Veterinary Medical Applications

# Course Syllabus 2015-2016

# **Instructor**: Mrs. Maggie Kelley-Burton **Email:** maggie.kelley@fortbendisd.com

## **Phone**: (281) 634-2874 **Conference Period**: 5th Period 11:15-12:40pm

**Course Objective:** *This class will introduce students to basic medical terminology, exam procedures, safety protocols, customer relations and more as they relate to veterinary medicine. This will NOT be a class for the faint hearted. Students will be exposed to a wide range of scientific principles, such as genetics, anatomy, physiology/nutrition, disease, pests, and management practices. The scientific processes of observation, measurement, hypothesizing, data gathering, interpretation, analysis, and application are stressed. Career opportunities and educational preparation are examined. Learning activities are varied, with classroom, laboratory, and field experiences emphasized. Students should REALLY be considering a career as a veterinarian, a registered vet technician, a research scientist, or is into animal health/careers such as kennel owner or groomer. This course is a full-year commitment.*

**Class Schedule and Units**

(*not necessarily in this order, some may not be covered*)

* Veterinary Medical Terminology
* Anatomy & Physiology
* Clinical Exams
* Hospital Procedures
* Parasitology
* Office Management
* Posology
* Laboratory Techniques
* Animal Nutrition
* Principles of Disease
* Animals in Society
* Animals Management
* Career Exploration

**Required Materials:**

1. 1 Composition notebook

2. Pencil/Pen

3. Flash Drive

4. Any requested material

**Rules**

1. Come to class on time, ready to work with all supplies

2. Do NOT talk when the teacher is talking or giving instructions

3. Do NOT get out of your seat without permission

4. Do NOT throw trash across the room

5. If it is not yours, do not touch it

6. NO FOOD or DRINKS.

7. NO MUSIC DEVICES

8. NO CELL PHONES

**Consequences for not following the Rules & Social Contract:**

1. Verbal Warning

2. Parent Contact

3. Parent Teacher Conference

4. Office Referral

5. Severe Behavior = Automatic Office Referral

**Bathroom Policy**

- Students will only be allowed ***three*** bathroom passes a semester

**Grades:** *Grades will be determined by total points*  **Grading Scale:**

*earned. However, the following is a breakdown of the* A – 100-90

*amount of work given in each area*: B – 89- 80

 C – 79-70

50% Daily Work/Participation D – 69-60

50% Exams and Quizzes F – 59-0

**Late Work:** Daily work will be accepted one day late for an 80 and two days late for a 50. Major grades will be taken for 10 points off for each day after the deadline. Late work will not be taken on major grades after 5 days.

**Edmodo:** Students will need to sign up for their course on Edmodo with the following code **323jae.**

**Remind:** Students can sign up to receive updates from me for this course by texting **@vetmedehs** to **81010**

**Student Behavior Contract**

 I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, promise to behave with the utmost respect in class. My responsibilities are to:

1. Start on taking notes, if given in class, once the teacher starts them.
2. Start on my assignment immediately once it is passed out.
3. Stay in my assigned seat.
4. Complete at 100% of my assignment each time.
5. Be **responsible** in obtaining any notes or assignments that I miss and return assignments in accordance with EHS guidelines.
6. Attend tutorials as needed when they are offered.
7. Respect the teacher, myself and all others in the class and their materials.

If I do not uphold these standards, I know the consequence will be discipline notice and a phone call to my parents.

I have read and understood all the responsibilities that I am to adhere to, and will comply with those responsibilities that have been placed upon me.

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Student’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher’s Signature Date

Students and Parental/Guardian Agreement

**Please return this form to the teacher for a grade**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have read the course requirements and class rules for the Agriscience Department and fully understand what is required and expected of me while enrolled as a student in any class within the department.

Printed Name of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

Please help me to keep you informed of your child’s progress in my class by supplying the following information. This information is kept confidential. Thank you.

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_