

Guidance on the Professional Development Phase



RCVS SETTING VETERINARY STANDARDS

Section 1: Guidance on the Professional Development Phase

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About this document

This document provides information to veterinary graduates and employers about the Professional Development Phase (PDP), which exists to help support new and recent graduates as they begin their careers in clinical practice¹. It is compulsory for all those working in clinical practice who have graduated since 2007. The PDP aims to help graduates develop their Day-one Competences, the set of skills with which they leave veterinary school, into the RCVS PDP Competences.

The first section of the document contains information about the PDP and its requirements for new and recent graduates. A list of the PDP Competences is to be found in section two. Section three comprises the clinical procedures checklists that graduates fill out in their Professional Development Record (PDR).

What is the Professional Development Phase?

The PDP is a process of self-assessment that aims to instil a conscious and conscientious approach to professional learning. It provides a structure for new and recent graduates, including overseas graduates (and for others returning to practice after a break), to reflect on their progress in developing their confidence and competence across a number of clinical areas, measured against the general PDP Competences.

The PDP provides a logical link between undergraduate and postgraduate development. The veterinary degree equips graduates with the essential Day-one Competences needed for safe practice immediately on graduation, but these are only a starting point. Professional competence needs to be further developed in a structured manner during the first year or so in clinical practice, until a recently qualified vet can perform confidently as a fully-effective professional in the workplace. The PDP is the first step in a recent graduate's continuing professional development (CPD).

To complete the PDP, new and recent graduates must keep a brief, accurate and honest record of their clinical cases against a list of clinical skills and procedures, and must reflect on how they are progressing in meeting the PDP Competences. They should use the PDP component of the PDP to record their progress in achieving the PDP Competences. The CPD component of the PDR can also be used alongside the PDP to record participation in other CPD activities, such as attendance on courses.

¹For the purpose of the PDP, 'clinical practice' means offering clinical services direct to the public or to other veterinary surgeons. For reference, see definition in the RCVS Code of Professional Conduct at paragraph 3.2

Who needs to undertake the PDP?

All newly-qualified graduates and those with less than one year's clinical experience are required to complete the PDP, regardless of where they qualified in the UK or overseas. Anyone who is returning to work after a career-break is also encouraged to participate in the PDP until they feel they have adequately refreshed their skills.

How do I sign up for the PDP?

The PDR (PDR) is a lifelong learning record, made up of the Student Experience Log (SEL), Professional Development Phase (PDP) and Continuing Professional Development (CPD) components.

If you have been using the SEL at university, you will need to email pdp@rcvs.org.uk with your details. Once your PDP account is activated you can use the same log in details for the PDR (PDP and CPD) as the SEL.

If you have not been using the SEL at university, to register for the PDP component, you will first need to register for the PDR. If you follow this link www.rcvs-pdr.org.uk, click on the tab 'register for PDR', enter the required details then follow the onscreen instructions.

Once this is done, you will need to apply to be activated. Please do this by sending an email to pdp@rcvs.org.uk stating:

- your full name,
- RCVS reference number,
- where and when you graduated,
- · an address for correspondence about your PDP,
- the name and address of your workplace/practice, and
- the name and email address of the person who will be supporting you through your PDP.

Once you have been accepted for the PDP, you will be allocated to a Postgraduate Dean and your PDP account will be activated by the RCVS. You will receive an email from the system confirming this.

Status of the PDP

The RCVS Code of Professional Conduct requires new and recent graduates to comply with RCVS's PDP and CPD requirements. All practising veterinary surgeons are required to continue their professional development and maintain their competence in the area in

which they are working. They must keep records of their development and provide these to the RCVS when required. The RCVS considers the PDP to be the most appropriate form of continuing professional development for the initial period of clinical practice.

The Code also requires all veterinary surgeons to ensure that clinical governance forms part of their professional activities.

In order to undertake the PDP effectively, the graduate must engage in a process of reflection, analysis and improvement in their professional practice. This is echoed in the guidance on clinical governance that accompanies the Code of Professional Conduct. This goes on to state that:

"Clinical governance may include:

- keeping up to date with continuing professional development (CPD) and new developments relevant to the area of work;
- reflecting upon performance, preferably in the form of a learning diary, and making appropriate changes to practice;
- reflecting upon any unexpected critical events and learning from the outcome and
- making appropriate changes to practice;
- critically analysing the evidence base for procedures used and making appropriate changes to practice;
- reflecting upon communication with other members of the work team and making appropriate changes to practice;
- reflecting upon communication with clients and making appropriate changes to practice; and,
- assessing professional competence in consultation with more experienced or better qualified colleagues and limiting your practice appropriately."

All new graduate members of the RCVS and those with less than one year's experience who are working in clinical practice in the UK should therefore take part in and complete their PDP. Those who are not working in clinical practice in the UK (see definition in footnote on page 4), but who are still on the register as UK practising members (eg those undertaking full-time

research), are advised to follow a similar approach where appropriate, and to keep records of their professional development instead in the CPD component of the PDR. UK graduates who are working in clinical practice outside the UK may undertake the PDP if they wish, and if their employer is supportive.

Undertaking the PDP does not affect membership status. Graduates undertaking their PDP are legally qualified to practise as veterinary surgeons as they are full members of RCVS. It is, however, an acknowledgement of their relative inexperience and their need for support from more senior colleagues.

Anyone who has graduated since 2007 must complete their PDP if they want to enrol at a later stage on the RCVS Certificate and some other postgraduate certificate programmes. Having undertaken sufficient appropriate CPD has always been a requirement before entering for RCVS examinations, and completing the PDP helps to confirm that a Certificate candidate has had a broad grounding in clinical practice before they embark on a further qualification.

Overseas graduates and the PDP

Overseas graduates may be required to complete the PDP depending on how much experience they have in clinical practice before they register with the RCVS.

- A newly-qualified graduate from an overseas university will need to complete the PDP in exactly the same way as a UK graduate.
- Those with less than one year's clinical experience are also required to undertake and complete the PDP.
- Overseas graduates who register with the RCVS with between one and three years' clinical experience will be asked to review their experience against the RCVS PDP Competences list and confirm that they have achieved these competences. If they are unable to confirm this, then they will be advised to undertake the PDP in order to ensure that any gaps in their experience are filled.

The Professional Development Record and the PDP

The PDP is run through a password-protected web-based recording system, the Professional Development Record (PDR), in which graduates keep a tally of their cases and notes under various clinical headings relating to either small animal, equine or farm animal practice (or

a combination of the three). They must keep brief notes on their experience and on their general performance under each skill area, and may write up longer case reports and link

these to the list of skills and procedures as evidence of their experience.

