

# Case Log Instructions for the CSAVP and CASVM

## Soft Tissue Surgery



### Case log explanations and instructions:

The case log for the **ESAVS Certificate / Soft Tissue Surgery** shall contain at least 100 cases mostly compiled in the second half of the program.

### The following cases categories are mandatory:

1. GI: At least 10 cases of Gastro-intestinal surgery, including gastric and intestinal surgery (maximum one case of intestinal biopsies)
2. UT: At least 10 cases of Urinary tract surgery, including urinary tract stones, incontinence, pexies.
3. RS: At least 10 cases of reconstructive surgery cases, including various skin flaps after proper removal of tumors or wound treatment
4. AI: At least 10 cases of airways and/or thoracic surgery cases, including various upper airways diseases (Brachycephalic, laryngeal paralysis), Intra-thoracic surgery cases are not mandatory.  
**If the candidate cannot provide these 10 cases as a primary surgeon, at least 6 of those shall still be made as a primary surgeon. For each missing case as a primary surgeon, at least 2 cases of the same category shall be done as an assistant surgeon. Identity and location of the primary surgeon shall be given.**
5. CR: At least 10 cases of Colo-rectal and hernias cases, including various hernias repair (perineal, inguinal) and colo-rectal tumors, anal and perianal diseases
6. HN: At least 10 cases of head and neck surgery (eye, salivary glands, nose, tumors, etc...) including a minimum of 4 cases of ear surgery for otitis externa, media, ear polyps etc.
7. Va: Various – Must be soft tissue or emergency cases. Pure orthopedic or neurosurgery cases will not be considered.

For each category, there shall not be more than 40% of similar cases. For instance, not more than 4 cases of Brachycephalic surgery in the AI group.

The case log will be rejected whenever more than 50% of the cases will be similar in one category. For instance, more than 50% of Brachycephalic surgery cases in the airway and thoracic category or more than 50% anal sac removal in Colo-rectal surgery.

Further, a case log may not be acceptable and may be rejected in its entirety if critical concerns regarding one or more categories result in a fail, regardless of whether all other required criteria are adequately met.

**For each case, the following information is mandatory (information is provided as an example)**

1. **Date:** 11 January 2017
2. **Name or file number:** Kiki XX, File 23112015
3. **Species, breed, age :** Dog, Labrador, 6 Y
4. **Major complain/ Problem :** Abdominal pain and vomiting
5. **Examinations (Blood work, Diagnostic imaging, Laboratory, ...):** CBC and Profile, Abdominal XR, Abdominal Ultra-sound
6. **Final diagnosis:** intestinal foreign body
7. **Surgical procedure:** Intestinal resection und anastomosis- Single layer closure with 3/0 monofilament Biosyn in a continuous pattern. Eso- phagostomy tube.
8. **Complications/Results:** Massive hypoalbuminemia corrected over 4 days of intensive care. Went home 7 days after surgery
9. **Follow-up :** 1. **Control at suture removal: Mention any wound issues and/or concern about potential complications of the surgery**  
2. **Further controls: Phone interview, Veterinary report or other consultation**
10. **Your comment:** Hypoalbuminemia was the most difficult aspect to control. Both human albumin and plasma transfusions were necessary
11. **Code:** GI

**The case log needs to be compiled as an Excel file using the template in the appendix.**

Cases need to be summarized according to category at the beginning of the case log table (for example: GI = 11 cases, UT = 15 cases etc.)

Abbreviations may be used but must also be explained at the beginning of the case log table. List the cases in chronological order.