleaned in a methodical manner.		
8.	Disinfectant/detergent solution left in contact with surfaces for the recommended time.		
9.	Waste materials disposed of into appropriate waste receptacle.		
10.	Observations detailed on the hospital record and record stored appropriately.		

RCVS Pre-Registration OSCE

OSCE Code ANC 04

This patient has been hospitalised. They have been receiving their nutritional requirements via a naso-oesophageal feeding tube for three days. They are to receive their full energy requirement spread over 5 meals per day.

Using the prepared diet indicated by the examiner, you are required to;

- a. Determine the volume of food required for each meal using the diet sheet provided.
- b. Draw up the correct volume of food.
- c. Administer the food in the syringe provided by the examiner, to the patient. Explain to the examiner what you are doing and why, including what period of time you would normally administer the entire feed.
- d. Record the administration of food on the hospital chart provided.

Additional notes

You are required to show all your workings including units.

Assume that your hands have been cleaned prior to starting the procedure.

The patient is of a good temperament and does not need to be restrained.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.3	Demonstrate techniques for approaching and handling patients, to include with due regard for patient needs and behaviours.
Section 4 – Nursing Care	
4.5	Provide husbandry to patients, considering accommodation, nutrition and excretions, to include. Consider age, species, condition, demeanour and enrichment. Calculate food requirements based on disease and life stage/lifestyle. Manage assisted feeding to include managing and maintaining feeding tubes.
Section 7 – Dispensing	
7.3	Maintain appropriate records to include, hospital charts.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation to include dispose of hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 04 - Assisted Feeding

		Achieved	Not achieved
1.	Correctly calculated the volume of food required per day.		
2.	Units included in final answer.		
3.	Correct volume of food prepared for administration.		
4.	Personal protective equipment worn to prevent contamination of nurse and patient.		
5.	Patency and position of feeding tube checked using a safe technique. Explained to the examiner what they are doing and why.		
6.	Volume of food administered correctly over an appropriate period of time. Examiner told the correct period of time that they would administer the food.		
7.	Residual food flushed through the feeding tube and cap replaced. Explained to the examiner what they are doing and why.		
8.	External surfaces of the feeding tube left clean.		
9.	Patient prevented from escaping from accommodation.		
10.	Hospital record completed with details of the diet used, date, time and volume of food administered and initials of nurse.		
11.	If needle(s) used, not re-sheathed at any time or re-sheathed safely.		
12.	Waste materials disposed of into appropriate waste receptacle.		

RCVS Pre-Registration OSCE

OSCE Code ANC 05

You are required to administer medication to a patient via a parenteral route.

- a. Determine the weight of the patient.

Using this and the information provided on the patient record;

- b. Calculate the quantity of medication to be given via the parenteral route.
- c. Prepare and administer the medication via the prescribed route. *The examiner will check the quantity of medication you have drawn up prior to you administering it.*
- d. Record the administration of the medication on the hospital chart provided.

Additional notes

Assume that your hands have been cleaned prior to starting the procedure.

You are required to show all your workings including units.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.5	Use appropriate restraint methods suitable for the patient and situation with due consideration for animal welfare, to include restrain for administration of medicines.
Section 4 – Nursing Care	
4.4	Perform a clinical examination and record findings, to include weight.
4.10	Administer medicines prescribed by the veterinary surgeon in accordance with instruction from the manufacturer to include; Subcutaneous administration of medicines. Intramuscular administration of medicines.
Section 7 – Dispensing	
7.1	Ensure safe handling and management of pharmaceuticals in accordance with legislation and manufacturer guidelines, to include handle medicines in line with legislative guidelines and SPC requirements.
7.2	Interpret prescriptions and prepare medicines for dispensing, to include calculate drug dosages and confirm with an appropriately qualified member of the veterinary team.
7.3	Maintain appropriate records to include, hospital charts.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation to include dispose of hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 05 - Administer Medication

		Achieved	Not achieved
1.	Determined the weight of the patient.		
2.	Personal protective equipment worn to prevent medication from coming into contact with nurse's skin.		
3.	Correctly calculated the dose of medication to be administered to the patient.		
4.	Units included in final answer.		
5.	Correct medication selected, expiry date and date of first opening checked.		
6.	Correct needle and syringe selected and correctly assembled using an aseptic technique.		
7.	Correct and aseptic technique used to draw up the correct volume of medication.		
8.	Needle changed safely and disposed of appropriately.		
9.	Assistant asked to restrain patient.		
10.	Correct volume of medication administered slowly via the correct route, using an appropriate and aseptic technique.		
11.	Needle(s) not resheathed at any time or resheathed safely.		
12.	Administration of medication recorded fully on patient care plan.		
13.	Waste materials disposed of into appropriate waste receptacle.		
14.	Procedure performed without contamination of self or injury.		

RCVS Pre-Registration OSCE

OSCE Code ANC 06

You are required to dispense medication to a patient to be administered by the owner at home.

- a. Determine the weight of the patient.

Using this and the information provided;

- b. Calculate the quantity of medication to be dispensed.
- c. From the different dispensing labels provided, select the one which best meets RCVS labelling recommendations.
- d. Complete the dispensing label.
- e. Prepare the medicine for supply to the owner.

Additional notes

The patient may be heavy (no more than 10kg) so please take care if you lift it.

For the purposes of this examination, the examiner is the prescribing veterinary surgeon.

Assume the patient is being restrained.

Assume that your hands have been cleaned prior to starting the procedure.

You are required to show all your workings including units. You may round your calculation up or down to the nearest decimal point as appropriate.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.4	Lead and move animals using the most appropriate equipment for the species and approved manual handling and lifting procedures, to include lift animals.
Section 4 – Nursing Care	
4.4	Perform a clinical examination and record findings, to include weight.
Section 4 – Nursing Care	
7.1	Ensure the safe handling and management of pharmaceuticals in accordance with the legislation and manufacturer guidelines, to include handle medicines in line with legislative guidelines and SPC requirements.
7.2	Interpret prescriptions and prepare medicines for dispensing to include calculate drug dosages and confirm with an appropriately qualified member of the veterinary team and package and label in accordance with legal requirements.
Section 8 – Infection Control	
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 06 - Dispensing Medication

		Achieved	Not achieved
1.	Determine the weight of the patient.		
2.	Personal protective equipment worn where required to prevent medication from coming into contact with nurse's skin.		
3.	Correctly calculated the dose of medication to be dispensed.		
4.	Correct medication selected.		
5.	Correct quantity of medication dispensed using a suitable method and container. Container secured.		
6.	Correct dispensing label selected, completed with the information required and adhered to the container securely.		
7.	Label initialled by dispensing nurse and authorisation obtained from the veterinary surgeon.		
8.	Waste materials disposed of into appropriate waste receptacle.		

RCVS Pre-Registration OSCE

OSCE Code ANC 07

Your patient has been admitted for Intravenous (IV) Fluid Therapy. In preparation for this you are required to place an intravenous catheter with a T-connector into your patient.

The veterinary surgeon requests that you;

- a. Select and prepare the equipment for the placement of the IV catheter and T-connector. Explain to the examiner any checks you are making.
- b. Prepare the clipped forelimb and place the IV catheter into the cephalic vein.

Additional notes

Assume that your hands have been cleaned prior to starting the procedure.

The patient's forelimb has been clipped ready for intravenous catheter placement.

You are not required to connect the patient to a drip.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.12	Provide fluid therapy to in-patients. To include; place intravenous catheters into appropriate veins.
Section 8 – Infection Control	
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 07 - IV Catheter Placement

		Achieved	Not achieved
1.	All necessary equipment selected and prepared for the placement of the IV cannula.		
2.	Selected and prepared T-connector.		
3.	Personal protective equipment worn to prevent contamination of nurse and patient.		
4.	Used an aseptic technique to prepare the IV catheter insertion site.		
5.	Assistant asked to raise the vein in a suitable manner.		
6.	Used an aseptic technique to place and secure the IV catheter.		
7.	IV catheter placement checked using a recognised technique.		
8.	Using an aseptic technique connected and secured the T-connector.		
9.	Applied bandage materials or guard to protect the catheter and T-connector allowing ease of access to ports and gate clamp.		
10.	Waste materials disposed of into appropriate waste receptacle.		
11.	Procedure performed without contamination of self or injury.		

RCVS Pre-Registration OSCE

OSCE Code ANC 09

You are required to administer medication intravenously to a patient.

- a. Determine the weight of the patient.

Using this and the information provided;

- b. Calculate the quantity of medication to be given via the prescribed route.
- c. Prepare and administer the medication via the prescribed route. *The examiner will check the quantity of medication you have drawn up prior to you administering the medication.*
- d. Record the administration of the medication on the hospital chart provided.

Additional notes

Assume that your hands have been cleaned prior to starting the procedure.