They are asked to rate their confidence against a number of headings, based on a fourpoint scale, ranging from 'not confident' to 'totally confident'. When they have logged experience against each area and have rated themselves as confident overall, they can apply to complete their PDP. An application for 'completion' must be filled in by the graduate and countersigned by a more senior veterinary colleague who is familiar with their work. The RCVS-appointed Postgraduate Dean will check the graduate's PDP records online to check that there is sufficient evidence of experience across the clinical areas to warrant sign-off and completion. Those who have completed the PDP are issued with a certificate of completion by the RCVS.

Graduates can also keep a log of any additional CPD activities they undertake, and their general development plans, under the CPD component of the PDR.

It is the responsibility of graduates to register with the RCVS to use the PDR for recording their PDP. They are given instructions on how to do this when they graduate and first register as members of the RCVS.

Guidance on CPD and instructions for registering to use the CPD component can be found on the RCVS website at www.rcvs.org.uk/cpd.

Other people's access to the PDP recording system

Information on who has access to PDP records is included under 'Terms and Conditions of use of the Professional Development Record'. It is up to the graduate to decide whether they want to give their employer access to their online record. There is no compulsion to do so, as some may feel inhibited from recording their personal notes and reflections in their PDP record if they think their employer has unrestricted access. However, they can email a link to any page of their PDP or CPD record to anyone else of their choosing. This email link provides third-party access to a non-editable 'snap shot' page of the record, so could be useful when preparing for an appraisal meeting or other performance review.

The Professional Development Phase (PDP) Competences

The PDP is based around a set of general PDP Competences that a veterinary surgeon should normally have acquired after about a year in practice. These are supplemented by the list of clinical skills and procedures covering small animal, equine, and farm animal practice, which the RCVS developed in consultation with the profession, and against which the graduate records their day-to-day experience in clinical practice.

The PDP Competences cover the same general areas as the Day-one Competences, which set the minimum standard for graduation, but with the expectation that at the end of their PDP "a graduate who has completed the PDP will be able to perform a range of common clinical

procedures, or manage them successfully without supervision". This is the standard that the graduate is asked to apply when making a judgement about their competence. They must consider not only their clinical skills, but also their general professional skills and attributes, which are set out in the general PDP Competences.

The employer's role in the PDP

Graduates or members returning to work after a career break must be supported and assisted by senior colleagues until they are confident of their own ability to provide a full professional service. The RCVS strongly recommends that employers support their continued development through an appropriate appraisal system, to enable them to complete the PDP.

The PDP is more effective if the new or recent graduate can discuss their performance and development with a senior colleague or more experienced peer who will act as their mentor. The mentor should be familiar with their work, and should be the graduate's first point of contact if they experience a problem and need to seek advice about their work.

It will help if the employer allows the graduate some time each week to update their PDP records and case notes. Keeping a tally of cases should not take long if it is done regularly. Writing up case reports may take a little longer, but encourages more effective reflection on performance. It is also valuable preparation for those who will go on to study for a postgraduate certificate. Keeping reflective notes on cases for the PDP provides the evidence that the graduate is making clinical governance part of their professional activities, as required by the Code of Professional Conduct. Case notes and reports could also be used as part of clinical meetings within the practice as part of clinical governance. Opportunities

to take part in performance appraisal will vary from practice to practice and, in many cases, may be informal. Practices accredited under the RCVS Practice Standards Scheme need to ensure that the CPD records of their staff are up to date and this should include the PDP. The PDP can form a central part of appraisal meetings with a more recently qualified employee and will thus serve as evidence that they are undertaking their CPD. If PDP records are used to discuss the outcome of clinical cases and to monitor the new graduate's progress, this may also help to demonstrate that the practice is monitoring its performance and taking part in clinical governance.

If the practice does not have a formal appraisal system in place, the employer should still make some time available on a regular basis to discuss how the graduate is progressing, so they can have an informed third party's view of their progress. This need not take long, but

it would help to arrange this in advance, so the graduate knows what to expect and can be prepared with any questions and concerns they might want to raise.

Who signs off the PDP?

The PDP is based on the concept of self-assessment, and seeks to encourage graduates to have a realistic view of their professional competence. The graduate can

apply for PDP completion when they have marked themselves as confident across all the PDP areas, have checked their performance against the general RCVS PDP Competences, and their record includes evidence of a broad range of experience in the species area in which they are working (either small animal, farm animal, equine practice or any combination of the three). They must then print out and sign the declaration, which can be downloaded from their PDP record. Their employer or other senior MRCVS colleague will also need to countersign the form to confirm that the graduate has taken part in the process, and that they have discussed their PDP entries with them.

Employers are not asked to formally examine or assess the graduate's PDP competence for the purposes of the PDP (although, of course they will want to make a judgement about a graduate's competence on a regular basis in order to decide the level of responsibility which they are prepared to allow them to have in the practice).

The RCVS-appointed Postgraduate Dean is available online to provide guidance to each graduate about completing their records. When the graduate claims they have achieved the PDP competences, the RCVS Postgraduate Dean will review the case records and reflective notes online, before confirming that they have completed their PDP. Once confirmed by the Postgraduate Dean, the RCVS will send a completion certificate to the graduate.

After they have completed the PDP and received their confirmation certificate from the RCVS, the graduate will not be able to add to or edit their PDP records, although they will be able to view them online if they wish. If they decide to move into a different area of practice later on, they may wish to come back to the PDP system and continue completing their records in a different species area. If they want to reactivate their PDP record, they should contact RCVS at pdp@rcvs.org.uk, explaining the background to their request.

Is completing the PDP just a matter of ticking boxes?

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The PDP is not simply a matter of filling in case numbers, it is much more than this. To get the most out this important phase of their professional development, the graduate should review their progress continually, making a conscious effort to fine-tune their skills, reflect and learn from experience. The phase is designed to encourage them to think about what they are doing so they can build on their successes and learn from their mistakes.

Employers can help graduates by encouraging them to keep their records up to date. Reference to their skills log can be used to structure any appraisal discussion, and can provide an idea of the balance of the experience they are getting. (The graduate can share a non-editable page of any part of their PDP and CPD record with a third party by sending them a link by email.) If they are short on experience in some areas, employers could look at switching rotas to provide exposure to a different range of cases.

