



OFFICE USE ONLY

# \_\_\_\_\_



**4-H CVA LEVEL I EXAM APPLICATION**

PLEASE PRINT

**APPLICANT'S INFORMATION**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone:(\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

**4-H SUPERVISOR'S INFORMATION**

By affixing my signature below, I certify that the student named above has met the 1-3 years classroom requirements.

Supervisor Title: (Check One):     4-H Leader     County Extension Agent

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

4-H Group Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code: \_\_\_\_\_

Clinic Phone:(\_\_\_\_\_) \_\_\_\_\_ Fax:(\_\_\_\_\_) \_\_\_\_\_

**PERIOD OF OBSERVATION:** From Date: \_\_\_\_\_ To Date: \_\_\_\_\_

4-H Supervisor's Signature: \_\_\_\_\_

*By affixing my signature above, I certify that the applicant named above has worked under my supervision for at least 90 days and has demonstrated competency in the behaviors and skills checked herein, and I recommend that this applicant be considered for certification at Veterinary Assistant Level I.*

**PAYMENT INFORMATION**

*The exam fee is \$125/per student. A check can be mailed or payment by credit card can be mailed or faxed to: TVMA • 8104 Exchange Drive • Austin, Texas 78754 • 512/452-4224 • Fax: 512/452-6633. Results will be mailed to the 4-H Leader at the above address after scoring is complete.*

(Check One):     Visa     MasterCard     American Express

Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVC: \_\_\_\_\_

Name on card: \_\_\_\_\_ Signature: \_\_\_\_\_



4-H CVA LEVEL I

# CLINICAL HANDS-ON TRAINING VALIDATION

(MUST BE SUPERVISED & CHECKED OFF BY DVM OR TX LVT ONLY)

### APPLICANT'S NAME

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

### SKILLS VALIDATION CHECKLIST SUPERVISOR'S INFORMATION

**Supervisor Title:** (Check One):  DVM  Texas LVT  RVT/CVT/LVT\*  
(\*CVT, RVT or LVT supervision allowed out of State)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Clinic Name: \_\_\_\_\_

Clinic Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code: \_\_\_\_\_

Clinic Phone:(\_\_\_\_\_) \_\_\_\_\_ Fax:(\_\_\_\_\_) \_\_\_\_\_

**PERIOD OF OBSERVATION:** From Date: \_\_\_\_\_ To Date: \_\_\_\_\_

**TOTAL HANDS-ON TRAINING HOURS:** \_\_\_\_\_  
(minimum 500 total hours required for CVA certification)

Supervisor's Signature: \_\_\_\_\_

*By affixing my signature above, I certify that the student named above has trained or worked under my supervision for the required hours of HANDS ON TRAINING WITH LIVE ANIMALS (shadowing hours do not count towards certification).*



# 4-H CVA LEVEL I SKILLS VALIDATION CHECKLIST VERIFICATION

(MUST BE SUPERVISED & CHECKED OFF BY DVM OR TX LVT ONLY)

NOTE: All competencies must be either **performed** or **described** by the applicant, even if a certain species is not seen by the practice.

## APPLICANT'S NAME

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

## SKILLS VALIDATION CHECKLIST SUPERVISOR'S INFORMATION

**Supervisor Title:** (Check One):  DVM  Texas LVT  RVT/CVT/LVT\*  
(\*CVT, RVT or LVT supervision allowed out of State)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Clinic Name: \_\_\_\_\_

Clinic Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code: \_\_\_\_\_

Clinic Phone:(\_\_\_\_\_) \_\_\_\_\_ Fax:(\_\_\_\_\_) \_\_\_\_\_

**PERIOD OF OBSERVATION:** From Date: \_\_\_\_\_ To Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

*By affixing my signature below, I certify that the student named above has demonstrated competency in the behaviors and skills checked herein, and I recommend that this student be considered for certification at Veterinary Assistant Level I.*



# 4-H CVA LEVEL I SKILLS VALIDATION CHECKLIST

(MUST BE SUPERVISED & CHECKED OFF BY DVM OR TX LVT ONLY)

NOTE: All competencies must be either **performed** or **described** by the applicant, even if a certain species is not seen by the practice.

