



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="(215) 898-6439"/>
E-mail:	<input type="text" value="maoyama@upenn.edu"/>
Mailing Address:	<input type="text" value="MJR-VHUP-Cardiology"/>
	<input type="text" value="3900 Delancey St"/>
	<input type="text" value="Philadelphia, PA 19104"/>

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.**

Anna Gelzer
Marc Kraus
Mark Oyama

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

James Buchanan - Cardiology
Anna Gelzer - Cardiology
Marc Kraus - Cardiology
Mark Oyama - 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

Mary Beth Callan - SAIM
Kenneth Drobotz - SAIM
Rebecka Hess - SAIM
Charles Vite - Neurology
Nicola Mason - SAIM
Oliver Garden - SAIM
Mark Rondeau - SAIM
Ariel Mosenco - SAIM
Kathryn McGonigle - SAIM
Pascale Salah - Oncology
James Perry - Oncology
Evelyn Galban - Neurology
Jennifer Mahoney - Oncology
Leontine Benedicenti - Neurology
Jonathan Wood - Neurology

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) *

Megan Poad 7.15.16 - 7.14.19 (Mark Oyama)
Alex Crooks 7.15.17 - 7.14.20 (Mark Oyama)
Eva Larouche-Lebel 7.15.18 - 7.14.21 (Mark Oyama)

*** 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

**RESIDENCY TRAINING PROGRAM REGISTRATION
2018-2019
CARDIOLOGY**

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
Amy Durham	Gross	
Elizabeth Mauldin	Gross	
Michael Goldschmidt	Gross	
Nicole Weinstein	Clinical	
Tom Van Winkle	Gross	
Madhu Sirivleu	Clinical	
Charles Bradley	Gross	
Elizabeth Buza	Gross	

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
Wil Mai Jantra Suran Ana Caceres Yael Por Lili Duda	Radiation Oncology

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
Sue Volk	Surg	
Deb Silverstein	ECC	
Jeff Runge	Surg	
Kathryn Michel	Nutrition	

Cindy Otto	ECC	
Erica Reineke	ECC	
Ken Drobatz	ECC	
David Holt	Surg	
Kim Agnello	Surg	
Lilly Aronson	Surg	
Margret Casal	Repro	
Dan Morris	Derm	
Christine Cain	Derm	
William Beltran	Ophth	
Giacomo Giannotti	Anes	
Elaine Holt	Ophth	
Michael Mison	Surg	
Dana Clarke	ECC	
Lori Waddel	ECC	
Brady Beale	Ophth	
Ciara Barr	Anes	
Monique Pare	Anes	
Jennifer Huck	Surg	

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.

Weekly journal club

- 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]

Weekly didactic resident rounds on a variety of rotating topics

- 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.

Residents submit grant proposals, present scientific abstracts, and complete a retrospective or prospective clinical research project

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 type="checkbox"/>	<input type="checkbox"/>	Unknown
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"/>	
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.

Nuclear medicine available at the large animal hospital located at New Bolton Center

6. Total Cardiology caseload per year:	1450
Number of cardiac catheterizations per year:	20
Number of echocardiographic examinations per year:	1100

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)
---------	------------------------------------	----------------------------------	------------------------------

Chloe Thorn	Jul 2013	Jul 2017	Y
Melanie Hezzell	Jul 2012	Jul 2016	Y
Danielle Laughlin	Jul 2012	Jul 2015	Y
Maggie Machen	Jul 2011	Jul 2014	Y

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 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(s) (first/last)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	Resident Advisor Name(s) (first/last)
Eva Larouche-Lebel	07/15/2018	07/14/2021	Mark Oyama
Alex Crooks	07/15/2017	07/14/2020	Mark Oyama
Megan Poad	07/15/2016	07/14/2019	Mark Oyama

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.



American College of Veterinary Internal Medicine

RESIDENCY TRAINING PROGRAM REGISTRATION
2017-2018
CARDIOLOGY

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: 1/18/2018

Program Director Name: Mark Oyama

Name of Sponsoring Institution (Residency Training Program): University of Pennsylvania

(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.