Employers may also want to consider letting them see practice elsewhere for a short period if this would help to broaden the range of cases they see. This could be a valuable adjunct to their CPD. If graduates are having difficulty with some procedures, employers should try to be supportive and provide opportunities for more practice in carrying these out. One approach might be for them to have additional supervision until they are confident in these procedures. The list of PDP Competences provides a guide to areas where graduates may need further training, perhaps by attending some external courses, or by further reading. General professional competences such as communication skills, or practice and business management, are also important and should not be overlooked.

How long should the PDP take?

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The average time taken to complete the PDP is 18 months. Some graduates may complete in a shorter time, some longer. It depends where they are working, the number and type of cases they see, and the level of support they receive from colleagues. It will probably take

longer than a year for someone who wants to complete their PDP in genuinely mixed practice, as they will need to gain broad experience across all three areas, rather than in just one

or two. However, it is quite acceptable to complete the PDP in the context of just one main species area, for example, small animal practice.

In July 2015 a time requirement of three years was introduced for completion of the PDP and we expect graduates in clinical practice to complete within this time-frame. The three-year time period begins when the graduate enters their first clinical position. If a graduate finds that they cannot complete the PDP within the three-year time requirement, they should contact the PDP Officer at the RCVS or their Postgraduate Dean to explain their reasons and discuss their options.

The PDP needn't be undertaken just in one practice or post; if the graduate changes jobs, they can continue their PDP in their second or subsequent posts. If a graduate is undertaking locum work, they can use this experience towards their PDP. However, the RCVS does not recommend that a new graduate undertakes unsupported locum work. A new graduate should not normally be left in sole charge unless they have easy and quick access to support from a more senior colleague.

The PDP and CPD

PDP will count towards your CPD requirement. We view undertaking and completing the PDP as a year's worth of CPD and it is therefore equivalent to 35 hours of CPD activity. If you undertake your PDP over more than one year, you can add 35 hours to any calendar year or split the hours across years during that time-period. While PDP covers your minimum CPD requirement as part of your initial development, you will also be undertaking other forms of CPD during that time (e.g., congress, practice/case discussions and meetings, reading or research), details of which should be included on your CPD record. You can count any learning or development that is relevant to you as professional person as CPD so it does not need to be formal learning or clinical CPD. Recording all CPD, including the PDP, serves as a useful reminder and prompt for skills and career development purposes. RCVS requirements for CPD are 35 hours per year. Your PDP will count as 35 hours of CPD in the year of your choosing.

Internships and the PDP

The question is often asked about how interns working in hospital clinics or in specialist referral practices can undertake the PDP. To complete the PDP, graduates will need involvement with first opinion cases, and will also need to have primary responsibility for the clinical decision, which is one of the main competences that need to be developed during the PDP. Interns may be able to complete some of the PDP Competences, but they have to accept that they may need to go into general practice for a period of time to complete the rest of their experience. Institutions and specialist practices employing interns should make it clear that interns may not be able to complete their PDP there because of limited exposure to a varied workload, or because they may not have primary responsibility for their cases.

Universities and other institutions may need to review their internships, and should be encouraged to distinguish in adverts between 'PDP-conforming internships' (ie those that would provide the intern with the range of experience and level of responsibility needed to complete the PDP) and 'PDP non-conforming internships'. This would help to provide greater transparency for new graduates.

Similarly, PhD and other research students will probably not be able to complete their PDP until they go into clinical practice at a later date. However, they may be able to record some skills if they are undertaking some part-time clinical work.

How graduates can complete their PDP records more effectively

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In addition to recording case numbers, it is also essential that graduates make good use of the free-text notes section under the various clinical skills headings. Making such notes is all part of the learning process and, over time, will help graduates, their employers and the RCVS evaluate their progression. They should be encouraged to make notes based on their personal reflections, for example, on how they felt they coped with a particular case or

procedure, and what they might need to do to improve their performance in a particular area.

Notes need only be brief. For example, "problems doing IVs in dogs using the cephalic vein; probably need to make sure vein is suitably raised and blood aspirates easily before injecting". Then perhaps later in the notes: "Much better at doing IVs, fewer haematomas". Another example would be: "Feel competent with positioning, collimating, taking and processing radiographs. Would like to become more competent at interpreting radiographs, often unsure about clinical significance of findings". Further examples can be found in the Example PDP notes, available to download in the 'Related documents' box: www.rcvs.org.uk/document-library/example-pdp-notes/

Once graduates feel competent with a particular procedure, they can indicate this in the notes section, and not record any more case numbers for that particular procedure. There is no need to keep counting each time they take a blood sample!

An alternative approach is to enter more detailed reports of cases that may cover many 12

different skills and procedures. After entering a case report, the graduate then links it to the skills list, ticking off in turn which skills or procedures have been covered by the case. The graduate can adopt either of these approaches within the PDP system – they can enter case numbers and add notes, or add a case report and link it to the appropriate sections of the skills list.

It is possible that a procedure they are undertaking may not 'fit' with the PDP template.

In such cases, the graduate should use the category that offers the closest fit and add a suitable note to explain the position.

Many skill areas are prefaced with the phrase "clinical assessment and management of". Some of these may sound fairly advanced, but graduates are not expected at this stage to be dealing with complicated cases completely on their own, especially if they are beyond their current competence. However, they may be dealing with cases that fit under these headings where they are making the initial clinical assessment, seeking help from a colleague with

a diagnosis and treatment plan or even referring the case to a specialist. If the graduate handles the ongoing management and oversight of the case, then it can be included in their record. The graduate should remember to add notes or a case report to show what their involvement has been.

The role of the PDP Postgraduate Dean

The RCVS will allocate each graduate to a Postgraduate Dean when they register to use the online PDP system. The Postgraduate Dean will monitor their progress online from time to time, and will be the point of contact for assistance with their PDP. The Postgraduate Dean will also review and sign off the record, once the graduate submits the PDP declaration form. The Postgraduate Dean is not there to advise on personal problems or employment matters,

although, if such issues are raised, they may refer the graduate on to other sources of support.

What standard is a new graduate expected to meet by the end of their PDP?

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The main indication that the graduate has completed the PDP is whether they are able to perform a range of common clinical procedures, or manage them successfully without supervision. The common clinical procedures are those listed in the online PDP recording system.

The Postgraduate Dean will look for a broad range of experience across the majority of skill areas, as well as evidence through the notes and/or case reports, that the graduate has assessed their performance against the general PDP Competences. This is not black and white and there is no mathematical formula to determine the 'correct' number of cases.

