



RESIDENCY TRAINING PROGRAM REGISTRATION
2018-2019
CARDIOLOGY

Part One

New applications for ACVIM Residency Training Programs must be received by the Residency Training Committee 90 days prior to any residents beginning training. Before completing this form, please review the general and specific requirements for Cardiology Residency Training Programs in the ACVIM Certification Manual (CM). The most current version of the CM is available on the ACVIM website at www.ACVIM.org. If there is a discrepancy between this form and the CM, the CM will be considered correct, however, please contact the ACVIM office or the Residency Training Committee Chairperson for clarification.

Prior to making significant changes in a residency training program, approval of the ACVIM and Cardiology Residency Training Committee must be obtained. The Candidate and/or Program Director must notify ACVIM, in writing. Significant changes could include, but are not limited to: changes in Program Director or advisors, transferring from one program to another, alterations in program duration, locations of secondary site training, switching to a 'dual board' program, or enrolling in an institutional graduate program.

Notice: This form contains questions for three separate purposes; data collection that ACVIM must maintain for its accreditation as a specialty college; data collection for each specialty to evaluate what is appropriate for residency programs; and data collection to evaluate this Residency Training Program for renewal. It is important that all questions be answered accurately and completely, even if the answer to a specific question is not essential for a program's renewal.

For multi-site residency programs: To ensure uniformity of training and compliance with current CM requirements, training programs which include multiple sites must provide detailed information as to which Diplomates in the specialty of Cardiology, as well as other Specialties, will be supervising the resident(s) at each site. In this program registration form, the Program Director must provide specific, detailed information regarding supervision and facilities available at each specific site(s).

The following forms must be completed and submitted annually: **Part One** is an online form and addresses general features of the program. **Part Two** addresses aspects of training that apply to all current residents. **Part Three** addresses aspects of training that may differ amongst residents enrolled in a single program. Part Three must be completed and submitted for EACH resident enrolled in the program.

Program Director Name:

[Dr. Carley Saelinger](#)

(Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology)

Program Director's Contact Information:

Work Phone:	(310) 473-5906
E-mail:	carleys6@gmail.com
Mailing Address:	1535 S Sepulveda Blvd Los Angeles, CA 90025

1. Location of Sponsoring Institution (Residency Training Program):

Primary Site:

[Animal Specialty and Emergency Center](#)

Multi-site programs, if any, are listed in Part Two.

[VCA West LA](#), [UCLA](#), [UC Davis San Diego](#)

2. Resident Advisor(s): Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology. There is no restriction on the number of Resident Advisors; however, **each Resident Advisor can supervise only two residents concurrently.**

[Carley Saelinger](#)

3. Supervising Diplomate(s) on-site: (Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology).

[Carley Saelinger - Cardiology](#)
[Kristin Barncord - Cardiology](#)

4. Please list all **Diplomates** of ACVIM responsible for supervision of clinical training who are specialists in areas other than Cardiology. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name and Specialty

[Sue Downing - Oncology](#)
[Todd Cohen - SAIM](#)
[Sameer Trivedi - SAIM](#)

5. Please list the residents currently participating in your training program, along with the beginning date of the program, expected ending date of the program, and designated resident advisor. All current residents and incoming residents (if known) should be listed here. Unless specifically approved, in advance, by the CRTCC, the ratio of cardiology residents to on-site Cardiology Diplomates who are actively involved in resident training cannot exceed 2 to 1.

Resident Name, Dates of Program, (Resident Advisor) *

[None listed](#)

*** There is no restriction on the number of Resident Advisors; however, each Resident Advisor can supervise only two residents concurrently.**

Please note, any Candidate that significantly changes or alters their Residency Training Program before completion must notify ACVIM, in writing, before the changes are made to ensure that the proposed changes are approved.

Significant changes could include, but are not limited to:

- transferring from one program to another
- alterations in program duration
- switching to a 'dual board' program
- enrolling in an institutional graduate program
- change of Program Director or Resident Advisor



American College of **Veterinary** Internal Medicine

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Part Two

Part Two of the Cardiology Residency Training Program addresses general features that apply to all current residents. (Part Three must be completed and submitted for each resident.)