You are required to show all your workings including units.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.5	Use appropriate restraint methods suitable for the patient and situation with due consideration for animal welfare, to include restrain for administration of medicines.
Section 4 – Nursing Care	
4.10	Administer medicines prescribed by the veterinary surgeon in accordance with instructions from the manufacturer to include intravenous administration of medicines.
Section 7 – Dispensing	
7.2	Interpret prescriptions and prepare medicines for dispensing, calculate drug dosages, and confirm with an appropriately qualified member of the veterinary team.
7.3	Maintain appropriate records, to include hospital charts.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include dispose of medications.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 09 - Administer IV Medication

		Achieved	Not achieved
1.	Determine the weight of the patient.		
2.	Personal protective equipment worn to prevent medication from coming into contact with nurse's skin.		
3.	Correctly calculated the dose of medication to be administered to the patient.		
4.	Units included in final answer.		
5.	Correct medication selected, expiry date and date of first opening checked.		
6.	Selected and aseptically prepared the equipment required to administer the medication.		
7.	Correct and aseptic technique used to draw up the calculated volume of medication.		
8.	Administration site prepared and patency of the IV catheter checked.		
9.	Correct volume of medication administered slowly via the correct route, using an appropriate and aseptic technique.		
10.	Needle(s) not resheathed at any time or resheathed safely.		
11.	Administration of medication recorded fully on patient care plan.		
12.	Waste materials disposed of into appropriate waste receptacle.		
13.	Procedure performed without contamination of self or injury.		

RCVS Pre-Registration OSCE

OSCE Code ANC 10

You are required to administer a Schedule 2 medication to a patient via an intravenous route (IV).

Using the information provided;

- a. Prepare and administer the medication via the prescribed route. *The examiner will check the quantity of medication you have drawn up prior to you administering the medication.*
- b. Record the administration of the medication in the required documentation.

Additional notes

Assume that your hands have been cleaned prior to starting the procedure.

You are not required to calculate the drug dose.

The examiner is the prescribing veterinary surgeon and controlled drugs cabinet key holder.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.10	Administer medicines prescribed by the veterinary surgeon in accordance with instructions from the manufacturer to include intravenous administration of medicines.
4.12	Manage intravenous catheters.
Section 7 – Dispensing	
7.1	Ensure safe handling and management of pharmaceuticals in accordance with legislation and manufacturer guidelines, to include; Store medicines in line with legislative guidelines and SPC requirements. Handles medicines in line with legislative guidelines and SPC requirements. Dispose of medicines in line with legislative guidelines and SPC requirements. Controlled drugs.
7.2	Interpret prescriptions and prepare medicines for dispensing, to include; Calculate drug dosages and confirm with an appropriately qualified member of the veterinary team. Package and label in accordance with legal requirements.
7.3	Maintain appropriate records, to include controlled drugs and hospital charts.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include dispose of hazardous waste and medications.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

ANC 10 - Administer IV Controlled Drug

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent medication from coming into contact with nurse's skin.		
2.	Selected and aseptically prepared the equipment required to administer the medication.		
3.	Correct medication selected, expiry date and date of first opening checked.		
4.	Correct and aseptic technique used to draw up the correct volume of medication.		
5.	Controlled drug and cabinet key stored as per regulatory requirements.		
6.	Completed controlled drugs register fully as per regulatory requirements.		
7.	IV catheter checked to ensure patency.		
8.	Correct volume of medication administered slowly via the correct route, using an appropriate and aseptic technique.		
9.	Needle(s) not resheathed at any time or resheathed safely.		
10.	Administration of medication recorded fully on patient care plan.		
11.	Waste materials disposed of into appropriate waste receptacle.		
12.	Procedure performed without contamination of self or injury.		

Communication

The following OSCE stations could be used in your examination

COM 01 Admit patient

COM 02 Discharge patient

Feedback from the examiners

Microchip

Candidates do not check the microchip number against all of the available patient information.

Informed consent

Candidates do not gain enough information to ensure that owner is aware of the procedure that will be undertaken and is consenting to it. Examiners suggest that candidates read the following.

<https://www.rcvs.org.uk/setting-standards/advice-and-guidance/code-of-professional-conduct-for-veterinary-surgeons/supporting-guidance/communication-and-consent/>

RCVS Pre-Registration OSCE

OSCE Code COM 01

The veterinary surgeon has asked you to admit a patient for a surgical/medical procedure. You are required to;

- a. Prepare for the admission, becoming familiar with the patient history and complete the admission form (can be completed during the 10-minute prep time).
- b. Greet the owner and invite them into the admission area.
- c. Gather any additional information and explain the procedure that will be performed.
- d. Gain informed consent from the owner/agent.
- e. Bring the meeting to a close by showing the owner back into the waiting room.

Additional information

You will be provided with the patient history and other documents; you have **10 minutes** to prepare everything you need to complete the admission including making notes. Following this you will be taken to the consulting room where you will have **10 minutes** to carry out the admission.

Assume that your hands have been cleaned prior to starting the procedure.

You are not required to perform a clinical examination.

You are not required to prepare the inpatient sheet or care plan.

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1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.1	Communicate effectively using a variety of different communication models, to include communicate with clients.
2.2	Create accurate and legible written communications/documentation according to practice policy, to include admission and consent forms.
2.3	Access and store client and practice records according to practice policy and data protection.
2.4	Admit patients to include obtain written and verbal informed consent.
2.5	Conduct effective nursing consultations, to include history taking.

COM 01 - Admit Patient

		Achieved	Not achieved
1.	Owner/agent invited into consulting room.		
2.	Candidate introduced themselves.		
3.	Informed the owner/agent of the purpose of the admit consult and summarised the procedure		
4.	Obtained information in relation to the patient and their individual needs.		
5.	Confirmed the patient's identity and sex using practice protocol.		
6.	Labelled the patient and their possessions.		
7.	Prepared the consent form (can be started during the 10-minute reading time).		
8.	Confirmed with owner/agent that information on the consent form is correct.		
9.	Owner/agent given the opportunity to read sign/date the consent form.		
10.	Informed consent gained.		
11.	Owner/agent provided with information about when and how they will be informed about the time that the patient is ready for collection.		
12.	Owner/agent questions answered clearly.		
13.	Verbally concluded the meeting and showed the owner/agent into the waiting area.		
14.	Patient safety maintained throughout the consult.		
15.	Demonstrated appropriate positioning/body language and eye contact during admit consultation.		
16.	Spoke clearly throughout at a good pace.		
17.	Conveyed warmth and empathy and remained polite and courteous throughout.		
18.	Used open-ended questions as appropriate.		
19.	Good comprehension and use of English Language (verbal and/or written).		

RCVS Pre-Registration OSCE

OSCE Code COM 02

An owner has arrived to collect their pet after a routine surgical procedure.

You are required to;

- a. Select the correct medication, diet and discharge notes for the patient.
- b. Explain all aspects of post-operative care for the patient.
- c. Return the patient to the owner.

Additional information

You will be provided with the patient history and other documents; you have **10 minutes** to prepare everything you need to complete the discharge including making notes. Following this you will be taken to the consulting room where you will have **10 minutes** to carry out the discharge.

The times given on the hospital record do not correspond to the actual time of that you are sitting the examination.

The patient will be in the ward which is accessible via the consult room when you are ready to discharge.

You are not expected to take payment from the client.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.1	Communicate effectively using a variety of different communication models, to include communicate with clients.
2.2	Create accurate and legible written communications/documentation according to practice policy, to include client home care plans and instructions.
2.7	Provide discharge information and guidance to owners, to include; Discuss home care plans. Advise clients on safe and correct routes of administration of medication. Advise clients on the potential side effects of medication. Demonstrate to client's safe techniques for administering medication. Provide clients with bandage care advice. Advise clients on out of hours services.
Section 7 – Dispensing	
7.1	Ensure safe handling and management of pharmaceuticals in accordance with legislation and manufacturer guidelines to include handle medicines in line with legislative guidelines and SPC requirements.

COM 02 - Discharge Patient

		Achieved	Not achieved
1.	Correct discharge instructions, diet and medication selected.		
2.	Owner/agent invited into consulting room.		
3.	Candidate introduced themselves.		
4.	Informed the owner/agent of the purpose of the discharge consult and summarised the procedure.		
5.	Post op care and observations explained to the owner/agent.		
6.	Post op confinement and restricted exercise explained to the owner/agent.		
7.	Post op feeding regime explained to the owner/agent.		
8.	Post op medication regime explained including adverse reactions.		
9.	Checks made to ensure the owner/agent understands how to give the medication and is actually confident to give the medication.		
10.	Explained the importance of returning for the post op check and how this can be booked.		
11.	Owner/agent provided with correct written discharge information, diet and medication.		
12.	Checked the owner/agent understands the post op care and asked if they have any questions.		
13.	Highlighted to the owner/agent the contact details for the practice including out of hours provision.		
14.	Returned the patient to the owner/agent.		
15.	Verbally concluded the meeting and showed the owner/agent into the waiting area.		
16.	Demonstrated appropriate positioning/body language and eye contact while explaining the procedure.		
17.	Spoke clearly throughout at a good pace.		
18.	Conveyed warmth and empathy and remained polite and courteous throughout.		
19.	Used open-ended questions as appropriate.		
20.	Good comprehension and use of English Language (verbal and/or written).		