Ideally, all skills and procedures will have been covered for one or other of the species areas, although this may vary from individual to individual.

Sometimes, knowledge and experience is transferable from one species area to

another, so there may be some cases entered across two or three species areas, even though the graduate is aiming to complete the PDP in the context of one species area only. If in

doubt, the graduate can email their Postgraduate Dean through the online PDR and ask for guidance. The Postgraduate Dean will review their records and advise on any areas that look 'light' compared to the average.

When the graduate believes that they have gained sufficient experience in their area of practice to meet the PDP Competences, they are invited to submit a signed declaration

to this effect to the RCVS. A senior colleague or other mentor in the practice is asked to countersign the graduate's declaration to confirm that there has been a discussion about their performance, and that they have seen the record of procedures as supporting evidence. The colleague or mentor in practice is not asked to assess the graduate's competence when countersigning the declaration. (In signing their PDP declaration, the graduate should be reminded of the hazards of false certification.)

The benefits of the PDP

The PDP will be most successful where there is active collaboration between the new or recent graduate and senior practice colleagues. For the graduate, participation in the PDP demonstrates that they are taking their continued professional development seriously, and it will help them to identify their training needs more effectively.

Online access to an experienced Postgraduate Dean is another source of advice and support. For a new graduate working in clinical practice, undertaking the PDP is, in effect, the first year of their CPD, and, if undertaken conscientiously with support from their employer, will usually meet their RCVS CPD obligations for this period. PDP graduates also receive a substantial discount on RCVS Library membership and services, providing them with access to a wide range of information resources, including online access to journals.

For employers, the PDP system provides a ready-made structure for staff appraisal, and could be a useful adjunct to CVs when recruiting new staff in the future. There is also some evidence to show that new graduates tend to stay longer in jobs where employers are supportive of their development. Through promoting the PDP in their practice, employers will be promoting good employment practice and therefore be in a better position to attract good applicants to any vacant posts. They will also be able to show that they take the CPD of their staff seriously, as required by the Practice Standards Scheme.

Section 2: Frequently Asked Questions about the PDP

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Do all new graduates have to do the PDP?

The Code of Professional Conduct requires you to comply with the RCVS's PDP and CPD requirements. The RCVS considers the PDP to be the most appropriate form of continuing professional development for new and recent graduates working in clinical practice, so all new and recent graduates members of the RCVS working in clinical practice should take steps to enrol on and complete the PDP. It is a professional obligation that you continue

to learn and develop your competence, and hence should be something that you want to do for your own development — to reflect and improve on how you are performing as a professional.

What can the RCVS do if I don't do my PDP?

You will need to have completed the PDP before you enrol on RCVS postgraduate certificates and some other postgraduate certificate programmes. You may also find that a prospective new employer will ask you about the PDP at the interview or require confirmation that you have completed it. You will be asked about it by the RCVS should you be involved in a Preliminary Investigation, and if the practice where you are working is inspected under the RCVS Practice Standards Scheme. Taking a full part in the PDP, and completing your PDP record, will also show that you are complying with the RCVS policy on continuing professional development.

What does it mean to say I'm competent?

There are many definitions of 'competence' and many views on what it means in practice for the professional. In general terms, however, professional competence is about how you apply your knowledge, understanding, practical and problem-solving skills, attitudes and behaviour that you should have learnt during your initial veterinary training. A competent professional is someone who performs consistently and effectively in their chosen area of work, optimising the welfare of animals in their care, and is able to respond appropriately to contingencies, change and the unexpected. As a new or recent graduate, your competence is still developing as you gain more experience. During your first year or so, you should be gaining sufficient experience to enable you to perform a range of common clinical procedures, or manage them successfully without supervision

How does this differ from when I first graduated?

When you first graduated, the university, in granting you a degree, was in effect confirming

that you were sufficiently safe to practise as a veterinarysurgeon based on the knowledge and skills you had demonstrated as an undergraduate. In passing your finals, you were deemed to have demonstrated that you had acquired the necessary 'Day-one Competences' i.e., that you would be sufficiently safe to work as a veterinary surgeon on your first day in practice. However, as a student, there were limitations on the procedures you were allowed to undertake unsupervised. Although you will have gained valuable veterinary experience whilst at university, and in particular during your extra-mural studies, this cannot equate to or replace the experience you gain when you work as a qualified veterinary surgeon.

Professional competence develops over time and, as you gain more experience, more in turn is expected of you. As a qualified veterinary surgeon, you will increasingly be expected to cope unsupervised, taking decisions on your own, and working within time and cost constraints that may be new to you.

During your first year or so in practice it is very important that you continue to develop your knowledge, skills and experience in a range of common clinical procedures, preferably under the direction of more experienced colleagues. You should continue to reflect on how your competence is developing and how you can continue to improve your performance. It is an important feature of professional competence that you are able to reach a reasonable and realistic judgement about your own competence and abilities, and seek assistance, direction and support where necessary. As you gain more experience throughout this initial professional development phase, the level of supervision and direction that you need will decrease.

How do I judge whether I have met the PDP Competences?

The general PDP Competences look very similar to the Day-one Competences you achieved when you graduated, except that by the time you have been working for about a year, you will be expected to have had actual experience of applying these skills in practice and should be able to perform a range of common clinical procedures, or manage them successfully without supervision.

If you have only performed a procedure once or twice before, ask yourself the following questions. Would you be able to cope with unexpected contingencies that might arise? Was your previous success achieved by chance, or could you reasonably expect a successful outcome in the future? In other words, how consistent is your performance? Whilst it is

wise to err on the side of caution if you are in doubt, remember that you should equally not underestimate your abilities.

You may occasionally be unsuccessful with some procedures, or feel that you haven't handled a case particularly well. This may be due to a variety of reasons, but does not necessarily mean that you are not able to carry out the procedure. When things go wrong, you should look at the reasons why and try to make a balanced judgement about your

abilities. If in doubt, you should seek to discuss your performance with more experienced colleagues in the practice or with your Postgraduate Dean. Remember that you should note your negative experiences as well as the positive ones so that you can reflect on what you have learnt.

Will it take me longer to complete my PDP if I work in mixed practice?

If you are working in mixed practice with more than one group of species, it may take you longer to get a broad spread of experience across all the species. However, you will see that many (but not all) of the procedures are common across groups and in many cases, your experience in undertaking a procedure with one species may compensate for lack of direct experience in another. You do not necessarily therefore need to complete all the

Do I need to attend any particular CPD courses while I'm on the PDP?

procedures for all species in order to undertake a mixed practice PDP route.

