Small Animal Internal Medicine Case Log Example

**Case log #1**  
Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Shih Tzu  
Age: 5y  
Sex: M/N  
Wt.: 5.7 kg.  
Diagnosis: Immune Mediated Polyarthritis  
Advanced Skills & Procedures I performed: Aseptic placement of 22g over-the-needle intravenous catheter in the right cephalic vein. Sedated with butorphanol 0.1mg/kg & diazepam 0.1mg/kg IV. Clipped hair over stifle joint, aseptic preparation of skin. Made slides of effusion, saved remainder in LTT. Packaged and submitted for cytology.  
Advanced Skills & Procedures I assisted with: Joint taps  
Outcome: Discharged on prednisone. Recheck to be determined pending lab results.

**Case log #2**  
Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Feline/DSH  
Age: 9y  
Sex: M/N  
Wt.: 6.8 kg.  
Diagnosis: Hepatic lipidosis  
Advanced Skills & Procedures I performed: Aseptic placement of 22g over-the-needle intravenous catheter in cephalic vein. Clipped hair from abdomen, provided restraint for abdominal ultrasound. Performed PT clotting test. Restraint for aseptic fine needle aspirates of liver. Prepared and submitted liver slides for cytology. Set up for placement of esophagostomy tube. Induction of general anesthesia with propofol 4mg/kg IV over 1 minute, intubation w/a prelubricated 4.5mm endotracheal tube, maintenance on 2% isoflurane & oxygen at 1.5L/min via non-rebreathing system. Prepared and administered PPN.  
Advanced Skills & Procedures I assisted with: Abdominal ultrasound and FNA of liver. Placement of esophagostomy tube.  
Outcome: Discharged with esophagostomy tube in place. Demonstrated care and appropriate feeding procedures to owner.

**Case log #3**  
Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Irish Terrier  
Age: 6.5y  
Sex: F/S  
Wt.: 13.6 kg.  
Diagnosis: Non-regenerative anemia  
Advanced Skills & Procedures I performed: Drew blood from the jugular vein for Coombs test, Snap 4DX, anemia real PCR, Bartonella PCR, crossmatch performed in-house, performed transfusion with pRBC. Set up for bone marrow aspiration. Administered dexmedetomidine .013 mg/kg (0.17 mg) IV and butorphanol 0.026 mg/kg (0.35 mg IV). Stained and evaluated slide prior to submission to laboratory. Prepared and submitted cytology for evaluation  
Advanced Skills & Procedures I assisted with: Bone marrow aspiration  
Outcome: Discharged after lengthy hospitalization on various immunosuppressive drugs, stomach protectants, a liver protectant and probiotics.
**Case log #4**

Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Wheaton Terrier  
Age: 8y  
Sex: F/S  
Wt.: 10 kg.  
Diagnosis: PLE with underlying vasculopathy  
Advanced Skills & Procedures I performed: Albumin transfusion. 10%  
Calcium gluconate CRI with EKG monitoring during CRI. Set up endoscopic equipment.  
Implemented anesthesia plan of propofol at 4-6 mg/kg given to effect; 40 mg IV and diazepam 0.2-0.5 mg/kg; 3.5 mg IV. Monitored during procedure. Prepared and submitted biopsies for evaluation.  
Advanced Skills & Procedures I assisted with: Gastroduodenoscopy  
Outcome: Discharged on calcium supplementation with calcium carbonate, low dose aspirin to prevent blood clots, prednisone anti-inflammatory medication, and the antacid, famotidine with instruction to feed a low fat diet.

**Case log #5**

Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Wire Hair Fox Terrier  
Age: 14y  
Sex: F/S  
Wt.: 7.8 kg.  
Diagnosis: open – polydipsia, polyuria & urinary incontinence presenting clinical signs  
Advanced Skills & Procedures I performed: Low Dose Dexamethasone Suppression Test (LDDST), patient was fasted, pulled pre sample, administered dexamethasone 0.01mg/kg IV (0.078mg, 0.03mls), pulled 4 hour post and 8 hour post samples, each sample spun within 30 minutes of draw and submitted to laboratory; indirect blood pressure  
Advanced Skills & Procedures I assisted:  
Outcome: LDDST was not consistent with hyperadrenocorticism. Pre 4.2ug/dl (1.0-6.0ug/dl) 4 hour 0.5ug/dl (<1ug/dl), 8hour 0.3ug/dl (<1ug/dl). Indirect arterial blood pressure 125mm Hg. Started patient on phenylpropanolamine 1.6mg/kg, gave 12.5mg PO BID. Urinary incontinence resolved. Renal values remained normal.

