



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:
(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:	<input type="text" value="(352) 294-4438"/>
E-mail:	<input type="text" value="sswift@ufl.edu"/>
Mailing Address:	<input type="text" value="CVM, SA Clinical Sciences"/>
	<input type="text" value="PO Box 100126"/>
	<input type="text" value="Gainesville, FL 32610-0126"/>

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

Primary Site:

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

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.**

Simon Swift
Meg Sleeper
Michael Aherne

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

Meg Sleeper - Cardiology
Simon Swift - ECEIM-Cardiology
Michael Aherne - 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

Gabriel Garcia - Neurology
Sheila Carrera-Justiz - Neurology
Kirsten Cooke - SAIM
Alexander Gallagher - SAIM
Richard Hill - SAIM
Sandra Bechtel - Oncology
Anna Szivek - Oncology
Amandine Lejeune - Oncology
Julie Levy - SAIM
Robert MacKay - LAIM
Amanda House - LAIM
Martha Mallicote - LAIM
Rowan Milner - Oncology
Chris Sanchez - LAIM
Diego Gomez-Nieto - LAIM
Michael Schaer - SAIM
Carlos Souza - Oncology
Andrew Specht - SAIM
Allison O'Kell - 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) *

Monica Tschosik 7.15.15 - 7.14.19 (Simon Swift)
(Camden Rougen - 3yr program)
(Sara Rosen - 3 yr program)

* **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: February 13, 2018

Program Director Name: Dr Simon Swift

(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): University of Florida

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
Jeff Abbott	Gross Pathology	
William Craft	Gross Pathology	
Julia Conway	Gross Pathology	
Lisa Farina	Gross Pathology	
Michael Dark	Gross Pathology	
Serena Craft	Gross pathology	
Pamela Ginn	Dermatopathology	
Sarah Beatty	Clinical Pathology	
Mary Leissing	Clinical Pathology	
Matthew Williams	Clinical Pathology	
Salvatore Frasca	Gross Pathology	
Robert Ossiboff	Gross Pathology	

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
Matthew Winter	Dr Winter works one day per week at UF
Erin Porter	
Aitor Menoyo	

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
Rosanna Marsella	Dermatology	
Dunbar Gram	Dermatology	
Domenico Santoro	Dermatology	
Gary Ellison	Soft tissue surgery	
Brad Case	Soft tissue surgery	
Dan Lewis	Orthopedic surgery	

Stan Kim	Surgery	
Matthew Johnson	Surgery	
Marina McConkey	Surgery	
Penny Regier	Surgery	
Caryn Plummer	Ophthalmology	
David Whitley	Ophthalmology	
Ralph Hamor	Ophthalmology	
Fernando Garcia-Pereira	Anesthesiology	
Luisito Pablo	Anesthesiology	
Alanna Johnson	Anesthesiology	
Bonnie Gatson	Anesthesiology	
Diego Portela	Anesthesiology	
Marta Romano	Anesthesiology	
Gareth Buckley	Emergency/CC	
Ashley Allen	Emergency/CC	
Travis Lanaux	Emergency/CC	
Bobbi Connor	Emergency/CC	
Andy Carver	Emergency/CC	
Leo Londono	Emergency/CC	
Margo MacPherson	Theriogenology	
Margo Pozor	Theriogenology	
Audrey Kelleman	Theriogenology	
Carlos Risco	Theriogenology	
Richard Hill	Clinical nutrition	
Justin Shmalberg	Clinical nutrition	

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.

We hold weekly meetings for journal club. Every two weeks we have resident teaching rounds. We also attend catheter or surgery conference weekly at Shands pediatric heart hospital.

- 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]

Once weekly cardiology book review occurs for one hour. This includes texts on physiology, pathophysiology of heart disease, pharmacology etc. Residents also attend weekly pediatric cardiac interventional rounds and monthly cardiac surgical rounds in Shands Congenital Heart Center. Residents are provided the funding to attend a human heart conference or a two week externship at another institution.

- 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.