Table with 4 columns: Resident Name (first/last), Program Start Date (mm/dd/yyyy), Program End Date (mm/dd/yyyy), ACVIM Cardiology Resident Advisor (first/last). Row 1: Alex Crooks, 07/15/2017, 07/14/2020, Mark Oyama

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

Yes No
[X] []

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

[Empty text box for explanation]

- 3. Advanced Degree:

Table with 4 columns: Degree, Yes, No, Required. Rows: Masters, PhD

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

[Empty text box for graduate work time]

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. ACVIM Research Requirement:

Please describe how this trainee will satisfy the research requirements outlined in Part 1.9 of the Residency application (GIG D.2.d). Progress towards this requirement should be updated annually in the renewal application. Documentation of successful completion of the research requirement will need to be included in the form letter provided by the advisor that confirms the candidate's completion of this requirement. This letter should be submitted with the Resident Logs to the Residency Training Committee in the final year of their program.

Dr. Crooks will have designed and submitted a research project for internal or external grant funding and will complete a prospective research project that is supervised by her resident advisors.

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 GIG E.1.a.4 for a listing of definitions related to training programs including active (direct) supervision. See GIG D.2.d]

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 Diplomate when appropriate. [See GIG E.1.a.4.]

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 checked="" type="checkbox"/>

Briefly describe any secondary site supplemental outside experiences:

Dr. Crooks will have an opportunity to do a 7-14 day off site externship at another cardiology program but this is an optional experience

7. Please provide a description of how the required one hundred fifty (150) hours of cardiology focused structured educational experiences will be met or exceeded. [See GIG E.g.1]

Residents participate in dedicated didactic resident rounds led by their resident advisors and supervising diplomates.

8. 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 GIG D.2.f and E.1.a.3 for definitions related to training programs including active (direct) supervision.]

Definitions from D.2.f:

Direct Supervision: The Supervising Diplomate and resident are participating in a clinical practice in which both the Diplomate and the resident are on duty interactively and concurrently managing cases. The Diplomate need not personally examine each patient seen by the resident, but must remain physically available for consultation.

Indirect Supervision: The Supervising Diplomate and resident, although participating in a clinical practice together, are not on duty simultaneously and so are not concurrently managing cases. To qualify as Indirect Supervision, the Supervising Diplomate(s) is required to have face-to-face contact with the resident for at least one (1) hour per day for four (4) days per week.

Residents receive at least 24 months of direct supervision during their program. Their resident advisor or supervising cardiologist are simultaneously on duty and interactively and concurrently managing cases. Residents are on such clinical duty 4 days a week during the entirety of their 36 month residency program (minus 14 days of vacation and 10 weeks off for studying for boards).

9. Please provide an outline of a typical weekly schedule

Mon/Weds/Tues/Fri: student rounds 9-10am (except Weds), outpatient receiving 10-12pm (11-1pm on Tues), case work ups 12-3:30pm, student rounds 3:30-4:30, paperwork etc 4:30-6:00. Residents simultaneously handle in house consults during the weekdays. Thurs: reading day where resident studies, performs research. Weds AM 8-9am: pathology/angiography rounds with Dr Jim Buchanan DACVIM and emeritus professor followed by journal club 9-10am. Tues 10-11am: resident didactic rounds with faculty.

Name of Residency Training Program:

University of Pennsylvania, 3-year ACVIM cardiology residency program

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.

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



American College of Veterinary Internal Medicine

RESIDENCY TRAINING PROGRAM REGISTRATION
2017-2018
CARDIOLOGY

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: 1/18/2018

Program Director Name: Mark Oyama

Name of Sponsoring Institution (Residency Training Program): University of Pennsylvania

(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.

Table with 4 columns: Resident Name (first/last), Program Start Date (mm/dd/yyyy), Program End Date (mm/dd/yyyy), ACVIM Cardiology Resident Advisor (first/last). Row 1: Eva Larouche-Lebel, 07/15/2018, 07/14/2021, Mark Oyama

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

Yes No
[X] []

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

3. Advanced Degree:

Table with 4 columns: Degree, Yes, No, Required. Rows: Masters, PhD

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. ACVIM Research Requirement:

Please describe how this trainee will satisfy the research requirements outlined in Part 1.9 of the Residency application (GIG D.2.d). Progress towards this requirement should be updated annually in the renewal application. Documentation of successful completion of the research requirement will need to be included in the form letter provided by the advisor that confirms the candidate's completion of this requirement. This letter should be submitted with the Resident Logs to the Residency Training Committee in the final year of their program.