Applicant has demonstrated reasonable proficiency or competency in the following work requirements:

Performed	OR	Described	Skill or Competency	Performed	OR	Described	Skill or Competency
<input type="checkbox"/>		<input type="checkbox"/>	Uses common terminology (spoken and written) required in your veterinary practice	<input type="checkbox"/>		<input type="checkbox"/>	Uses (or can describe) the proper method of haltering a large animal
<input type="checkbox"/>		<input type="checkbox"/>	Keeps assigned work areas clean and orderly	<input type="checkbox"/>		<input type="checkbox"/>	Practices (or can describe) the proper personal safety precautions when releasing a large animal
<input type="checkbox"/>		<input type="checkbox"/>	Demonstrates a basic knowledge of sanitary procedures	<input type="checkbox"/>		<input type="checkbox"/>	Properly restrains animals when assisting the veterinarian with cephalic and saphenous venous sampling
<input type="checkbox"/>		<input type="checkbox"/>	Handles animals in a safe, humane manner	<input type="checkbox"/>		<input type="checkbox"/>	Properly muzzles fractious animals
<input type="checkbox"/>		<input type="checkbox"/>	Can name and select the equipment items most commonly used in your veterinary practice	<input type="checkbox"/>		<input type="checkbox"/>	Handles and holds animals so as to generally avoid bites to themselves and to the attending veterinarian
<input type="checkbox"/>		<input type="checkbox"/>	Demonstrates a basic understanding of the most commonly used veterinary drugs	<input type="checkbox"/>		<input type="checkbox"/>	Demonstrates (or describes) the proper method of moving cattle and horses through chutes and into or out of stalls
<input type="checkbox"/>		<input type="checkbox"/>	Recognizes the symptoms commonly associated with animals affected by rabies	<input type="checkbox"/>		<input type="checkbox"/>	Recognizes and avoids potential safety hazards in the examination room or area
<input type="checkbox"/>		<input type="checkbox"/>	Uses procedures that ensure personal safety when handling animals suspected of having rabies	<input type="checkbox"/>		<input type="checkbox"/>	Handles animals in the examination room or area so as to prevent harm to the patient and humans
<input type="checkbox"/>		<input type="checkbox"/>	Demonstrates appropriate understanding and respect for the human-animal bond in dealing with clients and their animals	<input type="checkbox"/>		<input type="checkbox"/>	Carefully observes patients and surroundings and reports observations to the attending veterinarian
<input type="checkbox"/>		<input type="checkbox"/>	Handles and disposes of "sharps" instruments safely and in compliance with practice standards	<input type="checkbox"/>		<input type="checkbox"/>	Aids the veterinarian in the handling and treatment of patients
<input type="checkbox"/>		<input type="checkbox"/>	Uses the proper procedure for lifting and positioning animals	<input type="checkbox"/>		<input type="checkbox"/>	Provides an additional set of eyes and hands for the attending veterinarian
<input type="checkbox"/>		<input type="checkbox"/>	Uses the proper procedure for placing animals in a cage	<input type="checkbox"/>		<input type="checkbox"/>	Handles and uses disposable "sharps" containers in a safe manner
<input type="checkbox"/>		<input type="checkbox"/>	Uses proper method for placing large animals in a stall	<input type="checkbox"/>		<input type="checkbox"/>	Follows OSHA guidelines in collecting and disposing of bio-hazardous materials

**Applicant has demonstrated reasonable proficiency or competency in the following work requirements:**

Performed	OR	Described	Skill or Competency
<input type="checkbox"/>		<input type="checkbox"/>	Demonstrates (or explains) the proper method of collecting fecal samples (including the palpation sleeve) in the large animal
<input type="checkbox"/>		<input type="checkbox"/>	Uses correct quantities of feces for fecal flotations
<input type="checkbox"/>		<input type="checkbox"/>	Recognizes fresh fecal samples
<input type="checkbox"/>		<input type="checkbox"/>	Can explain client options for disposal of euthanized or deceased animals
<input type="checkbox"/>		<input type="checkbox"/>	Discusses individual or communal cremation options with owners of deceased pets
<input type="checkbox"/>		<input type="checkbox"/>	Properly prepares the deceased animal for presentation to the owner
<input type="checkbox"/>		<input type="checkbox"/>	Exhibits proper decorum when presenting a deceased animal to its owner
<input type="checkbox"/>		<input type="checkbox"/>	Correctly collects urine through natural means
<input type="checkbox"/>		<input type="checkbox"/>	Knows proper method for collecting urine samples that are adequate for culturing microorganisms
<input type="checkbox"/>		<input type="checkbox"/>	Collects urine samples during the correct time of day
<input type="checkbox"/>		<input type="checkbox"/>	Correctly uses shielded gowns, gloves, and other protective wear when taking radiographs
<input type="checkbox"/>		<input type="checkbox"/>	Wears a monitoring device while taking radiographs
<input type="checkbox"/>		<input type="checkbox"/>	Handles uses and stores radiographic cassettes and film properly
<input type="checkbox"/>		<input type="checkbox"/>	Bathes and dips patients as instructed
<input type="checkbox"/>		<input type="checkbox"/>	Avoids basic hazards and species susceptibilities to certain bath and dip products when preparing and giving dips and baths