Current Date:

Program Director Name:

(Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology)

Name of Sponsoring Institution (Residency Training Program):

1. Please list all **Diplomates** of the American College of Veterinary Pathology in the areas of clinical pathology or gross/histopathology associated with residency training. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name of Diplomate(s)	Clinical or Gross	Comments
Dr. Steve Smith	Gross	Idexx -- Off Site; one week rotation
*Depends on which Dip is on at the time the rotation is scheduled.	Clinical	Idexx -- Off Site; one week rotation

2. Please list all **Diplomates** of the American College of Veterinary Radiology associated with residency training. If off-site, please explain the situation, and the arrangements for direct contact with the resident.

Name of Diplomate(s)	Comments
Dr. Jean Reichle Dr. David Szabo	

3. Please list the **Diplomates** available for consultation in the areas of dermatology, surgery, ophthalmology, anesthesiology, emergency/critical care, clinical nutrition, clinical pharmacology, and/or theriogenology. If off-site, please explain the situation and the arrangements provided for contact with the resident.

Name of Diplomate(s)	Specialty	Comments
Dr. Scott Anderson Dr. Phil Gill Dr. Mary Somerville Dr. Raviv Balfour Dr. Eric Chow	Critical care, surgery Surgery Surgery Surgery Surgery	

4. **Didactic Learning Opportunities and Research Requirements:** In recognition of the importance of scientific discovery as a critical mission of the ACVIM, all Residency Training Programs shall include an assessment period or instruction and/or participation in creative scholarship which will foster an appreciation of, competency in, and

contribution to the knowledge base of their respective specialty and which will support their development as clinician scientists. This requirement is fulfilled through satisfactory completion of A and one of B [See CM 5.E and 5.F]:

- A. Journal Club: Routine and regular participation in a critical review of the literature, a minimum of eighty (80) hours during the program. Describe how this requirement is met or exceeded.

The resident will be required to participate in:

1. Cardiology journal club weekly while on clinics (128 hours in 3 years, 80 which are counted towards this requirement and 48 (not counted in this 80) which will count towards the 150 hours of additional education)
2. Internal Medicine Journal Club held bimonthly with IM department and rotating (optional)
3. Critical Care Journal Club is held bimonthly with CC department and the rotating (optional)

- B. Cardiology-focused Educational Experiences: Please provide a description of how the required one hundred fifty (150) hours will be met or exceeded. [See CM 5.E.2]

The resident is required to attend the following (mandatory participation):

- Cardiology topic rounds 3 weeks per month while on clinics (96 hours in 3 years)
- ECG rounds once per month while on clinics (18 hours in 3 years)
- Cardiology journal club weekly while on clinics (128 hours in 3 years, 48 counted towards the 150 and 80 which are not counted towards the 150)
- Attend at least one ACVIM meeting during 2nd and/or 3rd year

The resident is required to prepare and present (mandatory):

- Intern cardiology lectures every other month (16 hours in 3 years)
- Southern CVMA lecture once during the three years

The resident is encourage to participate (when in the hospital and on duty for the following):

- Pediatric echocardiography rounds bimonthly at UCLA (5 minutes away)
- Critical care resident rounds, which are weekly to bimonthly

- C. Successful completion of any one of the options listed below. Describe how this will be fulfilled or exceeded in the individual trainee's specific application.

1. Successful completion of at least two (2) of the following three (3) short courses/workshops offered by ACVIM either on-line or at the Forum:
 - A. Critical evaluation of veterinary medical/biomedical literature
 - B. Grant Writing
 - C. Study, design and participation in clinical trials
2. Documented submission of a grant proposal (by advisor letter)
3. Acceptance and presentation at a scientific meeting of an abstract (oral or poster) of original work
4. Documented completion (by advisor letter) of a prospective or retrospective research program pertinent to the candidate's specialty
5. Documented completion (by advisor letter) of graduate course work in biostatistics, research methods, and/or research ethics.