This is a judgement that you will need to make for yourself, probably in consultation with your employer. The RCVS is of the view that taking part in the PDP — recording and reflecting on your experience under guidance from a more senior colleague in the practice — is itself CPD for the new graduate. The experience you gain in practice will help to consolidate the learning that you acquired at university and, by reflecting on what you are learning, your

clinical judgement should become more discerning and effective. If you have just graduated, your scientific and clinical knowledge should be very much up to date, but there may be areas where you need further development, such as business-related skills and practice management, or you may need to brush up on certain techniques.

You can use the Development Plan in the CPD component of the PDR to make a note of your learning objectives and then discuss with your employer or other colleague how best to address any gaps in your knowledge and experience. There are a number of excellent CPD courses provided by universities, veterinary associations and commercial providers, but bear in mind that it is not a requirement of the RCVS that you must attend a set number of external courses each year.

You may find other ways of meeting any gaps in your knowledge and experience, such as by asking to see a broader range of cases, joining a local network of colleagues, and/or by private studies. Join one of the many veterinary associations and try to keep up with relevant journals. Keep a log of your reading — not only will it help to consolidate what you have learned, it will also come in useful if you later decide to work towards the RCVS Certificate in Advanced Veterinary Practice. The important thing is that you get into a routine of identifying what you need to learn, planning ahead, and recording what you do.

Further guidance on CPD activities can be found at www.rcvs.org.uk/cpd

What happens if I move jobs during my PDP?

It doesn't matter if you move jobs during your PDP — simply carry on keeping your records in the new practice. But remember to change your contact details in your PDR record (so that your Postgraduate Dean can see them), and let the RCVS Registration Department know about any changes to your contact details, so that we can keep your Register entry up to date.

You can update your contact details in the PDR easily online (see 'how do I amend my contact information' under the 'help with the website' section). Remember that changing your PDR contact details does NOT change your RCVS Register entry. You must do that separately in writing to the RCVS Registration Department.

If you move into a job that does not involve any clinical cases, such that it is no longer relevant for you to complete your PDP records, then let RCVS know by emailing pdp@rcvs.org.uk. We can then take you off the 'reminder' list if you don't log on for some time. You can continue the PDP if you return to practice at a later stage.

What happens if I want to take a break after graduating?

If you do not plan to go straight into practice after university, then you don't need to enrol for the PDP straight away. You need to enrol for the PDP once you begin your first position in clinical practice.

I don't intend to go into practice full time yet, but may do some locum work. Can I still take part?

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Yes, you can still take part in the PDP even if you are not working full-time in practice. It will just take you longer to complete. However, if you are undertaking locum work, it may not be advisable for you to work without access to support or direction until you have completed the PDP. Before taking up any post in your first year in practice, check that you will have access to support and direction from other senior colleagues.

What do I do if I'm having difficulty getting a broad enough range of cases to complete my PDP?

You will need to keep going until you have gained enough experience across the range of skills. Also, there are a number of items on the clinical skills lists which are identified as 'clinical assessment and management of...' For these items, you are not necessarily expected to be dealing with the entire case on your own, but you will be expected to be able to undertake the initial clinical assessment, and if necessary to refer the case on to

others. The management of the case may therefore involve the referral process, the ongoing monitoring of developments and liaison with the client.

If you are struggling to complete the PDP within the three-year time scale, then contact the PDP Officer at the RCVS to let them know that you need more time.

I recently qualified as a veterinary surgeon in another country but am currently working in the UK — should I still take part in the PDP?

.....

Yes you should. If you are a new or recent graduate, you are required to participate in the PDP, regardless of the country in which you obtained your veterinary degree. If you are based at an accredited veterinary practice then you should already be participating in the PDP.

Those with less than one year's clinical experience are also required to undertake and complete the PDP.

Overseas graduates who register with the RCVS with between one and three years' clinical experience will be asked to review their experience against the RCVS PDP Competences list and confirm that they have achieved these competences. If they are unable to confirm this, then they will be advised to undertake the PDP in order to ensure that any gaps in their experience are filled.

Is the PDP only for new graduates?

The PDP has primarily been designed for new or recent graduates, to provide a framework to support them in their development, by setting out the benchmarks for self-assessment during their first year or so in practice. However, if you are returning to work after a career break

you might find it useful to combine the PDP with other studies, as part of your preparation for returning to work in practice. You might also find the PDP of help if you are moving to a new area of practice, for example, from small animal to equine. To gain access to the PDP component of the PDR, contact RCVS by emailing pdp@rcvs.org.uk

What checks will there be on how I am undertaking the PDP?

When you register for the PDP you will also be allocated a Postgraduate Dean who will have access to your contact details (as shown in your PDR record), case numbers and skill notes and case reports online. You will be able to email your Postgraduate Dean direct from the system if you have any difficulties in interpreting the requirements or wish to ask any questions. The Postgraduate Dean will check your records again before RCVS issues

the certificate of completion. If it is considered that your experience is insufficient to warrant signing off your PDP, your Postgraduate Dean will contact you to discuss what else may

still need to be covered. Apart from the Postgraduate Dean, the PDP Officer in the RCVS Education Department will periodically check your data online for administrative purposes, and may extract data to produce consolidated, anonymised reports on clinical skills coverage and website usage. If you don't log in for a few months, you may receive a reminder email to encourage you to update your record.

Who to contact at the RCVS for more information

RCVS Education Department

T 020 7202 0778 or 020 7202 0791

E pdp@rcvs.org.uk

Section 3: The RCVS PDP Competences

Section 3: The RCVS PDP Competences

A graduate who has completed the PDP will be able to perform a range of common clinical procedures, or manage them successfully without supervision.