Performed	OR	Described	Skill or Competency
<input type="checkbox"/>		<input type="checkbox"/>	Follows accepted procedures when bathing or dipping patients
<input type="checkbox"/>		<input type="checkbox"/>	Safely cares for animals in runs, cages, stalls and paddocks
<input type="checkbox"/>		<input type="checkbox"/>	Uses the bedding types indicated for specific breeds/species of housed animals
<input type="checkbox"/>		<input type="checkbox"/>	Changes bedding materials in a timely and efficient manner
<input type="checkbox"/>		<input type="checkbox"/>	Disposes of used bedding materials as needed and in a proper manner
<input type="checkbox"/>		<input type="checkbox"/>	Recognizes and avoids safety hazards in the areas where patients are housed
<input type="checkbox"/>		<input type="checkbox"/>	Uses proper sanitary procedures in changing bedding materials
<input type="checkbox"/>		<input type="checkbox"/>	Maintains and repairs cages, kennels and stalls as needed
<input type="checkbox"/>		<input type="checkbox"/>	Properly uses (or describes the proper use of) common devices and equipment to restrain horses, cattle, goats and swine for treatment
<input type="checkbox"/>		<input type="checkbox"/>	Recognizes common breeds and varieties of exotic animals that visit the clinic and calls them by the correct common name
<input type="checkbox"/>		<input type="checkbox"/>	Safely handles and restrains exotic animals for examination and treatment
<input type="checkbox"/>		<input type="checkbox"/>	Autoclaves veterinary instruments using moist pressure autoclave and chemical sterilization
<input type="checkbox"/>		<input type="checkbox"/>	Follows a proscribed procedure for cleaning all stainless steel instruments
<input type="checkbox"/>		<input type="checkbox"/>	Follows correct procedure for ultrasonic cleaning of instruments
<input type="checkbox"/>		<input type="checkbox"/>	Lubricates instruments properly during the cleaning process

**Applicant has demonstrated reasonable proficiency or competency in the following work requirements:**

Performed	OR	Described	Skill or Competency
<input type="checkbox"/>		<input type="checkbox"/>	Maintains all dental equipment in clean and usable condition for performing prophylaxis treatments
<input type="checkbox"/>		<input type="checkbox"/>	Determines that all active scavengers are working properly in evacuating anesthesia gases as needed
<input type="checkbox"/>		<input type="checkbox"/>	Ensures that all sharp and cutting blades are removed and disposed of properly following surgical procedures
<input type="checkbox"/>		<input type="checkbox"/>	Describes (or demonstrates) the proper method for administration of a paste or topical drug on an equine patient
<input type="checkbox"/>		<input type="checkbox"/>	Describes (or demonstrates) the proper method for administration of a bolus, paste or topical drug for a bovine patient
<input type="checkbox"/>		<input type="checkbox"/>	Describes (or demonstrates) the proper method for administration of tablets, capsules, liquid and topical drugs for canine and feline patients
<input type="checkbox"/>		<input type="checkbox"/>	Stores animal feeds according to instructions
<input type="checkbox"/>		<input type="checkbox"/>	Measures food quantities accurately
<input type="checkbox"/>		<input type="checkbox"/>	Reads and follows food label directions correctly
<input type="checkbox"/>		<input type="checkbox"/>	Reads and correctly follows written instructions for animal feeding
<input type="checkbox"/>		<input type="checkbox"/>	Reports animal food and water consumption rates correctly and on schedule

Performed	OR	Described	Skill or Competency
<input type="checkbox"/>		<input type="checkbox"/>	Administers hydrotherapy according to directions
<input type="checkbox"/>		<input type="checkbox"/>	Selects the correct syringe on demand from the veterinarian
<input type="checkbox"/>		<input type="checkbox"/>	Correctly fills syringes with medication as directed
<input type="checkbox"/>		<input type="checkbox"/>	Recognizes intravenous, intramuscular, subcutaneous, and intraperitoneal applications
<input type="checkbox"/>		<input type="checkbox"/>	Selects correctly the needle gauge and length requested by the veterinarian
<input type="checkbox"/>		<input type="checkbox"/>	Properly disposes of syringes, needles and other sharp objects commonly used in the veterinary clinic
<input type="checkbox"/>		<input type="checkbox"/>	Properly identifies and disposes of expired substances
<input type="checkbox"/>		<input type="checkbox"/>	Obtains information relative to animal being boarded and/or discharged
<input type="checkbox"/>		<input type="checkbox"/>	Discusses and explains the charge for boarding costs
<input type="checkbox"/>		<input type="checkbox"/>	Posts and records money collected to the appropriate records as directed
<input type="checkbox"/>		<input type="checkbox"/>	Interacts cheerfully with clients and handles complaints with a smile