21.6 Appendix F — Distributive Model: Off-site Inspection Guide

OFF-SITE CLINICAL FACILITIES

Site: ____________________________________________________________

<table>
<thead>
<tr>
<th>Third year site</th>
<th>Fourth year site</th>
<th>Third AND Fourth year site</th>
</tr>
</thead>
</table>

Names of clinical personnel:

<table>
<thead>
<tr>
<th>Position</th>
<th>Position</th>
<th>Position</th>
</tr>
</thead>
</table>

Relationship of practicum rotation coordinator and site (practice or facility)?

**Standard 3**

21.3.3a Adequacy of Safety Measures:

Posted protocols/warning signs:

1) isolation facilities
   - YES____  NO____  NA _____

2) radiology/radioactivity
   - YES____  NO____  NA _____

3) first aid/evacuation/other emergencies
   - YES____  NO____  NA _____

4) hydraulic chutes
   - YES____  NO____  NA _____

Describe safety measures at this facility. Who is responsible for safety inspections?

Any unsafe conditions? Note specific area and deficiency:

Safety of facilities for housing animals (fencing, corrals, caging, runs, etc.)?

Safety equipment is in place for radiographic procedures?

<table>
<thead>
<tr>
<th>1) Lead barriers</th>
<th>YES</th>
<th>NO</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>2) Aprons</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>3) Gloves</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>4) Eyewear</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
<tr>
<td>5) Dosimetry Badges</td>
<td>YES</td>
<td>NO</td>
<td>NA</td>
</tr>
</tbody>
</table>

21.3.3b – h: Adequacy of instructional environment and equipment

Waiting rooms/client areas

| NA | OK | Concerns |

Examination rooms

| NA | OK | Concerns |
Treatment areas  NA  OK  Concerns

Laboratory – clinical pathology/diagnostics  NA  OK  Concerns

Kennels/Animal Housing  NA  OK  Concerns

Surgery and anesthesia  NA  OK  Concerns

Gas cylinders secured  NA  OK  Concerns

Intensive/critical care  NA  OK  Concerns

Necropsy  NA  OK  Concerns

Pharmacy  NA  OK  Concerns

Controlled substances:
   Access? In clinic and ambulatory?

   Records?

Expired/out-dated drugs?
   Comment:
   Safety of chemo drugs? Hood?, personal safety gear?, waste?

Offices/Student break area  NA  OK  Concerns

Computers and internet access  OK  Concerns

Overall building infrastructure  OK  Concerns

Other  OK  Concerns

Isolation  NA  OK  Concerns

21.3.4  Students instructed in use of facility?  (orientation)

   How?
When?
By whom?

Standards 4, 6, 9 and 11
21.4.4  Monitoring and supervision

Third year sites and fourth year sites – questions for preceptors

How were you trained/ oriented to the responsibilities of being a distant veterinary teaching facility coordinator, and by whom? Discuss your responsibilities for student evaluations.

With whom do you communicate in regard to students and goals and expectations for students rotating through your clinic/ facility? How often?

Discuss your responsibilities regarding clinical competencies of students. How are these used to improve student learning at your facility?

How often, during a rotation, does someone from the school/college come to visit your clinic?

Who usually makes these visits?

What do they do while they’re here, i.e., nature of the visit?
follow-up?
do you keep record of these visits and/or correspondences?

Who is responsible for day-to-day supervision and monitoring of students in your practice?

Who is responsible for completing the on-line evaluations of students in your practice? (21.6.4)

Does this person also discuss this evaluation or otherwise give feedback to the students?
Please describe nature and frequency of evaluation and feedback.

Do you use the feedback forms/internet programs that are available from the school/ college?

Do you feel that the assessment system provided allows you to assess the students in an adequate manner?

YES            NO

Fourth year sites – additional questions for preceptors

How often does someone from the school/college inspect or examine your practice/ facilities and update information related to their criterion and requirements for your participation as a CORE fourth year site?
Describe the types of rounds you have with the students? How often do these occur?

### 21.4.5: Student involvement and responsibilities

When students are rotating through this practice/site, how are they involved in healthcare management? Do they:

- **meet with clients?**
  - YES
  - NO
  - NA

- **discuss costs/ billing with clients?**
  - YES
  - NO
  - NA

- **admit patients?**
  - YES
  - NO
  - NA

- **discharge patients?**
  - YES
  - NO
  - NA

- **take medical history?**
  - YES
  - NO
  - NA

- **examine patients?**
  - YES
  - NO
  - NA

- **make entries in medical records?**
  - YES
  - NO
  - NA

- **participate in diagnoses?**
  - YES
  - NO
  - NA

- **take cytology sample?**
  - YES
  - NO
  - NA

- **treat patients?**
  - YES
  - NO
  - NA

- **participate in surgeries?**
  - YES
  - NO
  - NA
  
  **if yes, describe nature of participation**

- **administer and/or monitor anesthesia?**
  - YES
  - NO
  - NA

- **participate in emergency treatments?**
  - YES
  - NO
  - NA

- **participate in critical care?**
  - YES
  - NO
  - NA

- **participate in imaging**
  - YES
  - NO
  - NA

- **radiography?**
  - YES
  - NO
  - NA

- **positioning/ taking radiographs?**
  - YES
  - NO
  - NA
interpretation? YES NO NA
ultrasound? YES NO NA
imaging process? YES NO NA
interpretation? YES NO NA
other? YES NO NA
conduct necropsy examinations? YES NO NA
other? YES NO NA

How did the students learn about the facility? Describe how arrangement for transportation and housing were made at the DVTH?

How do the students evaluate the site and their experiences there?

How are students instructed in bio-safety at the sites?

*If possible verify these with students on site. If not then do so during student interview session including their thoughts regarding pros and cons of site.*

21.4.7: Medical records
What type of medical records do you maintain? electronic paper both

Do students have access to the records? YES NO NA

Are records “readily retrievable?” YES NO NA

(Team should, if possible, examine a few representative records to validate what has been stated)

Other comments regarding records?

**Standard 5**
21.5.1, 21.5.3

To what type of learning and information resources do students have access at your practice?

Textbooks YES NO
<table>
<thead>
<tr>
<th>Journals</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>Hardcopy</td>
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<tr>
<td>Electronic</td>
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<tr>
<td>Electronic data bases</td>
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<tr>
<td>Other internet resources</td>
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<tr>
<td>Other?</td>
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<tr>
<td>Describe</td>
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</table>

**Other:**

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Date: ___________________  Site team members: ___________________

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