RCVS PDP Competences	Guidance		
Section A: General professional skills and attributes expected of veterinary surgeons on completion of the PDP.			
PDP completion usually takes between 12 – 24 months and show that they can:	at the end veterinary surgeons should be able to		
1. Be fully conversant with, and abide by the RCVS Code of Professional Conduct and identify when it is appropriate to use the supporting guidance.	The RCVS Code of Professional Conduct and supporting guidance is available on the RCVS website at <u>www.rcvs.org.uk/vetcode</u>		
2. Understand the ethical, legal and professional responsibilities of the veterinary surgeon in relation to patients, clients and society and demonstrate an ability to apply these in practice.	To abide by the principles in the Code of Professional Conduct, veterinary surgeons need to be able to make professional judgements based on sound principles. They must be able to think through the dilemmas they face when presented with conflicting priorities and be prepared to justify the decisions they make.		
	They should be able to support owners in meeting their obligations under the Animal Welfare Act (See Chapter 14 of the supporting guidance).		
	As well as decisions relating to the health and welfare of individual patients, animal groups, populations of animals and clients, veterinary surgeons must take account of the possible impact of their actions beyond the immediate workplace, for example, on public health, the environment and society more generally.		
	Veterinary surgeons should understand the need for informed consent, shared decision making where appropriate and confidentiality which extends to online activities including social media (see Chapters 14 and 28 of the supporting guidance).		
	Practical demonstration of ability in these areas could include the application of ethics to the process of supersession or referral, the handling of a complex euthanasia case or a case involving crueity. Demonstrating application to wider society would include decision making in relation to zoonotic disease or responsible antimicrobial prescribing.		

RCVS PDP Competences	Guidance
3. Apply a basic understanding of the organisation, management and legislation related to a veterinary business.	 This includes: understanding one's own and the employer's responsibilities in relation to employment, and health and safety legislation, the position relating to non-veterinary staff, professional and public liability awareness of how fees are calculated, of income, overheads, other expenditure and financial responsibilities involved in running a veterinary business and an understanding of the importance of fair and accurate invoicing ability to work with various information systems in order to effectively communicate, share, collect, manipulate and analyse information compliance with professional standards, protocols and policies of the business knowledge of and compliance with legislation affecting veterinary businesses, such as the disposal of clinical waste and safety
4. Promote, monitor and maintain health and safety in the veterinary setting; apply knowledge of systems of quality assurance; apply principles of risk management to their practice.	of medicines. Veterinary surgeons need an understanding of their own and an awareness of their employer's responsibilities in relation to employment and health and safety legislation and the position relating to lay staff and public liability. This includes knowledge and application of the procedure for reporting adverse incidents and the procedures for avoiding them. It also includes applying safe practices relating to the dangers in the workplace and taking personal responsibility for their own safety and that of those around them.
5. Communicate effectively with clients, the public, professional colleagues and responsible authorities, using language appropriate to the audience concerned.	Effective communication includes effective listening and responding appropriately, both verbally and non- verbally, depending on the context.
6. Prepare accurate clinical and client records, and case reports when necessary.	Patient records should be written in line with the supporting guidance to the Code of Professional Conduct (Chapter 13). They should be contemporaneous, clear enough that they can be referred to by others and (if written by hand) legible, avoiding idiosyncratic abbreviations or jargon, so the case can be taken over by another professional for ongoing treatment if necessary.
7. Work effectively as a member of a multi-disciplinary team in the delivery of services.	The team may include veterinary nurses other allied professions and technicians. The veterinary surgeon should be familiar with and respect the roles played by others in the team and be prepared to provide or accept effective leadership when appropriate. Please see the supporting guidance to the Code of Professional Conduct (Chapter 17).

RCVS PDP Competences	Guidance
8. Understand the economic and emotional context in which the veterinary surgeon operates and respond appropriately to the influence of such pressures.	Veterinary surgeons need to develop resilience and confidence in their own professional judgements and coping strategies to manage the emotional and economic stresses of the conflicting demands they may face in the workplace.
	They should be aware of where to seek help when there are concerns about the wellbeing of themselves and others Where appropriate, they should be willing to accept offers of support. www.vetlife.org.uk
9. Review and evaluate literature and presentations critically in line with evidence-based veterinary medicine.	Veterinary surgeons must be able to critically assess different sorts of literature and evidence, for example, recognising commercial and other forms of bias.
10. Understand and apply principles of clinical governance.	More guidance on clinical governance is included in the supporting guidance to the Code of Professional Conduct (see Chapter 6).
	It includes reflecting on performance and critical events and learning from the outcome to make changes to one's practice.
11. Use their professional capabilities to contribute to the advancement of veterinary knowledge, in order to improve, animal health and welfare and public health.	The veterinary surgeon must think beyond the immediate case in hand, and take up opportunities to contribute to the processes of continuous improvement. This may include clinical audit, case discussions, research and adding to the evidence base for others to draw on in the future.
12. Cope with incomplete information, deal with contingencies and adapt to change.	Veterinary surgeons must be able to manage cases and make decisions where there is incomplete or unclear data and communicate this to the client. It is not always possible to run a full set of tests or range of diagnostic procedures which may preclude the investigation of the 'perfect' case. They need to be able to adapt their approach to fit changing circumstances, know how to cope appropriately with contingencies and the unexpected, and identify appropriate options for further diagnosis, treatment and/or referral, should a case require it.
13. Understand personal and professional limits, and seek professional advice, assistance and support when necessary.	Veterinary surgeons undertaking procedures on patients must at all stages in their career work within their area of competence and be reflective in their practice. If a procedure is not within their area of competence they should prioritise animal welfare, seek competent supervision and consider referral to an appropriately qualified professional.
14. Demonstrate a commitment to learning and professional development, both personal and as a member of a profession actively engaged in work- based learning. This includes recording and reflecting on professional experience and taking measures to improve performance and competence.	It is a requirement of the RCVS Code of Professional Conduct that veterinary surgeons must maintain and develop their knowledge and skills relevant to their professional practice and competence. Those veterinary surgeons entering clinical practice following graduation must undertake the PDP.