Dressings and Bandages

The following OSCE stations could be used in your examination

DAB 01 Bandage Limb

DAB 02 Abdominal bandage and wound care

DAB 03 Wound care and bandage

DAB 04 Remove bandage and swab wound

DAB 05 Haemorrhage Support

Feedback from the examiners

Tension of bandage

Examiners report that a number of candidates fail to apply a bandage of correct tension.

Should toes be exposed or enclosed?

Where appropriate examiners will accept a bandage technique where the foot is enclosed, or the middle toes are exposed. In addition, for the abdominal bandage the candidate can chose to anchor it to prevent slippage.

RCVS Pre-Registration OSCE

OSCE Code DAB 01

Your patient has sustained an abrasion / burn or has an infected wound.

The veterinary surgeon has requested that you;

- a. Apply the correct dressing type.
- b. Bandage the limb.

Additional notes

The examiner will verbally tell you the location of the wound and the dressing type required.

The dressing and bandage will be left in place for 72 hours.

The patient is anaesthetised and is being monitored.

Assume that your hands have been cleaned prior to starting the procedure.

Assume the patient's wound has been cleaned.

Updated March 2024

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.1	Communicate effectively using a variety of different methods, to include colleagues.
Section 4 – Nursing Care	
4.7	Assess, monitor, manage and report the status of wounds to the appropriate member of the veterinary team, to include assess wounds.
4.8	Apply dressings appropriate to type of wound.
4.9	Apply bandages appropriate to species and condition.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

DAB 01 – Bandage Limb

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse and patient.		
2.	All necessary bandaging materials and equipment selected prior to starting the bandage.		
3.	Patient restrained by an assistant in an appropriate recumbency or position (area of interest fully accessible) and supported.		
4.	Aseptically applied wound dressing with correct side facing wound. Side facing wound not touched.		
5.	Padding applied between the toes (as far as is possible on the model).		
6.	Padding layer applied over the limb.		
7.	Conforming bandage applied.		
8.	Outer protective layer applied.		
9.	Bandage material applied from distal to proximal limb with sufficient coverage.		
10.	Bandage material applied in correct order ensuring each rotation covers $\frac{1}{2}$ - $\frac{2}{3}$ of previous rotation.		
11.	Candidate checked bandage is neat and of the appropriate tension throughout.		
12.	Limb handled gently throughout with careful management of the wound.		
13.	Waste materials disposed of into appropriate waste receptacle.		
14.	Functional and safe bandage applied – tension not too tight.		
15.	Functional and safe bandage applied – tension not too loose.		

RCVS Pre-Registration OSCE

OSCE Code DAB 02

Your patient has had an abdominal surgical wound breakdown. A bacterial swab has already been taken for culture.

The veterinary surgeon has requested that you;

- a. Clean the wound.
- b. Apply a wound dressing and retaining abdominal bandage.

Additional notes

The patient is conscious and of good nature.

Assume that your hands have been cleaned prior to starting the procedure.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.1	Evaluate behavioural and environmental factors when approaching and handling animals to include recognition of/and minimising fear.
3.2	Select and wear appropriate personal protective equipment.
3.3	Demonstrate techniques for approaching and handling animals.
Section 4 – Nursing Care	
4.7	Assess, monitor, manage and report the status of wounds to the appropriate member of the veterinary team, to include assess wounds.
4.8	Apply dressings appropriate to type of wound.
4.9	Apply bandages appropriate to species and condition.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

DAB 02 - Abdominal Bandage and Wound Care

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse and patient.		
2.	All necessary bandaging materials and equipment selected prior to starting bandage.		
3.	All necessary equipment prepared to clean the sutured wound.		
4.	Patient restrained by an assistant in an appropriate recumbency or position (area of interest fully accessible) and supported.		
5.	Wound and surrounding area gently cleaned without further contamination.		
6.	Surrounding areas (wound & environment) left dry.		
7.	Aseptically applied wound dressing with correct side facing wound. Side facing wound not touched.		
8.	Padding applied over abdomen.		
9.	Conforming bandage applied.		
10.	Outer protective layer applied.		
11.	Bandage applied to prevent slipping.		
12.	Prepuce remains uncovered (if applicable).		
13.	Bandage applied caudal to cranial.		
14.	Bandage material applied in correct order ensuring each rotation covers $\frac{1}{2}$ - $\frac{2}{3}$ of previous rotation.		
15.	Candidate checked bandage is neat and of the appropriate tension throughout.		
16.	Patient handled gently throughout with careful management of the wound.		
17.	Waste materials disposed of into appropriate waste receptacle.		
18.	Functional and safe bandage applied – tension not too tight.		
19.	Functional and safe bandage applied – tension not too loose.		

RCVS Pre-Registration OSCE

OSCE Code DAB 03

Your patient has sustained a wound / abrasion.

The veterinary surgeon has requested that you;

- a. Clean the wound / abrasion.
- b. Apply a dressing and bandage to the wound / abrasion.

Additional notes

The patient is anaesthetised and is being monitored.

Assume that your hands have been cleaned prior to starting the procedure.

The examiner will tell you where the wound / abrasion is located from one of the following

Paw

Carpus

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.7	Assess, monitor, manage and report the status of wounds to the appropriate member of the veterinary team, to include assess wounds.
4.8	Apply dressings appropriate to type of wound.
4.9	Apply bandages appropriate to species and condition.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

DAB 03 - Wound Care and Bandage

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse and patient.		
2.	All necessary bandaging materials and equipment selected prior to starting the bandage.		
3.	All necessary equipment prepared to clean the wound/abrasion.		
4.	Patient restrained by an assistant in an appropriate recumbency or position (limb fully accessible) and supported.		
5.	Wound and surrounding area gently cleaned without further contamination.		
6.	Surrounding areas (wound & environment) left dry.		
7.	Aseptically applied wound dressing with correct side facing wound. Side facing wound not touched.		
8.	Padding applied between the toes (as far as is possible on the model).		
9.	Padding layer applied over the limb.		
10.	Conforming bandage applied.		
11.	Outer protective layer applied.		
12.	Bandage material applied from distal to proximal limb with sufficient coverage.		
13.	Bandage material applied in correct order ensuring each rotation covers $\frac{1}{2}$ - $\frac{2}{3}$ of previous rotation.		
14.	Candidate checked bandage is neat and of the appropriate tension throughout.		
15.	Limb handled gently throughout with careful management of the wound.		
16.	Waste materials disposed of into appropriate waste receptacle.		
17.	Functional and safe bandage applied – tension not too tight.		
18.	Functional and safe bandage applied – tension not too loose.		

RCVS Pre-Registration OSCE

OSCE Code DAB 04

Your patient sustained a wound on the left metacarpal pad, which was debrided and bandaged two days ago. The wound is now suspected to be infected.

The veterinary surgeon has requested that you;

- a. Remove the bandage.
- b. Prior to cleaning the wound, swab it for bacterial culture and sensitivity and complete the laboratory submission form.
- c. Clean the wound ready for inspection by the veterinary surgeon.
- d. Verbally report your observations and findings to the veterinary surgeon.

Additional notes

The patient is sedated and is being monitored.

Assume that your hands have been cleaned prior to starting the procedure.

You are not required to replace the bandage.

You do not need to package the sample for posting.

For the purpose of the examination, the examiner is the veterinary surgeon for part c and d.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.7	Assess, monitor, manage and report the status of wounds to the appropriate member of the veterinary team, to include assess wounds and report the status of wounds to the appropriate member of the veterinary team.
4.8	Apply dressings appropriate to type of wound.
4.9	Apply bandages appropriate to species and condition.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy, to include personal protective equipment and preparation of equipment.
5.2	Safely and effectively take appropriate samples to include bacterial swabs.
5.8	Prepare samples for external analysis to include; Accurate completion of documentation. Correct packaging and labelling. Correct preservation. Correct storage.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

DAB 04 - Remove Bandage and Swab Wound

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse, patient and equipment.		
2.	Selected and prepared equipment to swab and clean the wound.		
3.	Removed bandage / dressing without further contamination.		
4.	Swabbed surface of wound without further damage or contamination.		
5.	Wound and surrounding area gently cleaned without further contamination.		
6.	Surrounding areas (wound & environment) left dry.		
7.	Sample labelled with patient details and date.		
8.	Completed lab form & left with swab in lab tray for packaging later.		
9.	Verbally reported observations and findings clearly and accurately to veterinary surgeon.		
10.	Limb handled gently throughout with careful management of the wound.		
11.	Waste materials disposed of into appropriate waste receptacle.		
12.	Procedure performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code DAB 05

A client has arrived at the practice with their dog who has cut his paw while out walking. They have applied a temporary bandage to stem the bleeding.