All residents at the University of Florida are required to submit a grant proposal (either internally or externally), complete a research project (retrospective or prospective) and are required to present at ACVIM as well as internally within our college at the Phi Zeta research day in order to complete the 3 year residency program. Presentation at other meetings is also expected and has been done by most of our previous and current residents. In addition, a two week statistics course is completed by the resident during their first six months.

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"/>	
b) Ultrasonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c) Echocardiography equipment [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d) Cardiac catheterization capability [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e) Endoscopy equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
GI equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Bronchoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Cystoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Rhinoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Laparoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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"/>	
g) Serum osmolality measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
h) Colloid oncotic pressure measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i) Electrocardiography [must be on-site]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
j) Blood Pressure Measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
k) Electroencephalography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
l) Electromyography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
m) Brainstem Auditory Evoked Response Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
n) Nuclear Medicine [access is desirable]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o) Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
p) Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
q) Radiation Therapy Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
r) Veterinary Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
s) Computerized Medical Records w/Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
t) Medical Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
u) Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
v) Urethral pressure profile & cystometrography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
w) Hemodialysis capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
x) Total parenteral nutrition capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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.

Not applicable

6. Total Cardiology caseload per year:	1,000
Number of cardiac catheterizations per year:	30 - 40
Number of echocardiographic examinations per year:	750

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)
Brandon Pogue	07/15/2009	07/14/2012	Yes
Ashley Jones	07/15/2011	07/14/2014	Yes
Ivan Sosa	07/15/2013	07/14/2016	Yes

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 CRTc, 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)
Monica Tschosik	07/15/2015	07/14/2019	Simon Swift
Camden Rouben	03/05/2017	03/04/2020	Simon Swift
Sara Rosen	07/15/2018	07/14/2021	Simon Swift

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)
Monica Tschosik	07/15/2015	07/24/2019	Simon Swift

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

Yes No

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

The program has become a 4 year project to allow our resident to have increased academic exposure as she has expressed an interest in an academic career. She has applied for and been awarded a T32 grant. During the program, she will complete a total of 26 months of direct supervision by a diplomate in cardiology. She will also be on call for emergencies overnight and at weekends 50% of the time. The remaining time will include holiday, externship, study and board preparation time as well as an intensive research commitment. She will join Dr Byrne's laboratory and be involved in stem cell work looking at treating Pompe's disease. Dr Byrne is the director of the UF Powell Gene Therapy Center and Professor of pediatrics, molecular genetic and microbiology. The project involves using a recombinant virus vector constructed from adeno associated virus.

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?

Not applicable

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:

Not applicable

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:

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:

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

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:

We encourage our residents to visit at least 2 other universities for 1 - 2 week visits during their 2nd and 3rd years of training in order to help them with networking and also to expose them to different types of cardiology practice. Residents are given funds included in their salary and are also paid an emergency call fee. These funds were developed to help pay for conferences and secondary supplemental outside experiences.

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 Diplomate and the resident are on the clinic floor interactively, and concurrently managing cases. The Diplomate 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.

Our resident will be on clinical service 50% of their 4 year residency. All clinic time is under direct supervision of a diplomate and case discussion is encouraged. The remaining 50% is for study and research time as well as attendance at conferences and holiday.

8. Please provide an outline of a typical weekly schedule

Monday, Tuesday, Thursday and Friday
8.00 - 9.00 Book chapter review, ECG rounds, research rounds, M and M rounds, small animal medicine seminars
9.00 - 17.0 Clinic receiving with supervising Diplomate and students. Patient evaluations, discharges and in-house consultations
17.00 - 18.00 Service rounds
Wednesday
7.30 - 8.30 Catheterization and patient management rounds in the pediatric hospital
9.00 - 10.00 Journal club
10.00 - 14.00 Interventional procedures
14.00 - 17.00 Patient evaluations and in-house consultations
17.00 - 18.00 Service rounds

Name of Residency Training Program:

University of Florida

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
- 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 the above information is an accurate reflection of this Residency Training Program.