RCVS PDP Competences	Guidance
15. Take part in self-audit and peer-group review processes in order to improve performance.	Veterinary surgeons must regularly review how they are performing in their day to day professional work, and play an active part in performance appraisal and other review processes used within the practice.
Section B: Practical and clinical competences expected By the end of their PDP, veterinary surgeons should be able chosen area of practice, in the following areas:	
16. Obtain an accurate and relevant history of the individual animal or animal group, and its/their environment.	
17. Handle and restrain animal patients safely and humanely, and instruct others in helping the veterinary surgeon perform these techniques.	Safety applies not only to the animal, but also to others nearby. The veterinary surgeon should be able to make a rapid risk assessment of all procedures as duties are performed, as dangers may appear in situations that initially appear to be safe. They should be prepared to take a range of measures including adaptation, seeking assistance or retreating from the task until safety measures can be put in place.
18. Perform a complete clinical examination and develop a differential diagnosis allied to an approach for making a specific diagnosis.	A complete clinical examination is not always required or appropriate in practice. Whilst the veterinary surgeon should be able to perform a complete examination, they should know when it is appropriate to adapt their examination to the circumstances.
19. Develop appropriate treatment plans and administer treatment in the interests of the patient(s) and with regard to the resources available.	This includes being able to tailor a treatment plan when there may be financial or other constraints, whilst prioritising the welfare of the patient(s), whether for an individual animal or the group, and obtaining informed consent whenever possible.
20. Attend all species in an emergency and perform first aid.	The veterinary surgeon must be able to perform basic first aid, and know when and how to call for assistance from others if called to deal with an animal outside their immediate area of competence or where there are potentialrisks to health and safety. This involves being able to make a rapid risk assessment of the situation and taking appropriate action to protect the health and safety of themselves and those around them. Further information is provided in the supporting guidance to the Code of Professional Conduct (see Chapter 3).
21. Assess the physical condition, welfare and nutritional status of an animal or group of animals and advise the client on principles of husbandry and feeding.	This applies to commonly presented cases within the veterinary surgeon's area of competence and would not necessarily be expected to include advanced advice for complex cases.
22. Collect, preserve and transport samples, select or perform appropriate diagnostic tests, interpret test results and understand their limitations, seeking assistance where appropriate.	Tests to be undertaken include sampling in cases of infectious or contagious disease as well as appropriate investigative sampling from major body systems.
23. Communicate clearly and collaborate with referral and diagnostic services, including providing an appropriate history.	

RCVS PDP Competences	Guidance
24. Understand the contribution that imaging and other diagnostic techniques can make in achieving a diagnosis. Use basic imaging equipment and carry out an examination effectively as appropriate to the case, in accordance with good health and safety practice and current regulations.	This competence includes taking images of diagnostically-useful quality, as well as the safe use of the equipment (eg ionising radiation regulations) in accordance with best practice ('ALARA' principle – as low as reasonably achievable). 'Basic' equipment might include, for example, x-ray, ultrasound and endoscopes, but NOT MRI or CT scanners.
	On completion of the PDP, the veterinary surgeon should be able to interpret images encountered in the selected species correctly or identify when a specialist opinion is required,
25. Recognise suspicious signs of possible notifiable, reportable and zoonotic diseases and take appropriate action, including notifying the relevant authorities.	This involves identifying the clinical signs, clinical course, transmission potential (including vectors) of pathogens associated with common zoonotic and food-borne diseases and transboundary animal diseases.
26. Apply the RCVS Principles of Certification.	The <u>Principles of Certification</u> are described in the supporting guidance to the Code of Professional Conduct, available on the RCVS website (Chapter 21). Veterinary surgeons must be familiar with the Principles and follow the RCVS supporting guidance.
27. Prescribe and dispense medicines correctly and responsibly in accordance with legislation and latest guidance and ensure that medicines and waste are safely stored and/or disposed of.	Veterinary surgeons must be able to access the appropriate sources of data on licensed medicines and understand the requirements of the Cascade in prescribing. In particular, when prescribing or using antimicrobial agents, care must be taken to minimise the risk of antimicrobial resistance. They must appreciate the importance of obtaining informed consent preferably in writing when administering or prescribing off-licence drugs.
28. Report suspected adverse reactions Including lack of efficacy.	The veterinary surgeon should follow the Veterinary Medicines Directorate procedures for reporting adverse reactions and suspected lack of efficacy.
29. Apply principles of bio-security and infection control correctly, including sterilisation of equipment and disinfection of clothing.	This applies to all areas of veterinary practice and all species. All veterinary surgeons must maintain high standards of biosecurity at all times in order to
	minimise the risk of contamination, cross-infection and accumulation of pathogens in the veterinary premises and in the field.
30. Perform aseptic surgery correctly.	The veterinary surgeon must take measures to ensure appropriate asepsis during procedures.
31. Safely perform sedation, and general and regional anaesthesia; implement chemical methods of restraint.	
32. Assess and manage pain.	The veterinary surgeon should be able to evaluate and/ or score pain then tailor analgesia protocols according to the species and physiological state of the patient.
33. Safely perform euthanasia using a method appropriate to the species and circumstances showing sensitivity to the needs and feelings of the owner.	Veterinary surgeons should follow the supporting guidance of the Code of Professional Conduct (Chapter 8).
	They should demonstrate an understanding of issues that may surround euthanasia such as welfare concerns, owner not present or ownerless animals and consent, animals as well as veterinary surgeons should be able to advise on options for carcass disposal.

RCVS PDP Competences	Guidance
34. Demonstrate a thorough understanding of what can be gained from a gross post-mortem and give appropriate advice and guidance to clients. If performing a post-mortem examination, record observations, sample tissues, store and transport them.	Veterinary surgeons should be aware of the limitations and benefits of undertaking a post-mortem in practice and should know when to refer a case to a pathologist. The potential for conflict of interest where they have previously been involved with the case should be recognised. It is important that good quality records and samples are taken for further investigation by a pathologist if necessary
35. Where appropriate, perform ante-mortem inspection of animals destined for the food-chain, including paying attention to welfare aspects; correctly identify conditions affecting the quality and safety of products of animal origin, to exclude those animals whose condition means their products are unsuitable for the food-chain.	Not all veterinary surgeons will work in food-animal practice and further postgraduate training is needed before taking up official veterinarian duties.
36. Recognise when a healthcare programme is indicated. Advise on implementation when appropriate and in line with accepted animal health, welfare and public health standards.	Veterinary surgeons will need to be able to assess health and welfare records (and production records where appropriate) and implement health plans. This does not only apply to production animals but is important for any animals, particularly those kept in groups.

Section C: Underpinning knowledge and understanding

Veterinary surgeons will have acquired a wide scientific background by the time they graduate. After graduation and throughout their career this underpinning knowledge must be kept up to date and applied to the area in which the individual has chosen to work. The veterinary surgeon should therefore ensure that they maintain their knowledge and understanding of the following:

- The logical approaches to both scientific and clinical reasoning, the distinction between the two, the strengths and limitations of each and common clinical signs.
- 2. Research methods and the contribution of basic and applied research to veterinary science.
- The structure, function and behaviour of animals and their physiological and welfare needs, including healthy domestic animals, captive wildlife and laboratory-housed animals.
- 4. The businesses related to animal breeding, production and keeping.
- The aetiology, pathogenesis, clinical signs, diagnosis and treatment of the common diseases and disorders that occur in the common domestic species in the UK.
- 6. Awareness of other diseases of international importance that pose a risk to national and international biosecurity.
- 7. Legislation relating to animal care and welfare, animal movement, and notifiable and reportable diseases.
- Medicines legislation and guidelines on responsible use of medicines, including responsible use of antimicrobials and anthelmintics.
- 9. The principles of disease prevention and the promotion of health and welfare.
- 10. Veterinary public health issues, including epidemiology, transboundary epizootic diseases, zoonotic and food- borne diseases, emerging and re-emerging diseases, food hygiene and technology.
- 11. Principles of effective interpersonal interaction, including communication, leadership, management and team working.
- 12. The ethical framework within which veterinary surgeons should work, including important ethical theories that inform decision-making in professional and animal welfare-related ethics.