You have been asked to administer first aid in the absence of a veterinary surgeon.

- a. Remove the bandage applied by the owner.
- b. Using the equipment provided apply an appropriate pressure bandage to stem the bleeding.

Additional notes

The patient is conscious

Assume that your hands have been cleaned prior to starting the procedure.

You are not expected to:

- assess the patient's vital signs.
- explore, clean or flush the wound.
- apply a tourniquet.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 4 – Nursing Care	
4.7	Assess, monitor, manage and report the status of wounds to the appropriate member of the veterinary team, to include assess wounds.
4.8	Apply dressings appropriate to type of wound.
4.9	Apply bandages appropriate to species and condition.
4.15	Administer first aid for a range of situations within the limits of the law and the expertise of the student. First aid is defined as care that can be carried out by a lay person.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

DAB 05 - Haemorrhage Support

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse and patient.		
2.	All necessary bandaging materials and equipment selected which may be required to stem the flow of blood.		
3.	Patient restrained by an assistant in an appropriate recumbency or position (limb fully accessible) and supported.		
4.	Removed the temporary bandage without further trauma.		
5.	Applied appropriate pressure bandage to stem the flow of blood.		
6.	Effectiveness of first aid measure checked.		
7.	Waste materials disposed of into appropriate waste receptacle.		

Laboratory Diagnostic Techniques

The following OSCE stations could be used in your examination

LDT 01 PCV and blood smear

LDT 02 Blood sample collection

LDT 03 Haematology

LDT 04 Urine sample collection

LDT 05 Urinalysis

LDT 06 PCV

LDT 07 Skin scrape

LDT 08 Blood smear examination

LDT 09 Urine Crystals

Feedback from the examiners

Handling of samples

Candidates are reminded to read the scenario and ensure that they prepare all of the samples to be sent to the laboratory.

The scenario or patient record also contains details of the test which needs to be completed so there should be no reason for candidates to complete the test details on the form incorrectly.

It is also important that when you are required to perform the test as part of the examination you should ensure that the sample is inverted to mix the sample before testing.

Recording results

Candidates are reducing their marks because they do not record the results of the urine test correctly.

Packing Laboratory samples

Candidates are encouraged to familiarise themselves with UN packaging instructions P650 <https://www.gov.uk/government/publications/packaging-and-transport-requirements-for-patient-samples-un3373/packaging-and-transport-requirements-for-patient-samples-un3373>

Use of Centrifuge

Candidates are not always aware of the different settings (time and speed) used for centrifuging blood and urine.

Collecting urine samples

Candidates are encouraged to familiarise themselves with using a three-way tap.

Candidates need to ensure that they are familiar with common urinary crystals found in dogs.

Vernier scale readings

Candidates need to ensure that they are familiar with the process of reading the vernier scale on microscopes.

RCVS Pre-Registration OSCE

OSCE Code LDT 01

You are nursing a patient with anaemia. The veterinary surgeon has asked you to perform a PCV and a blood smear.

- a. Prepare and record the PCV for this patient.
- b. Using the pre-cleaned microscope slides and spreader slides perform the blood smear.
- c. Check and comment on the quality of the smear you have prepared.
- d. Stain the blood smear provided by the examiner using the Diff-Quik™ solutions.

Additional information

Assume that your hands have been cleaned prior to starting the procedure
Please tell the examiner which method you would like to use to read the PCV.

The following will be available

- Ruler and Calculator
- Micro Haematocrit Reader
- Card Reader

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparation of equipment. Blood.
5.4	Carry out haematological analysis, to include packed cell volume and blood smear.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 01 - PCV and Blood Smear

		Achieved	Not achieved
1.	Personal protective equipment worn to protect the nurse from contamination.		
2.	Appropriate blood sample selected.		
3.	Sample inverted gently to mix.		
4.	Two capillary tubes prepared.		
5.	Capillary tubes placed into centrifuge correctly.		
6.	Correctly set the centrifuge time and speed.		
7.	Centrifuge used safely.		
8.	PCV determined and recorded as a percentage on the patient record card.		
9.	Blood smear of reasonable diagnostic quality produced.		
10.	Blood smear labelled with patient information and date.		
11.	Blood smear appraised accurately.		
12.	Blood smear stained and rinsed using the Diff-Quik™ stain provided.		
13.	Slide left to dry.		
14.	Waste materials disposed of into appropriate waste receptacle.		
15.	Blood smear and PCV performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 02

You are nursing a patient with anaemia. The veterinary surgeon has asked you to obtain a blood sample from this patient for haematological evaluation.

- a. Prepare equipment and obtain a blood sample for haematological evaluation from the patient's jugular vein.
- b. Package the sample to meet UN packaging instruction P650, ready for dispatch to the external laboratory. *This will be collected by courier.*

Additional Information

Assume that your hands may be contaminated from handling a previous patient. You should therefore demonstrate hand hygiene using the WHO technique.

The patient has previously had the hair clipped from the sample site.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.7	Complete appropriate paperwork for referral and diagnostic services, to include for laboratory samples.
Section 3 – Handling and Restraint	
3.3	Demonstrate techniques for approaching and handling animals, to include demonstrate techniques for handling animals.
3.5	Use appropriate restraint methods suitable for the patient and situation with due consideration for animal welfare, to include restrain for sample collection.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparing samples site. Preparation of equipment. Blood.
5.2	Safely and effectively take appropriate samples, to include blood.
5.4	Carry out haematological analysis to include haematology.
5.8	Prepare samples for external analysis, to include; Accurate completion of documentation. Correct packaging and labelling. Correct preservation. Correct storage.
5.9	Records laboratory test results and communicate accurately to the appropriate member of the veterinary team, to include records laboratory test results.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 02 - Blood Sample Collection

		Achieved	Not achieved
1.	Hand hygiene carried out at an appropriate time using the WHO technique.		
2.	Equipment for collection of blood sample selected and prepared aseptically.		
3.	Personal protective equipment worn to prevent contamination of nurse and patient.		
4.	Assistant asked to restrain patient.		
5.	Skin cleaned over venepuncture site.		
6.	Vein raised and blood sample obtained using an aseptic technique.		
7.	Pressure applied over venepuncture site.		
8.	Correctly filled blood tube with blood and lid secured.		
9.	Needle(s) not resheathed at any time or resheathed safely.		
10.	Sample inverted gently to mix.		
11.	Sample labelled with patient details and date.		
12.	Laboratory form completed fully and accurately.		
13.	Sample packed to meet UN P650 packaging instructions.		
14.	Waste materials disposed of into appropriate waste receptacle.		
15.	Procedure performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 03

You are nursing a patient with anaemia. The veterinary surgeon has asked you to prepare a blood sample for haematology to be carried out by an external laboratory. Using the blood and the pre-cleaned microscope slides and spreader slides provided;

- a. Perform a blood smear.
- b. Check and comment on the quality of the smear you have prepared for the external laboratory.
- c. Stain the blood smear provided using the Diff-Quik™ solutions.
- d. Package both the **blood sample** and the **blood smear** to meet UN packaging instruction P650, ready for dispatch to the external laboratory.
This will be collected by courier.

Additional Information

Assume that your hands have been cleaned prior to starting the procedure

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.7	Complete appropriate paperwork for referral and diagnostic services, to include for laboratory samples.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparing samples site. Preparation of equipment. Blood.
5.2	Safely and effectively take appropriate samples, to include blood.
5.4	Carry out haematological analysis to include haematology.
5.8	Prepare samples for external analysis, to include; Accurate completion of documentation. Correct packaging and labelling. Correct preservation. Correct storage.
5.9	Records laboratory test results and communicate accurately to the appropriate member of the veterinary team, to include records laboratory test results.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 03 - Haematology

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of the nurse.		
2.	Appropriate blood sample selected.		
3.	Sample inverted gently to mix.		
4.	Blood smear of reasonable diagnostic quality produced.		
5.	Blood smear appraised accurately.		
6.	Blood smear stained and rinsed using the Diff-Quik™ stain provided and left to dry. Stains not contaminated.		
7.	Blood smear labelled with patient information and date.		
8.	Laboratory form completed fully and accurately.		
9.	Blood smear and sample packed to meet UN P650 packaging instructions.		
10.	Waste materials disposed of into appropriate waste receptacle.		
11.	Blood smear performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 04

A canine patient has been admitted to the surgery with intermittent urinary incontinence. The veterinary surgeon intends to carry out a cystogram.

Prior to this procedure you have been asked to send a urine sample to an external laboratory for a bacterial culture and sensitivity test.

