



## POOL HOUSE EQUINE CLINIC: INTERNSHIP PROGRAMME

### DAILY PLANNING

TIME	PROCEDURES	RECORDINGS
Before morning rounds (with nursing assistance)	Full subjective and objective assessment made of all inpatients including TPR of all inpatients and intensive care and colic checks where indicated.	Intensive care and colic check findings recorded on intensive care sheets.  Subjective and objective observations including attitude, appetite, faecal and urinary output and case specific notes on other inpatients recorded.
	Sample and run blood	Record in consumables + on ICU monitoring sheet
8.00 – 8.45	Morning rounds with all clinicians- feed back on previous days findings, status overnight, assess progress where indicated i.e. walk out orthopaedic cases	Notes on procedures planned for the day recorded
8.45 – 9.00	Drugs administered	All drugs given recorded in the patient file
8.45 – 10.45	Hospital in-patients- including bandage changes, synoviocentesis, repeat rectal examinations etc	Record all findings in the hospital notes and ensure all consumables and procedures are costed
10.45 - 11.30	Communication with client on the telephone to deliver progress report	Communications recorded on communication sheet.
	Communication with referring vets where appropriate	Ensure it is noted when RVS to be updated next
10.30 - 13.00	All in-patients are monitored throughout the day by the team.	All findings recorded
	Critical patients are also monitored on CCTV displayed in the vet's office.  Checks carried out as necessary.	
13.00 - 13.30	Colic checks and intensive care where indicated	Findings recorded on intensive care sheet.
16.00 - 17.00 (with nursing assistance)	Full subjective and objective assessment made of all in patients including TPR of all in patients and intensive care and colic checks where indicated.	All findings recorded
	Sample and run blood if necessary	Record in consumables + on ICU monitoring sheet
	Administer parental drugs	All administered drugs recorded as consumables



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TIME	PROCEDURES	RECORDINGS
17.00 - 17.30	Evening rounds with supervising clinician (as deemed appropriate).  Feedback on day's findings. Discuss protocol for overnight checks. The clinician determines the frequency of checks necessary through the night <b>beyond the minimum required of midnight and 6am checks.</b>	
23.00 – 24.00	Full subjective assessment made of all inpatients.  Colic checks and intensive care where indicated.  Administration of drugs.	All findings recorded.  All drugs administered recorded.