

**LESSON PLAN**

The author (left) oversees students in the University of Illinois's Clinical Skills Learning Center.



**MEET THE AUTHOR**

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Alysha obtained her veterinary technician degree from San Juan College in 2014. She started working in emergency medicine at the University of Illinois in 2015 and quickly found her love for teaching. Now she works at the University of Illinois College of Veterinary Medicine in the Clinical Skills Learning Center as a clinical instructor to veterinary students. Alysha enjoys speaking at conferences in central Illinois and lecturing to student organizations. She is currently completing her bachelor's degree with plans to pursue a master's degree in education.

# The Art of Teaching in Higher Education

**V**eterinary medicine has evolved so vastly in recent years that veterinary nurses have many potential career paths available. Between specialties in different areas of medicine, wildlife care, and even managerial roles, it can be hard to determine your best options. One path many people in our field don't realize veterinary nurses can take is teaching and writing curriculum, specifically in a college or university setting. This path greatly utilizes the skills and knowledge that veterinary nurses spend years perfecting and is also very rewarding.



## WHAT IS A CLINICAL SKILLS LEARNING CENTER?

I have had the opportunity to work in many roles in veterinary medicine, such as kennel assistant, receptionist, general practice technician, and assistant manager, but none of these positions fulfilled my desire for “more.” I wanted more of something, but I couldn’t quite place my finger on what.

In 2015, I started working in the emergency room of a veterinary teaching hospital. I thought I was fulfilled by the excitement of the varying cases, but I began receiving compliments on my teaching practices and patience toward the veterinary students. This spurred me to research teaching opportunities for veterinary nurses. Unfortunately, it seemed there were few choices in this regard, especially without an advanced college degree.

Luckily, working in a veterinary teaching hospital provides you with many unique opportunities. In 2016, I was approached by a veterinarian I knew who taught in the University of Illinois School of Veterinary Medicine’s Clinical Skills Learning Center, or CSLC, about assisting her in teaching.

I have now been working as a clinical instructor at CSLC full time since 2018. The CSLC is a facility where students learn and practice fundamental technical skills using mannequins, models, and simulators. It is staffed by experienced veterinary professionals and is open 24 hours every day to allow students to practice and perfect skills.

The CSLC holds core rotations, primarily for first- and second-year veterinary students. These rotations range from topics such as surgical skills, physical exam, and anatomy, as well as client communication. Toward the end of the school year, students are tested on the clinical skills that they have learned in what we call the OSCE, or an objective, structured clinical examination. Students must pass this exam in order to proceed to the next year of veterinary school.

The CSLC also holds special events to educate those both in and out of the veterinary community, including wet-labs with cadavers, 4-H events, and tours for high school students. In 2018, we held an emergency training event for human first responders. More than 40 K9 unit police officers were given training on various emergency procedures that could be applied to their canine

partners in the field if necessary. The topics included cardiopulmonary resuscitation, bandaging, and naloxone administration for opioid overdose reversal.

## DO YOU HAVE WHAT IT TAKES TO BE A GREAT TEACHER?

A successful instructor requires a particular set of skills and passion for the subject matter, but they also need to be patient, understanding, and encouraging.

**Be patient.** Students often struggle to grasp new material or skills immediately and do not comprehend all of the information given to them the first time. A large part of being an instructor is repetition, so it is important to be patient with young pupils or they will quickly become frustrated and lose confidence. A compassionate instructor is encouraging as he or she walks the student through the task or repeats the information again.

**Be understanding.** Great teachers understand that instruction should be tailored to meet each student’s style of learning and needs.

**Be encouraging.** If I see a student do something incorrectly, I give them the opportunity to notice their mistake. Then I compliment what they did appropriately instead of focusing only on the negative. It’s crucial to build trusting relationships with students in order to create a safe, positive, and productive learning environment. Positivity builds a student’s confidence, which usually results in success.