- a. Collect a urine sample using the urinary catheter already in place.
- b. Using the information provided complete the laboratory form.
- c. Package the sample to meet UN packaging instruction P650, ready for dispatch to the external laboratory. *This will be collected by courier.*

Additional information

The patient has been anaesthetised and is being monitored.

Assume that your hands have been cleaned prior to starting the procedure.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.8	Complete appropriate paperwork for referral and diagnostic services, to include for laboratory samples.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE Urine
5.2	Safely and effectively take appropriate samples, to include urine
5.8	Prepare samples for external analysis, to include; Accurate completion of documentation Correct packaging and labelling Correct preservation Correct storage
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 04 - Urine Sample Collection

		Achieved	Not achieved
1.	Equipment for collection of urine sample selected and prepared.		
2.	Personal protective equipment worn to prevent contamination of nurse and patient.		
3.	3 way tap and syringe used correctly to collect sample.		
4.	Sufficient uncontaminated sample collected and transferred to the correct urine pot using a safe and aseptic technique.		
5.	Sample labelled with patient details and date.		
6.	Laboratory form completed fully and accurately.		
7.	Sample packed to meet UN P650 packaging instructions.		
8.	Waste materials disposed of into appropriate waste receptacle.		
9.	Procedure performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 05

This patient has been admitted to the surgery with intermittent urinary incontinence.

You have been asked to;

- a. Collect a urine sample using the urinary catheter already in place.
- b. Use the refractometer to obtain a urine specific gravity reading.
- c. Use a urine reagent strip to obtain a reading.
- d. Record your findings on the chart provided.
- e. Correctly store the sample in case further analysis is required later in the day.

Additional Information

The patient is sedated and restrained.

Assume that your hands have been cleaned prior to starting the procedure.

Assume that the urinary catheter has been cleaned prior to starting the procedure.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 2 – Communication	
2.2	Create accurate and legible written communications/documentation according to practice policy, to include laboratory reports.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparation of equipment. Calibration of equipment. Urine.
5.2	Safely and effectively take appropriate samples, to include urine.
5.4	Carry out urinalysis, to include urines reagent strips and specific gravity.
5.8	Prepare samples for external analysis, to include; Correct preservation. Correct storage.
5.9	Records laboratory test results and communicate accurately to the appropriate member of the veterinary team, to include records laboratory test results.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 05 - Urinalysis

		Achieved	Not achieved
1.	Equipment for collection of urine sample selected and prepared.		
2.	Equipment for testing urine sample selected and prepared.		
3.	Personal protective equipment worn to prevent contamination of nurse and patient.		
4.	Patient and equipment protected from potential soiling.		
5.	3 way tap and syringe used correctly to collect sample.		
6.	Sufficient uncontaminated sample collected and transferred to the correct urine pot using a safe and aseptic technique.		
7.	Sample labelled with patient details and date.		
8.	Sample inverted gently to mix.		
9.	Refractometer correctly calibrated.		
10.	Refractometer correctly used to determine the specific gravity.		
11.	Specific gravity recorded accurately.		
12.	Urine test strips used correctly to enable accurate results.		
13.	Urine test result recorded accurately.		
14.	Urine sample stored correctly.		
15.	Waste materials disposed of into appropriate waste receptacle.		
16.	Procedure performed without contamination of self and equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 06

You are nursing a patient with anaemia. The veterinary surgeon has asked you to perform jugular blood sample collection and run a PCV.

- a. Prepare yourself and assemble the equipment and to obtain a jugular sample from the patient.
- b. Obtain a jugular sample from the patient.
- c. Using the centrifuge obtain and record the PCV for this patient.

Additional information

Assume that your hands may be **contaminated** prior to starting the procedure.

The patient has previously had the hair clipped from the sample site.

Please tell the examiner which method you would like to use to read the PCV. The following will be available

- Ruler and Calculator
- Micro Haematocrit Reader
- Card Reader

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1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.3	Demonstrate techniques for approaching and handling animals.
3.5	Use appropriate restraint methods suitable for the patient and situation with due consideration for animal welfare, to include restrain for sample collection.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparing sample site. Blood.
5.2	Safely and effectively take appropriate samples, to include blood.
5.4	Carry out haematological analysis, to include packed cell volume.
5.8	Prepare samples for external analysis, to include; Correct packaging and labelling.
5.9	Records laboratory test results and communicate accurately to the appropriate member of the veterinary team, to include records laboratory test results.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include comply with World Health Organisation hand washing method and use and dispose of PPE.

LDT 06 PCV

		Achieved	Not achieved
1.	Hand hygiene carried out using the WHO technique.		
2.	Equipment for collection of blood sample selected and prepared aseptically.		
3.	Personal protective equipment worn to prevent contamination of nurse and patient.		
4.	Assistant asked to restrain patient.		
5.	Skin cleaned over venepuncture site.		
6.	Vein raised and blood sample obtained using an aseptic technique.		
7.	Pressure applied over venepuncture site.		
8.	Correctly filled blood tube with blood and lid secured.		
9.	Needle(s) not resheathed at any time or resheathed safely.		
10.	Sample inverted gently to mix.		
11.	Sampled labelled with patient details and date.		
12.	Two capillary tubes prepared.		
13.	Capillary tubes placed into centrifuge correctly.		
14.	Correctly set the centrifuge time and speed.		
15.	Centrifuge used safely.		
16.	PCV determined and recorded as a percentage on the patient record card.		
17.	Waste materials disposed of into appropriate waste receptacle.		
18.	Procedure performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 07

You are required to prepare a skin scrape / hair pluck / coat brushing sample from a patient and examine it under the microscope for evidence of parasites.

- a. Transfer the collected material to the microscope slide, ready for examination under the microscope.
- b. Using the prepared slide provided by the examiner, set up the microscope, locate and focus on the parasite.
- c. Record the vernier scale reading to enable relocation of the parasite if the slide is moved.
- d. Identify and record the latin name of the parasite located.

Additional Information

Assume that your hands have been cleaned prior to starting the procedure.

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1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparation of equipment. Skin/hair.
5.2	Safely and effectively take appropriate samples, to include skin, hair pluck.
5.6	Carry out skin and hair analysis, may include hair pluck, skin scrapes, coat brushings.
5.7	Use a microscope to examine laboratory samples, to include; Low magnification. High magnification. Oil immersion. Record vernier scale readings.
5.9	Records laboratory test results and communicate accurately to the appropriate member of the veterinary team, to include records laboratory test results.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous and non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 07 - Skin Scrape / Hair Pluck

		Achieved	Not achieved
1.	Personal protective equipment worn to prevent contamination of nurse.		
2.	Selected all necessary equipment required to transfer the collected material to the slide and prepared for use.		
3.	Slide of diagnostic quality prepared.		
4.	Microscope set up ready for use.		
5.	Correctly used the microscope to focus on a parasite.		
6.	Read and correctly recorded the vernier scale.		
7.	Recorded name of parasite.		
8.	Waste materials disposed of into appropriate waste receptacle.		
9.	Procedure performed without contamination of self or equipment.		

RCVS Pre-Registration OSCE

OSCE Code LDT 08

You are nursing a patient with an infection. The veterinary surgeon has asked you to produce a diagnostic blood smear and examine it.

- a. Using the pre-cleaned microscope slides and spreader slides perform the blood smear.
- b. Comment on the quality of the smear you have prepared.
- c. Stain the blood smear provided by the examiner using the Diff-Quik™ solutions.
- d. Using the slide provided by the examiner, examine the blood smear using the oil immersion lens. The microscope will be already set up ready for use.
- e. Position the slide using the vernier scale reading given and identify the white blood cell in the centre of the field of view. The microscope will already be set up ready for use.

Additional information

Assume that your hands have been cleaned prior to starting the procedure.

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1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparing of equipment. Blood.
5.3	Carry out haematological analysis, to include blood smear.
5.7	Use a microscope to examine laboratory samples, to include; Low magnification, high magnification, oil magnification, record vernier scale readings.
5.8	Prepare samples for external analysis to include correct packaging and labelling.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include comply with World Health Organisation hand washing method and use and dispose of PPE.

LDT 08 - Blood Smear Examination

		Achieved	Not achieved
1.	Personal protective equipment worn to protect the nurse from contamination.		
2.	Appropriate blood sample selected.		
3.	Sample inverted gently to mix.		
4.	Blood smear of reasonable diagnostic quality produced.		
5.	Blood smear labelled with patient information and date.		
6.	Blood smear appraised accurately.		
7.	Blood smear stained, rinsed using the Diff-Quik™ stain provided, and left to dry.		
8.	Waste materials disposed of into appropriate waste receptacle.		
9.	Procedure performed without contamination of self or equipment.		
10.	Microscope set up correctly for examination of slide (oil immersion).		
11.	White blood cell located using the vernier scale reading provided.		
12.	Correctly named the white blood cell.		