The resident with complete at least two of the workshops offered by ACVIM. The resident will also be encouraged to apply for a grant and to present an abstract at ACVIM.

Note: Letters of documentation by advisors will need to accompany the final submission of the Resident Logs to the Residency Training Committee in order to qualify for a resident certificate.

5. Please indicate the availability of the following facilities or equipment. Indicate if these are available on-site at the primary training site, or at a different location. (In the Location column, indicate on-site for primary location or the name of the facility where the equipment is located if off-site.) For facilities that are not on-site, please describe the situation and availability in the space at the end of this section. See CM 5.D for details.

	Available?		Location of equipment? (On-site or list site name)
	Yes	No	
a) Standard radiological equipment [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
b) Ultrasonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
c) Echocardiography equipment [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
d) Cardiac catheterization capability [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
e) Endoscopy equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
GI equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Bronchoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Cystoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Rhinoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Laparoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
f) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, endocrinology, anatomic and histopathology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
g) Serum osmolality measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
h) Colloid oncotic pressure measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
i) Electrocardiography [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
j) Blood Pressure Measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
k) Electroencephalography	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
l) Electromyography	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
m) Brainstem Auditory Evoked Response Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
n) Nuclear Medicine [access is desirable]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
o) Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
p) Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	VCA West LA
q) Radiation Therapy Facility	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
r) Veterinary Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	UCLA off site
s) Computerized Medical Records w/Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
t) Medical Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	UCLA off site
u) Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
v) Urethral pressure profile & cystometrography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
w) Hemodialysis capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	UC Davis San Diego
x) Total parenteral nutrition capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site

If any of the above equipment or facilities are available off-site, please explain how the resident can access them for case management, research, or study.

UCLA is 5 minutes from the hospital. The Medical library is free for the public to use and with a 20 dollar donation they can even check out books

6.	Total Cardiology caseload per year:	3000-3200
	Number of cardiac catheterizations per year:	25-45
	Number of echocardiographic examinations per year:	2400-3000

7. Please list the residents who have completed the cardiology training programs at your site within the last five years, including the year that each individual's training program started and ended. If at all possible, please indicate whether the individual has completed the board certification process.

Name(s)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	Diplomate Status (Yes or No)
None at this time			

8. Please list the residents currently participating in your training program, along with the beginning date of the program, expected ending date of the program, and designated resident advisor. All current residents and incoming residents (if known) should be listed here. Part Three of this form must be completed for each resident listed here. Unless specifically approved, in advance, by the CRTIC, the ratio of cardiology residents to on-site Cardiology Diplomates who are actively involved in resident training cannot exceed 2 to 1.

Resident Name(s) (first/last)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	Resident Advisor Name(s) (first/last)
None at this time			

Please note, any Program Director or Candidate that significantly changes or alters this Residency Training Program before completion must notify ACVIM, in writing, before the changes are made to ensure that the proposed changes are approved.

Significant changes could include, but are not limited to:

- transferring from one program to another
- alterations in program duration
- switching to a 'dual board' program
- enrolling in an institutional graduate program
- change of Program Director or Resident Advisor

As Program Director, I verify that I have read the Certification Manual and that the above information is an accurate reflection of this Residency Training Program.



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Part Three

Part Three of the Cardiology Residency Training Program addresses general features of the program that apply to each resident enrolled in the program. Please complete a separate Part Three for each resident enrolled in the program.

Current Date:

Program Director Name:

Name of Sponsoring Institution (Residency Training Program):

(Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology)

The following questions will be used to provide the Residency Training Committee with information needed to judge the structure, quality, scope, and consistency of training provided.

NOTE: Direct supervision is required during clinical training, with the time required specified by each particular specialty. Direct supervision is defined as follows: The Supervising Diplomate and resident are participating in a clinical practice in which both the Diplomate and the resident are on duty and interactively and concurrently managing cases. The Diplomate need not personally examine each patient seen by the resident, but must remain physically available for consultation. Please use this definition when responding to the following questions regarding clinical rotations.