## THE “WRITE” STUFF: CREATING CURRICULUM

The responsibilities of a veterinary nurse instructor don’t stop at teaching. We should also contribute to what we teach our students. The curriculum of a veterinary medicine program is extensive and thorough in order to prepare our students to practice medicine. One thing that I have noticed, however, is that some clinical skills are often overlooked.

In writing about what his veterinary education lacked, Andy Rollo, DVM, said he was unprepared for simple tasks—such as anal gland expression, mass removals, and even ear cleanings/infections—once he started working in general practice: “Maybe the experts [who taught many important procedures] didn’t cover so much of the mundane, everyday problems you’ll see.”<sup>1</sup>

This is why veterinary nurses are so vital in deciding what is taught to future veterinarians. It is encouraging that centers like the CSLC are becoming popular additions to doctor of veterinary medicine programs, and it is imperative that veterinary nurses and these programs teach the basic skills and expand upon them.

After I became familiar with the curriculum of the CSLC, I combined my emergency medicine and general practice experience to determine which skills were being overlooked, in order to successfully prepare our students. I kept a list in my notebook of these skills and ideas of how they could be incorporated into the curriculum. I considered how we could integrate these skills with the models and supplies that we already had, and then researched other resources that were available.

Writing curriculum was not in my job description. I took the initiative because I wanted the best for my students and, ultimately, the patients. I was seeking to prepare my students for their clinical year of school and to practice good medicine afterwards. When my ideas began to take shape, I approached my supervisor. I had low expectations of these ideas being utilized since I had never done anything like this before; however, my supervisor was engaged and supportive.

We discussed the practicality of these new skills being implemented in the curriculum. We discarded several procedures as being unrealistic with over 150 students rotating through the program. For example, the CSLC has one canine female urinary catheter model; therefore, it would be impractical to teach all of the students on the one model—more would have to be purchased.

Nonetheless, other ideas were workable and simply needed to be tested to see if they could fit into a rotation that was already packed with valuable information. After multiple trials, my favorite addition is a wound care wet-lab. During this lab, students are presented with a contaminated open wound and puncture wound on a cadaver leg. My colleague and I make the wounds and contaminate them with a mixture of marshmallow ice cream topping, gravel, fur, and red colored water. We give the appearance of necrotic tissue by cauterizing an edge of the wound with our electric dehorner.

The students proceed to clean, lavage, and debride the wounds, then dress them with a tie-over bandage and “poor man’s drain,” which is a drain made with a



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butterfly catheter and a Vacutainer tube. They get to dabble in wound care while practicing suturing, as well as seeing firsthand how effective a tie-over bandage and closed suction drain can be.

Skills such as these are briefly discussed in the curriculum, but the hands-on practice is invaluable to students once they graduate and venture into practice. It will help prepare them for being well-rounded veterinarians.

## BE PASSIONATE AND MAKE A DIFFERENCE

This higher-education path has been incredibly rewarding for me. My inspiration to keep teaching and thinking of new concepts to incorporate into the curriculum lies within my students. When my students return to tell me that they have successfully performed CPR on a patient or placed an IV catheter for the first time, I know that I have chosen the right path.

My students have ignited my passion further, too. I am close to finishing my bachelor’s degree, with plans to pursue a master’s in education. I not only want to keep instructing but also want to become a veterinary education coordinator in a clinical skills laboratory.

As veterinary nurses, we can teach those just getting started in veterinary medicine and those who have had a few years of practice and experience. We can impart our knowledge of “real world” clinical skills and techniques, which will better prepare our students to be successful veterinary professionals—and excellent caregivers to their patients. **TVN**

## Reference

1. Rollo A. New associates: What you might not know when you graduate vet school. [veterinarymedicine.dvm360.com/new-associates-what-you-might-not-know-when-you-graduate-vet-school](http://veterinarymedicine.dvm360.com/new-associates-what-you-might-not-know-when-you-graduate-vet-school). Accessed July 15, 2019.