RCVS Pre-Registration OSCE

OSCE Code LDT 09

You are required examine a urine sample under a microscope to look for urine crystals.

- a. Prepare the sample for the patient named on the clinical record for analysis under a microscope.
- b. Examine the urine sample under the microscope, locate a crystal and place it in the centre of the field of view. You are not required to identify this crystal.
- c. Write down the vernier scale reading to relocate the crystal if the slide is moved.
- d. Identify the urine crystal(s) shown in the photograph provided by the examiner.

Additional information

Assume that your hands have been cleaned prior to starting the procedure.

The microscope slides have been pre-cleaned.

The photograph will be selected from a range of common crystals found in small animal patients.

Please leave the slide on the microscope for the examiner to check.

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1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 5 – Laboratory Techniques	
5.1	Discuss with the veterinary surgeon and prepare for an appropriate sampling strategy to include; PPE. Preparation of equipment. Urine.
5.4	Carry out urinalysis, to include sediment analysis.
5.7	Use a microscope to examine laboratory samples, to include low magnification and record Vernier Scale readings.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.

LDT 09 - Urine Crystals

		Achieved	Not achieved
1.	Equipment for sample analysis selected and prepared.		
2.	Personal protective equipment worn to protect the nurse from contamination.		
3.	Urine sample prepared for centrifuging to enable a diagnostic slide.		
4.	Centrifuge set up safely.		
5.	Correctly set the centrifuge time and speed.		
6.	Prepared the sample following centrifuging to enable a diagnostic slide.		
7.	Prepared the slide correctly for examination.		
8.	Examined the slide under the microscope.		
9.	Focused the microscope on a crystal.		
10.	Record the vernier scale.		
11.	Correctly identified the urine crystal in the image.		
12.	Waste materials disposed of into appropriate waste receptacle.		
13.	Procedure performed without contamination of self or equipment.		

Supporting Veterinary Anaesthesia

The following OSCE stations could be used in your examination

SVA 01 Re-breathing anaesthetic system

SVA 02 Non-rebreathing system 1

SVA 03 Anaesthetic induction

SVA 04 Non-rebreathing system 2

Feedback from the examiners

Leak test the anaesthetic machine

Candidates are not familiar with appropriate techniques for leak testing the machine. This is not the same as leak testing the breathing system

Endotracheal tube

Candidates are putting patients in danger by failing to check that the lumen of the ET tube is not blocked.

Re-breathing anaesthetic system

When changing the soda lime candidates do not fill the canister sufficiently.

Oxygen Cylinders

In the examination we normally use the oxygen cylinders attached to the anaesthetic machine. Candidates are advised to become familiar with this.

RCVS Pre-Registration OSCE

OSCE Code SVA 01

A patient has been admitted for a routine surgical procedure. The veterinary surgeon has requested that you check and prepare the necessary equipment for delivery of gaseous anaesthetic using a **re-breathing anaesthetic system**.

- a. Using the information provided in the patient record, select, prepare and attach a suitable breathing anaesthetic system to the anaesthetic machine and passive scavenging.
- b. Tell the examiner the name of the anaesthetic breathing system you have selected.
- c. As this is the first anaesthetic of the day, you are required to perform the checks needed to ensure the anaesthetic machine and anaesthetic breathing system are ready for use. *Explain to the examiner the checks you are making.*
- d. Using the chart provided, select the appropriate oxygen induction fresh gas flow rate for the patient and set this on the machine.

Additional information

Assume that your hands have been cleaned prior to starting the procedure.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 8 – Infection Control	
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.
Section 10 – Anaesthesia	
10.2	Prepare for anaesthesia to include; Check and prepare the anaesthetic machine in accordance with practice protocol. Select and prepare and check an appropriate breathing system/circuit and pollution control.

SVA 01 - Re-breathing Anaesthetic System

		Achieved	Not achieved
1.	Quantity of oxygen registered on the pressure dial checked.		
2.	Oxygen flowmeter and emergency oxygen flush checked to ensure it is functioning.		
3.	Vaporiser percentage dial and level of the volatile anaesthetic agent in the vaporiser checked and appropriate action taken.		
4.	Appropriate anaesthetic breathing system selected and attached correctly to anaesthetic machine and scavenging.		
5.	Correctly named the anaesthetic breathing system.		
6.	Personal protective equipment worn while handling corrosive substance.		
7.	Soda lime changed safely.		
8.	Anaesthetic machine leak and breathing system leak test performed and correctly interpreted.		
9.	APL valve checked to ensure it is functioning. APL valve left in correct position.		
10.	Fresh gas flow set correctly.		

RCVS Pre-Registration OSCE

OSCE Code SVA 02

A patient has been admitted for a surgical procedure which will be carried out under general anaesthesia. The veterinary surgeon has requested that you check and prepare the necessary equipment for delivery of gaseous anaesthetic using a **non-rebreathing anaesthetic system**.

- a. Using the information provided in the patient record, select, prepare and attach a suitable breathing anaesthetic system to the anaesthetic machine and passive scavenging.
- b. Tell the examiner the name of the anaesthetic breathing system you have selected.
- c. As this is the first anaesthetic of the day, you are required to perform the checks needed to ensure the anaesthetic machine and anaesthetic breathing system are ready for use. *Explain to the examiner the checks you are making.*
- d. Select and prepare the endotracheal (ET) tube for use together with any equipment required for its placement. Place this in the tray provided.
- e. Restrain/position the patient for the placement of the ET tube and connect the patient to the anaesthetic machine (The assistant/examiner will place the tube)
- f. Using the information provided, set the oxygen flowmeter to show the fresh gas flow setting for this patient.

Additional information

Assume that your hands have been cleaned prior to starting the procedure
For some patients more than one breathing system may be appropriate.

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1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 3 – Handling and Restraint	
3.3	Demonstrate techniques for approaching and handling animals.
3.5	Use appropriate restraint methods suitable for the patient and situation with due consideration for animal welfare to include restrain for introduction of an appropriate airway management device.
Section 10 – Anaesthesia	
10.2	Prepare for anaesthesia to include; Check and prepare the anaesthetic machine in accordance with practice protocol. Select and prepare and check an appropriate breathing system/circuit and pollution control. Prepare appropriate airway management device.

SVA 02 - Non-rebreathing System 1

		Achieved	Not achieved
1.	Quantity of oxygen registered on the pressure dial checked.		
2.	Oxygen flowmeter and emergency oxygen flush checked to ensure it is functioning.		
3.	Vaporiser percentage dial and level of the volatile anaesthetic agent in the vaporiser checked and appropriate action taken.		
4.	Appropriate anaesthetic breathing system selected and attached correctly to machine and scavenging.		
5.	Correctly named the anaesthetic breathing system.		
6.	Anaesthetic machine leak and breathing system leak test performed and correctly interpreted.		
7.	APL valve checked to ensure it is functioning. APL valve left in correct position.		
8.	Correct endotracheal tube selected and checked it is ready for use.		
9.	Equipment associated for endotracheal tube placement selected and ready for use.		
10.	Patient positioned and head supported for the placement of the endotracheal tube.		
11.	Endotracheal tube secured.		
12.	Patient attached to breathing system and checks made to ensure the endotracheal tube effectively seals the airway.		
13.	Fresh gas flow set correctly.		

RCVS Pre-Registration OSCE

OSCE Code SVA 03

A patient has been admitted for a routine surgical procedure. The veterinary surgeon has requested that you check and prepare the necessary equipment for induction of anaesthesia and delivery of gaseous anaesthetic.

- a. Using the information provided in the patient record, select, prepare and attach a suitable breathing anaesthetic system to the anaesthetic machine and passive scavenging.
- b. Tell the examiner the name of the anaesthetic breathing system you have selected.
- c. As this is the first anaesthetic of the day, you are required to perform the checks needed to ensure the anaesthetic machine and anaesthetic breathing system are ready for use. *Explain to the examiner the checks you are making.*
- d. Using the Formulary or Compendium (book) provided, calculate and draw up the anaesthetic induction agent required. *Please note you are required to draw up the exact quantity as calculated.*

Show all your workings including units.

Additional information

Assume that your hands have been cleaned prior to starting the procedure
For some patients more than one breathing system may be appropriate.

The patient has been pre-medicated.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 7 - Dispensing	
7.2	Interpret prescriptions and prepare medicines for dispensing, to include calculate drug dosages and confirm with an appropriately qualified member of the veterinary team.
Section 8 – Infection Control	
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.
Section 10 – Anaesthesia	
10.2	Prepare for anaesthesia to include; Check and prepare the anaesthetic machine in accordance with practice protocol. Select and prepare and check an appropriate breathing system/circuit and pollution control system in accordance with practice protocol. Prepare materials and equipment required for induction of anaesthesia to include pharmaceutical agents (according to veterinary surgeon direction).