1. Please provide the name of the cardiology resident for whom this application applies (leave blank at time of submission for program approval if name is not known). ***Information contained in Part Three is applicable to one resident. If more than one resident is involved in the RTP, please complete one separate Part Three for each resident.***

Resident Name (first/last)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	ACVIM Cardiology Resident Advisor (first/last)
NA			

2. Is the duration of your program thirty six (36) months?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If no, explain why the program is longer than thirty six (36) months:

3. Advanced Degree:

Degree	Yes	No	Required
Masters:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PhD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

What is the approximate time (months) dedicated to graduate work?

Please provide a description of the graduate degree program if offered, including the didactic program (course work) and inter-relationship with the residency program. Be sure to make clear how the residency requirements will be met:

NA

4. Will the resident fulfil the didactic learning opportunities and research requirements as stated in the Part 2 form, section 4?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If no, explain how the resident will fulfil the requirements:

NA

5. Is training provided at a secondary site to fulfill a portion (not to exceed four (4) months) of the twenty four (24) months of required active (direct) supervision or to fulfill invasive procedural requirements? If Yes, please complete the remainder of this section. [See CM 5.G]

Yes	No
<input type="checkbox"/>	<input checked="" type="checkbox"/>

If yes, describe in detail:

NA

Please list the Secondary Site and responsible Advisor at that site (list all, if more than one):

NA

Required training provided by supervising Cardiology Diplomates at secondary sites must be documented by a letter of both commitment and completion sent by the supervisor at the secondary site. Appropriate procedure, echocardiography and structured educational experience logs must also be signed by the supervising Cardiology Diplomat when appropriate. [See CM 5.G]

6. Additional secondary site experiences that do not fulfill a portion of the required twenty four (24) months of active (direct) supervision or the required five hundred (500) echocardiograms, two hundred thirty (230) hours of structured educational experiences or fifteen (15) invasive procedures are supplemental (optional) experiences and do not require documentation from supervising Diplomates.

Required	<input type="checkbox"/>
Recommended	<input type="checkbox"/>

Briefly describe any secondary site supplemental outside experiences:

NA

7. Please provide a description of how the required twenty four (24) months of active (direct) supervision will be met or exceeded as well as additional (indirect) supervision to complete the thirty six (36) month training period. [See CM 5.B and 5.C.1 for definitions related to training programs including active (direct) supervision.]

Definitions from 5.B:

Direct Supervision: The SD and resident are participating in a clinical practice in which both the Diplomat and the resident are on the clinic floor interactively, and concurrently managing cases. The Diplomat need not personally examine each patient seen by the resident, but must remain physically available on-site and review the case with the resident.

Indirect Supervision: The SD and resident although participating in a clinical practice together, are not on the clinic floor simultaneously and so are not concurrently managing cases. To qualify as indirect supervision, the SD is required to be on-site and have face to face contact with the resident at least one hour per day for the entire week that the resident is on duty.

During the 3 year period, time is allotted for the designated rotations listed below:

Critical care, radiology, IM rotations and External pathology rotations OR cardiology service (indirect supervision during last year): 2 weeks

Research project/Study time: 18 weeks (4 weeks dedicated to 2nd year, 9 weeks dedicated to 3rd year, other 2 weeks during 1-3 years as mutually agreed upon)

Conference Time: 2 weeks (1 week each for 2nd and 3rd years)

Vacation Time: 6 weeks (2 per year)

Total: 28 weeks

The remaining 128 weeks will be on clinics. The candidate will be working under direct supervision of the Supervising Diplomate (s) for at least 104 weeks (24 months required) and possible indirect supervision (pending diplomate's comfort level with resident for the other 24 weeks vs further direct supervision).

8. Please provide an outline of a typical weekly schedule

Monday:

- 7:00 AM to 8:00 AM: Grand rounds (case rounds). Included in grand rounds are radiology rounds on all hospitalized cases with the radiologist.
- 8:00 AM to 9:00 AM: in-house work-ups, emergency transfers, RDVM and client call-backs, intern and extern discussions and teaching.
- 9:00 AM to 1:00 PM: Receiving referral cardiology cases and work-ups.
- 1:30 to 3:00 PM: In house fit ins, case discussion on morning cases and paperwork related, lunch.
- 3:00 to 5 PM: Receiving referral cardiology cases and work-ups.
- 5 PM to 6 PM: Discharges, call backs, finishing reports, discussing cases with students and interns, and cage side rounds.