Section 4: PDP clinical procedures checklists

Section 4: PDP clinical procedures checklists

The PDP can be completed in the context of small animal, equine or farm animal practice, or any combination of these three.

Small animals Equine Farm animals Nos of cases Nos. of cases Nos. of cases **Diagnostics** Sample collection Blood Urine Faeces Skin scraping Tissue biopsy n/a Swabs of genital tract Milk n/a n/a Data interpretation Blood Urine Faeces Skin scraping Tissue biopsy n/a Milk n/a n/a Interpretation of n/a n/a anthrax blood smears Imaging Radiography n/a Radiological n/a interpretatio n

RCVS PDP Competences clinical procedures checklist

Transautanaaua			
Transcutaneous ultrasound imaging			
Transrectal ultrasound imaging	n/a		
Endoscopy			n/a
	Ne	cropsy	
Performing necropsies			
Necropsy sample collection			
Interpretation of necropsy findings			
Professio	nal key skills, preve	entive medicine and	biosecurity
Certification (including Prescriptions)			
Import/Export/Pet Passports			
Vaccination			
Completion of documentation for insurance claims			
Nutrition (individual cases)			
Parasitic disease control			
Other Infectious disease control and quantitative/ qualitative risk assessment			
Biosecurity within and between locations/units			
Zoonoses/Public Health			
Notifiable diseases			
Anaesthesia			
Sedation			
Local			
Regional			
General			
Pain management			

	Critic	cal care	
First aid and emergency care			
Patient assessment and planning			
Fluid therapy			
Implementation of therapy			
	Euth	anasia	
Client management			
Performing euthanasia (comment on different techniques used and context)			
	Su	rgery	
	Basio	c surgery	
Wound management			
Excision of small tumours and cysts			n/a
Cat spay		n/a	n/a
Castration (routine)			
Abscess drainage			
Dental hygiene and tooth removal		n/a	n/a
Dental management and wolf tooth removal	n/a		n/a
Disbudding	n/a	n/a	
Dehorning	n/a	n/a	
Exploration of foot lesion			
Teat surgery	n/a	n/a	
Routine surgery			
Laparotomy		n/a	
Bitch spay		n/a	n/a
Gastrointestinal surgery		n/a	
Urological surgery		n/a	

Castration(wit h complications)			
Caesarean section		n/a	
Umbilical hernia repair			
Amputation of digit		n/a	
Rumenotomy	n/a	n/a	
Left displaced abomasum	n/a	n/a	
Vasectomy		n/a	
General fracture management			
Other surgical procedures not listed elsewhere			
	Cardio-resp	iratory system	
Clinical assessment and management of airway disease			
Clinical assessment and management of pulmonary disease			
Clinical assessment and management of cardiac disease			
Clinical assessment and management of vascular disease			
Undertaking and interpreting ECGs			n/a
Alimentary system			
Clinical assessment and management of oesophageal disease			
Clinical assessment and management of gastric disease			
Clinical assessment and management of intestinal disease			

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Clinical assessment and management of hepatobillary disease			
Clinical assessment and management of pancreatic disease			n/a
Clinical assessment and management of colorectal disease			
Clinical assessment and management of ruminal conditions	n/a	n/a	
Clinical assessment and management of colic/ abdominal catastrophes			
	Urinar	y system	
Clinical assessment and management of renal disease			
Clinical assessment and management of urinary bladder disease			
Clinical assessment and management of acute urinary obstruction			
	Derm	atology	
Clinical assessment and management of infectious cutaneous disease			
Clinical assessment and management of cutaneous parasitic disease			
Clinical assessment and management of cutaneous allergic disease			n/a
Clinical assessment and management of cutaneous neoplastic disease			
Clinical assessment and management of cutaneous endocrine disease			n/a

Clinical assessment and management of otitis			n/a
	Ophtha	almology	
Clinical assessment and management of ocular disease			
Clinical assessment and management of ocular pain			
Clinical assessment and management of eyelid disease			
Clinical assessment and management of corneal ulceration			
Clinical assessment and management of ocular discharge			
	Endoc	rinology	
Clinical assessment and management of disorders of the hypothalamic pituitary adrenal axis			n/a
Clinical assessment and management of thyroid disease			n/a
Clinical assessment and management of disorders of glucose and insulin regulation			n/a
	Musculosk	eletal system	
Clinical assessment and management of joint problems			
Clinical assessment and management of neck problems			
Clinical assessment and management of back problems			
Clinical assessment and management of limb problems			

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Clinical assessment and management of foot/hoof problems			
Clinical assessment and management of tendon/ ligament disease	n/a		n/a
Diagnostic local anaesthesia	n/a		n/a
	Neu	rology	
Clinical assessment and management of paralysis			
Clinical assessment and management of cranial nerve disease and/or vestibular syndrome			n/a
Clinical assessment and management of traumatic injury			
Clinical assessment and management of neurological gait abnormalities			
Clinical assessment and management of infectious neurological disease			
Clinical assessment and management of developmental (congenital) neurological conditions			
Clinical assessment and management of seizures			
Reproduction/obstetrics			
Pregnancy diagnosis			
Pre-breeding examination			
Fertility management			
Synchronisatio n programmes	n/a	n/a	
Normal parturition			
Clinical assessment and management of the neonate 38			

Mastitis (Individual cases)			
Dystocia			
Prostatic disease		n/a	n/a
Pyometra/Metritis			
Infertility			
Retained foetal membranes			
Diagnosis and control of venereal disease			
Uterine prolapse	n/a		
Cervico-vaginal prolapse	n/a	n/a	
Puerperal metritis/ endometritis			
Penile/preputia I conditions			
Population medicine – assessment and planning			
Nutrition (herd/flock)	n/a	n/a	
Mastitis (in the group)	n/a	n/a	
Metabolic disease	n/a	n/a	
Lameness	n/a	n/a	

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