SVA 03 - Anaesthetic Induction

		Achieved	Not achieved
1.	Quantity of oxygen registered on the pressure dial checked.		
2.	Oxygen flowmeter and emergency oxygen flush checked to ensure it is functioning.		
3.	Vaporiser percentage dial and level of the volatile anaesthetic agent in the vaporiser checked and appropriate action taken.		
4.	Appropriate anaesthetic breathing system selected and attached correctly to anaesthetic machine and scavenging.		
5.	Correctly named the anaesthetic breathing system.		
6.	Anaesthetic machine leak and breathing system leak test performed and correctly interpreted.		
7.	APL valve checked to ensure it is functioning. APL valve left in correct position.		
8.	Patient's anaesthetic induction agent requirement correctly calculated.		
9.	Units included in final answer.		
10.	Personal protective equipment worn to prevent anaesthetic agent coming into contact with nurse's skin.		
11.	Prepared the intravenous anaesthetic agent using an aseptic technique and left it ready for use.		

RCVS Pre-Registration OSCE

OSCE Code SVA 04

A patient has been admitted for a routine surgical procedure. The veterinary surgeon has requested that you check and prepare the necessary equipment for delivery of gaseous anaesthetic using a **non-rebreathing anaesthetic system**.

- a. Using the information provided in the patient record, select, prepare and attach a suitable non-rebreathing anaesthetic system to the anaesthetic machine and passive scavenging.
- b. Tell the examiner the name of the anaesthetic non-rebreathing system you have selected.
- c. As this is the first anaesthetic of the day, you are required to perform the checks needed to ensure the anaesthetic machine and anaesthetic non re-breathing system are ready for use. *Explain to the examiner the checks you are making.*
- d. Select up to three Endotracheal Tubes (ET) most appropriate for the patient together with any equipment required for placement of the endotracheal tube. Prepare one of the ET tubes for use.
- e. For this patient you are required to calculate
 - I. Minute volume
 - II. Fresh gas flow per minute
- f. Set the oxygen flowmeter to show the fresh gas flow setting for this patient.

Additional information

Assume that your hands have been cleaned prior to starting the procedure. For some patients more than one non re-breathing system may be appropriate.

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1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 8 – Infection Control	
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include use and dispose of PPE.
Section 10 – Anaesthesia	
10.2	Prepare for anaesthesia to include; Check and prepare the anaesthetic machine in accordance with practice protocol. Select and prepare and check an appropriate breathing system/circuit and pollution control system in accordance with practice protocol. Prepare materials and equipment required for induction of anaesthesia to include pharmaceutical agents (according to veterinary surgeon direction).

SVA 04 Non-rebreathing System 2

		Achieved	Not achieved
1.	Quantity of oxygen registered on the pressure dial checked.		
2.	Oxygen flowmeter and emergency oxygen flush checked to ensure it is functioning.		
3.	Vaporiser percentage dial and level of the volatile anaesthetic agent in the vaporiser checked and appropriate action taken.		
4.	Appropriate anaesthetic breathing system selected and attached correctly to anaesthetic machine and scavenging.		
5.	Correctly named the anaesthetic breathing system.		
6.	Anaesthetic machine leak and breathing system leak test performed and correctly interpreted.		
7.	APL valve checked to ensure it is functioning. APL valve left in correct position.		
8.	Endotracheal tube(s) of an appropriate size for the patient selected and one prepared ready to use.		
9.	Equipment associated for endotracheal tube placement selected and ready for use.		
10.	Patient's tidal volume, minute volume and fresh gas flow correctly calculated.		
11.	Units included in final answer.		
12.	Fresh gas flow set correctly.		

Veterinary Diagnostic Imaging

The following OSCE stations could be used in your examination

VDI 01 This station has been removed from the bank

VDI 02 Patient positioning (digital)

Possible views include:

Abdomen (Lateral)	Pelvis (Lateral)	Lumbar spine (Lateral)
Abdomen (Ventrodorsal)	Pelvis (Ventrodorsal)	Tibia and fibula (Lateral)
Abdomen (Dorsoventral)	Stifle (Craniocaudal)	Cervical spine (Lateral)
Thorax (Ventrodorsal)	Stifle (Lateral)	Thoracic spine (Lateral)
Thorax (Dorsoventral)	Tarsus (Lateral)	Thoracic spine (Dorsoventral)
Thorax (Lateral)	Carpus (Lateral)	Thoracic spine (Ventrodorsal)
Shoulder (Lateral)	Carpus (Dorsopalmer)	
Shoulder (Caudocranial)	Elbow (Lateral)	

Patients may include

- Dog
- Cat
- Rabbit

Feedback from the examiners

General poor technique with positioning the patient and collimating the primary beam.

RCVS Pre-Registration OSCE

OSCE Code VDI 02

The veterinary surgeon has asked you to take a radiograph of this patient.

- a. Using the digital X-ray machine and the patient record, input the following details into the system;
 - Patient details
 - Owner details
 - Radiographic View
- b. Using the radiographic equipment provided, set up and position the patient for the required view detailed on the patient record.
- c. Tell the examiner the anatomical landmarks you used to collimate and centre the primary beam.
- d. Take the exposure.

Additional information

The patient has been anaesthetised and is being monitored.

The Bucky Tray is already loaded with the cassette/grid.

You are not expected to set exposure factors or change the focal film distance.

Assume that your hands have been cleaned prior to starting the procedure.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 6 – Diagnostic Imaging	
6.1	Prepare and use radiography equipment to produce a diagnostic image, to include prepare radiography equipment and use radiography equipment.
6.2	Use appropriate personal protective equipment (PPE) and radiation monitoring equipment in accordance with practice local rules, to include PPE, radiation monitoring equipment.
6.3	Position a patient to obtain a diagnostic image of the area of interest, to include Lateral Lumbar Spine
6.4	Produce images according to practice procedure.

VDI 02 - Patient Positioning (digital)

		Achieved	Not achieved
1.	Patient and owner details put into digital x-ray machine.		
2.	Species / size of patient selected.		
3.	Correct view selected.		
4.	Patient placed in suitable position with area of interest closest/positioned on the table.		
5.	Correct use of positioning aids (if necessary ties, sandbags, trough and foam wedges).		
6.	Correctly positioned patient for view required.		
7.	Left/right marker correctly placed.		
8.	Centered primary beam correctly.		
9.	Collimated primary beam correctly.		
10.	Correctly clarified which anatomical landmarks were used to help centre the primary beam.		
11.	Correctly clarified which anatomical landmarks were used to help collimate the primary beam.		
12.	Radiograph of diagnostic quality feasibly produced.		
13.	Exited controlled zone and made exposure.		

Veterinary Theatre Practice

The following OSCE stations could be used in your examination

VTP 01 Surgical preparation

VTP 02 Instrument preparation

VTP 03 Initial patient skin preparation

VTP 04 Final patient skin preparation and drape

VTP 05 Sterilisation of equipment

VTP 06 Initial patient skin preparation and instrument selection

Feedback from the examiners

Gowning

Candidates are advised to become familiar with donning disposable surgical gowns

Draping trolley

Poor technique, which would potentially lead to break in asepsis

RCVS Pre-Registration OSCE

OSCE Code VTP 01

Prior to assisting with an exploratory surgical procedure, you have been requested to;

- a. Put on a surgical cap and mask.
- b. Prepare yourself to assist with the procedure by surgically disinfecting your hands and arms using the alcohol-based hand rub formulation provided.
- c. Put on the disposable sterile gown.
- d. Put on the sterile gloves using the closed method.

Additional Information

Assume that you have already washed your hands at the start of the day and cleaned under your fingernails.

Please note you are not required to cover your feet with protective shoe covers.

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Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 9 – Theatre Practice	
9.7	Prepare hands and arms using appropriate method, to include pre-surgical scrub prior to donning gown and gloves.
9.8	Prepare for surgical assistance wearing appropriate attire in accordance with practice protocol, to include down gown in an aseptic manner and don gloves (closed gloving method) in an aseptic manner to assist with surgery.

VTP 01 - Surgical Preparation

		Achieved	Not achieved
1.	Presented with short well-manicured fingernails, free from polish/varnish (no false nails), no visible jewellery worn, arms bare below the elbow.		
2.	Surgical cap donned correctly.		
3.	Surgical mask donned and secured correctly.		
4.	Applied sufficient alcohol-based handrub formulation to cover hands and forearms.		
5.	Rub the alcohol-based handrub formulation in portions into hands and forearms without re-contaminating any portion.		
6.	Hands rubbed until dry.		
7.	Alcohol-based handrub formulation applied for the recommended duration.		
8.	Asked assistant to open gown and gloves. Candidate placed these on sterile surface.		
9.	Gown put on using an aseptic technique.		
10.	Instructed the assistant to fasten the neck and back velcro/ties.		
11.	Sterile gloves put on aseptically using the closed method.		
12.	Tied the waist ties using an aseptic technique.		
13.	After completing gloving and gowning, hands clasped together above waist.		
14.	Maintained sterility of gloves and self during procedure.		