**Case log #6**

Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Labrador Mix  
Age: 14y  
Sex: F/S  
Wt.: 38.2 kg.  
Diagnosis: open – Azotemia, bronchitis, broncial wall collapse  
Advanced Skills & Procedures I performed: Pre anesthetic exam, proposed anesthetic plan for bronchoscopy. Butorphanol 0.2mg/kg (11.4mg, 1ml) IV, lidocaine 2mg/kg (76.4mg, 3.8mls) IV, midazolam 0.2mg/kg (11.2mg, 2.2mls) IV and propofol 4mg/kg (152mg) titrated through out procedure. Set up endoscopy equipment and Cidex cold sterilization for bronchoscopy. Monitored ECG, pulse oximetry, indirect blood pressure and capnography during procedure, recovered patient on flow by oxygen, reversed midazolam with flumazenil 0.01mg/kg (0.38mg, 3.8mls) IV, submitted bronchoalveolar lavage (BAL) for culture and cytology submission.  
Advanced Skills & Procedures I assisted: Collection of BAL  
Outcome: Started on theophylline 2.6mg/kg. Gave 100mg PO BID, amoxicillin clavulanate 13mg/kg gave 500 mg PO BID. Culture showed Enterobacter cloacae, switched to trimethoprim sulfa 12.5mg/kg 480mg PO BID. No improvement over the month. Owner humanely euthanized.
**Case log #7**

Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Beagle  
Age: 10y  
Sex: FS  
Wt.: 14kg.  
Diagnosis: Acute Pancreatitis, Septic Abdomen, Hypotension, Hypoglycemia, Acidemia, Abdominal Pain.  
Advanced Skills & Procedures I performed: Physical Exam (T 103.1, HR 180, rest WNL), Body Score (5-obese), NIBP (70mmHg, Doppler), Pain Assessment (III/IV), IV catheter placement & venipuncture (CBC, chemistries, PLI), Clotting Tests (PT, aPTT), Calculation/Administration: IV fluids - Crystalloids: (LRS @120ml/kg/day), Colloids: (therapeutic boluses of HES @ 30mls/kg/day), Dextrose CRI (2.5), Medication administration (Dolasetron (0.6mg/kg), Enrofloxacin (8mg/kg), Metronidazole (8mg/kg), Vitamin K (2.2mg/kg); Recumbent Patient Nursing (Positioning, PROM, Pain Assessment, Frequent Vitals, Hygiene), Microscopy (Abdominal Effusion)  
Advanced Skills & Procedures I assisted with: Analgesic Calculation/Administration (Fentanyl CRI: 4mcg/kg/hr), Set up/Assist (Abdominal Ultrasound), FNA (Abdominal Effusion).  
Outcome: Euthanized due to financial constraints 22 hours after presentation.

**Case log #8**

Date: 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Wire Fox Terrier  
Age: 14y  
Sex: F/S  
Wt.: 7.8 kg  
Diagnosis: Open – polydipsia, polyuria, urinary incontinence  
Advanced Skills & Procedures I performed: Low Dose Dexamethasone Suppression Test (LDDST) - patient was fasted, pulled pre sample, administered dexamethasone 0.01mg/kg IV(0.078mg,0.03mls), pulled 4 hour post and 8 hour post samples, spun within 30 minutes of draw and submitted to laboratory; indirect blood pressure using Doppler  
Advanced Skills & Procedures I assisted with:  
Outcome: LDDST was not consistent with hyperadrenocorticism. Pre 4.2ug/dl (1.0-6.0ug/dl), 4 hour 0.5ug/dl (<1ug/dl), 8 hour 0.3ug/dl (<1ug/dl). Indirect arterial blood pressure 125mm Hg. Started patient on phenylpropanolamine 1.6mg/kg, gave 12.5mg PO BID. Urinary incontinence resolved. Renal values remained normal.

**Case log #9**

Date 00/00/0000  
Patient ID: XXX  
Species/Breed: Canine/Labrador mix  
Age: 14y  
Sex: F/S  
wt.: 38.2 kg  
Diagnosis: Azotemia, Bronchitis & bronchial wall collapse  
Advanced Skills & Procedures I performed: Pre anesthetic exam, proposed anesthetic plan for bronchoscopy. Butorphanol 0.2mg/kg (11.4mg,1ml) IV, lidocaine 2mg/kg (76.4mg, 3.8mls) IV, midazolam 0.2mg/kg (11.rmg, 2.2mls) IV and propofol 4mg/kg (152mg, 1mls) titrated through procedure, set up equipment and Cidex cold sterilized for bronchoscopy, monitored ECG, pulse oximetry, indirect blood pressure and capnography during procedure, recovered patient on flow by oxygen, reversed midazolam with flumazenil 0.01mg/kg (0.38mg, 3.8mls) IV, submitted bronchoalveolar lavage (BAL) for culture and cytology submission.  
Advanced Skills & Procedures I assisted: Collection of BAL
Outcome: Started on theophylline 2.6mg/kg. Gave 100mg PO BID, amoxicillin clavulanate 13mg/kg gave 500 mg PO BID. Culture showed enterobacter