Tuesday:

- 7:00 AM to 8:00 AM: Grand rounds. Included in grand rounds are radiology rounds on all hospitalized cases with the radiologist.
- 8:00 AM - 9:00 AM Cardiology Resident focus physiology rounds to cardio intern and/or students/rotating interns
- 9:00 AM -10:00 AM Cardiology Resident topic rounds with Supervising Diplomate(s) 3 per month, last week of the month are ECG rounds (when resident is on clinics)
- 10 AM to 11:30 AM: in-house work-ups, emergency transfers, RDVM and client call backs, intern and extern discussions and teaching.
- 11 AM to 5 PM: Scheduled procedure day (if no procedures are scheduled by the Thursday prior, the receiving schedule is set as for other days).
- 5 PM to 6 PM: Discharges, call backs, finishing reports, discussing cases with students and interns, and cage side rounds.
- 6 PM: Internal Medicine Rounds and Intern Lectures as applicable

Wednesday:

- 7:00 AM to 8:00 AM: Grand rounds (case rounds). Included in grand rounds are radiology rounds on all hospitalized cases with the radiologist.
- *Every other week, 7:00-8:00 is Pediatric Echo Rounds at UCLA (optional, but encourage)
- 8:00 AM to 9:00 AM: in-house work-ups, emergency transfers, RDVM and client call-backs, intern and extern discussions and teaching.
- 9:00 AM to 1:00 PM: Receiving referral cardiology cases and work-ups.
- 12:30 - 2:30 Critical Care Rounds (physiology and journal club) - optional
- 1:30 to 3:00 PM: In house fit ins, case discussion on morning cases and paperwork related, lunch.
- 3:00 to 5 PM: Receiving referral cardiology cases and work-ups.
- 5 PM to 6 PM: Discharges, call backs, finishing reports, discussing cases with students and interns, and cage side rounds.
- 6PM: Cardiology Rounds (Either Topic Rounds or Journal Club)

Thursday:

- 7:00 AM to 8:00 AM: Grand rounds (case rounds). Included in grand rounds are radiology rounds on all hospitalized cases with the radiologist.

- 8:00 AM to 9:00 AM: in-house work-ups, emergency transfers, RDVM and client call-backs, intern and extern discussions and teaching.
- 9:00 AM to 10:00 AM: Weekly cardio journal club with Supervising Diplomate(s)
- 10:00 AM to 1:30 PM: Receiving referral cardiology cases and work-ups.
- 1:30 to 3:00 PM: In house fit ins, case discussion on morning cases and paperwork related, lunch.
- 3:00 to 5 PM: Receiving referral cardiology cases and work-ups.
- 5 PM to 6 PM: Discharges, call backs, finishing reports, discussing cases with students and interns, and cage side rounds.

*The fifth work day will be an off clinics/but in hospital 1/2 day on Sunday or Friday and every other week a 1/2 day on a Saturday devoted to projects, research, rounds preparation, and studying. The only clinical responsibility will be caring for any hospitalized cardiology patients and receiving emergency cardiac cases (there is no formal receiving schedule for Fridays/Saturdays/Sundays; however this is subject to change).
The resident will alternate weekly having 2.5 days off consecutively per week with 1.5 days off consecutively.

Name of Residency Training Program:

Animal Specialty and Emergency Center (ASEC)

Note: Signatures are only required on the original application submitted at the time of program registration, not on the annual updates unless significant changes to the training program occur.

Signature of Resident	Printed Name of Resident	Date
Signature of Program Director	Printed Name of Program Director	Date
Signature of Resident Advisor	Printed Name of Resident Advisor	Date

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- transferring from one program to another
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- change of Program Director or Resident Advisor

As Program Director, I verify that the above information is an accurate reflection of this Residency Training Program.