RCVS Pre-Registration OSCE

OSCE Code VTP 02

Prior to a surgical procedure, you have been requested to;

- a. Prepare yourself to assist with the procedure by surgically disinfecting your hands and arms using the alcohol-based hand rub formulation provided.
- b. Put on the sterile gloves using the open method.
- c. Drape the surgical instrument trolley with the sterile drape.
- d. Select and place the 10 required items listed on the Standard Operating Procedure (SOP) onto the sterile field. Place the items from **left to right** in the order they appear on the SOP.

Additional information

Assume that you have already washed your hands at the start of the day and cleaned under your fingernails.

Updated March 2024

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 9 – Theatre Practice	
9.1	Maintain common surgical instruments to include, identify common surgical instruments.
9.7	Prepare hands and arms using appropriate method, to include pre-surgical scrub prior to donning gown and gloves.
9.8	Prepare for surgical assistance wearing appropriate attire in accordance with practice protocol, to include down gown in an aseptic manner and don gloves (open gloving method) in an aseptic manner to assist with surgery.
9.12	Handle and pass instruments and equipment aseptically during surgery.

VTP 02 - Instrument Preparation

		Achieved	Not achieved
1.	Presented with short well-manicured fingernails, free from polish/varnish (no false nails), no visible jewellery worn, arms bare below the elbow.		
2.	Applied sufficient alcohol-based handrub formulation to cover hands and forearms.		
3.	Rubbed the alcohol-based handrub formulation in portions into hands and forearms without re-contaminating any portion.		
4.	Hands rubbed until dry.		
5.	Alcohol-based handrub formulation applied for the recommended duration.		
6.	Asked assistant to open gloves. Candidate placed these on sterile surface.		
7.	Sterile gloves put on aseptically using the open method.		
8.	Trolley draped in an aseptic manner.		
9.	Eight of the ten named items placed on the trolley in the order listed.		
10.	Maintained sterility of gloves, drape, items and self during procedure.		

RCVS Pre-Registration OSCE

OSCE Code VTP 03

This patient has been anaesthetised and clipped in preparation for the veterinary surgeon to perform a surgical procedure.

You are required to;

- a) Prepare the operating theatre table for this patient.
- b) Prepare the surgical light.
- c) Demonstrate suitable hand hygiene.
- d) Perform the initial skin preparation of patient.
- e) Transfer the patient to the theatre table and position for final skin preparation (you are not expected to perform the final skin preparation).

Additional Information

Assume that your hands may be contaminated.

The patient is anaesthetised and being monitored.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include dispose of non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment to include, comply with the World Health Organisation hand washing method and use and dispose of PPE.
Section 9 – Theatre Practice	
9.3	Prepare the theatre for use based on equipment and procedure.
9.4	Position patients appropriately on the operating table in accordance with the planned procedure considering patient condition.
9.5	Prepare the surgical site appropriately for the procedure in accordance with practice protocol.

VTP 03 - Initial Patient Skin Preparation

		Achieved	Not achieved
1.	Presented with short well-manicured fingernails, free from polish/varnish (no false nails), no visible jewellery worn, arms bare below the elbow.		
2.	No visible jewellery worn (ears, face, neck, wrists and hands).		
3.	Prepared the operating table with all the necessary equipment for the patient.		
4.	Prepared surgical light correctly.		
5.	Prepared a solution of antimicrobial skin cleanser at the dilution rate provided.		
6.	Carried out hand hygiene using the gel provided (Who method).		
7.	Personal protective equipment worn to prevent contamination of nurse and patient.		
8.	Performed effective initial skin preparation using a recognised technique.		
9.	Transferred patient to theatre following initial skin preparation ensuring no contamination of site.		
10.	Patient correctly positioned for the procedure.		

RCVS Pre-Registration OSCE

OSCE Code VTP 04

Prior to the surgical procedure, you have been requested to perform the final skin preparation and drape the patient using the four quadrant technique;

- a. Put on the sterile gloves using the open method.
- b. Perform the final skin preparation on the patient using ChloroPrep™.
- c. Drape the patient for surgery using the four quadrant technique.

Additional information

Assume that you have already prepared your hands with Sterillium.

Updated April 2022

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 9 – Theatre Practice	
9.5	Prepare the surgical site appropriately for the procedure in accordance with practice protocol.
9.8	Prepare for surgical assistance wearing appropriate attire in accordance with practice protocol, to include down gown in an aseptic manner and don gloves (open gloving method) in an aseptic manner to assist with surgery.
9.9	Assist with sterile procedures to include maintain sterility of self and others during procedures.
9.11	Assist with draping patient maintaining sterility according to practice protocol.

VTP 04 - Final Patient Skin Preparation and Drape

		Achieved	Not achieved
1.	Presented with short well-manicured fingernails, free from polish/varnish (no false nails), no visible jewellery worn, arms bare below the elbow.		
2.	Asked assistant to open gloves. Candidate place these on sterile surface.		
3.	Sterile gloves put on aseptically using the open method.		
4.	Chloraprep applicator opened in a sterile manner.		
5.	Chloraprep applied effectively to surgical site.		
6.	Patient draped using a recognised aseptic technique.		
7.	Maintained sterility of gloves, drapes, towel clips and self during procedure.		

RCVS Pre-Registration OSCE

OSCE Code VTP 05

Prior to a surgical procedure, you have been requested to;

- a. Pack and label the drape provided.
- b. Pack and label the instrument indicated.
- c. Prepare and load the autoclave ready for use (explain to the examiner what you are doing).

Additional information

You are not expected to start the autoclave cycle.

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 9 – Theatre Practice	
9.2	Prepare package and monitor the sterilisation of instruments and materials to include; Prepare instruments for sterilisation. Prepare materials for sterilisation. Package instruments for sterilisation. Package materials for sterilisation. Monitor sterilisation of instruments and materials.

VTP 05 - Sterilisation of Equipment

		Achieved	Not achieved
1.	Folded drape using a recognised method.		
2.	Packed the drape for autoclaving using an effective technique.		
3.	Selected the instrument to be autoclaved.		
4.	Packed the instrument for autoclaving using an effective technique.		
5.	Labelled the autoclave packages correctly.		
6.	Prepare the autoclave for use.		
7.	Loaded autoclave correctly.		
8.	Secured autoclave door and selected appropriate cycle.		

RCVS Pre-Registration OSCE

OSCE Code VTP 06

Prior to a surgical procedure, you have been requested to prepare the patient and select surgical instruments. Your patient has been anaesthetised and clipped in preparation for the veterinary surgeon to perform a routine surgical procedure.

You are required to;

- a. Position the patient to enable you to perform the initial skin preparation.
- b. Perform the initial skin preparation.
- c. Assume you are wearing surgical gloves. Select and place the 10 required items listed on the Standard Operating Procedure (SOP) onto the sterile field. Place the items from left to right in the order they appear on the SOP.

Additional Information

The incision site is marked on the image of the patient provided.

Assume that your hands may be contaminated, for part b.

Assume you are wearing surgical gloves for part c.

The patient is anaesthetised and being monitored.

Updated April 2022

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This OSCE station assesses the following RCVS Day One Skills for Veterinary Nurses

Section 1 - Legislation Affecting Practice	
1.1	Comply with Health and Safety requirements and local risk factors.
1.2	Follow Standard Operating Procedures and manufacturer guidelines when using equipment and materials.
Section 8 – Infection Control	
8.3	Dispose of hazardous and non-hazardous waste safely and correctly according to current legislation, to include non-hazardous waste.
8.4	Ensure appropriate hygiene skills are followed before and after handling animals and equipment, to include comply with the World Health Organisation hand washing method and use and dispose of PPE.
Section 9 – Theatre Practice	
9.1	Maintain common surgical instruments, to include identify common surgical instruments.
9.4	Position patients appropriately on the operating table in accordance with the planned procedure.
9.5	Prepare the surgical site appropriately for the procedure in accordance with practice protocol.

VTP 06 - Initial Patient Skin Preparation and Instrument Selection

		Achieved	Not achieved
1.	Presented with short well-manicured fingernails, free from polish/varnish (no false nails), no visible jewellery worn, arms bare below the elbow.		
2.	Positioned patient in suitable recumbency for the skin preparation to be performed.		
3.	Prepared a solution of antimicrobial skin cleanser at the dilution rate provided.		
4.	Carried out hand hygiene using the gel provided (WHO method).		
5.	Personal protective equipment worn to prevent contamination of nurse and patient.		
6.	Performed effective initial skin preparation using a recognised technique.		
7.	Waste materials disposed of into appropriate waste receptacle.		
8.	Eight of the ten named items placed on the trolley in the order listed.		