Dr. Larouche-Lebel will have designed and submitted a research project for internal or external grant funding and will complete a prospective research project that is supervised by her resident advisors.

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 GIG E.1.a.4 for a listing of definitions related to training programs including active (direct) supervision. See GIG D.2.d]

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 GIG E.1.a.4.]

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 checked="" type="checkbox"/>

Briefly describe any secondary site supplemental outside experiences:

Dr. Larouch-Lebel will have an opportunity to do a 7-14 day off site externship at another cardiology program but this is an optional experience

7. Please provide a description of how the required one hundred fifty (150) hours of cardiology focused structured educational experiences will be met or exceeded. [See GIG E.g.1]

Residents participate in dedicated didactic resident rounds led by their resident advisors and supervising diplomates.

8. 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 GIG D.2.f and E.1.a.3 for definitions related to training programs including active (direct) supervision.]

Definitions from D.2.f:

Direct Supervision: The Supervising Diplomate and resident are participating in a clinical practice in which both the Diplomate and the resident are on duty interactively and concurrently managing cases. The Diplomate need not personally examine each patient seen by the resident, but must remain physically available for consultation.

Indirect Supervision: The Supervising Diplomate and resident, although participating in a clinical practice together, are not on duty simultaneously and so are not concurrently managing cases. To qualify as Indirect Supervision, the Supervising Diplomate(s) is required to have face-to-face contact with the resident for at least one (1) hour per day for four (4) days per week.

Residents receive at least 24 months of direct supervision during their program. Their resident advisor or supervising cardiologist are simultaneously on duty and interactively and concurrently managing cases. Residents are on such clinical duty 4 days a week during the entirety of their 36 month residency program (minus 14 days of vacation and 10 weeks off for studying for boards).

9. Please provide an outline of a typical weekly schedule

Likely schedule: subject to change once Dr. Larouche Lebel begins in summer 2018: Mon/Weds/Tues/Fri: student rounds 9-10am (except Weds), outpatient receiving 10-12pm (11-1pm on Tues), case work ups 12-3:30pm, student rounds 3:30-4:30, paperwork etc 4:30-6:00. Residents simultaneously handle in house consults during the weekdays. Thurs: reading day where resident studies, performs research. Weds AM 8-9am: pathology/angiography rounds with Dr Jim Buchanan DACVIM and emeritus professor followed by journal club 9-10am. Tues 10-11am: resident didactic rounds with faculty.

Name of Residency Training Program:

University of Pennsylvania, 3-year ACVIM cardiology residency program

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.

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



American College of Veterinary Internal Medicine

RESIDENCY TRAINING PROGRAM REGISTRATION
2017-2018
CARDIOLOGY

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: 1/18/2018

Program Director Name: Mark Oyama

Name of Sponsoring Institution (Residency Training Program): University of Pennsylvania

(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.

Table with 4 columns: Resident Name (first/last), Program Start Date (mm/dd/yyyy), Program End Date (mm/dd/yyyy), ACVIM Cardiology Resident Advisor (first/last). Row 1: Megan Poad, 07/15/2016, 07/14/2019, Mark Oyama

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

Yes [X] No []

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

[Empty text box for explanation]

- 3. Advanced Degree:

Table with 4 columns: Degree, Yes, No, Required. Row 1: Masters: [], [X], [], []. Row 2: PhD: [], [X], [], []

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

[Empty text box for graduate work time]

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. ACVIM Research Requirement:

Please describe how this trainee will satisfy the research requirements outlined in Part 1.9 of the Residency application (GIG D.2.d). Progress towards this requirement should be updated annually in the renewal application. Documentation of successful completion of the research requirement will need to be included in the form letter provided by the advisor that confirms the candidate's completion of this requirement. This letter should be submitted with the Resident Logs to the Residency Training Committee in the final year of their program.

Dr. Poad will have designed and submitted a research project for internal or external grant funding and will complete a prospective research project that is supervised by her resident advisor.

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 GIG E.1.a.4 for a listing of definitions related to training programs including active (direct) supervision. See GIG D.2.d]

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 GIG E.1.a.4.]

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 checked="" type="checkbox"/>

Briefly describe any secondary site supplemental outside experiences:

Dr. Poad will have an opportunity to do a 7-14 day off site externship at another cardiology program but this is an optional experience

7. Please provide a description of how the required one hundred fifty (150) hours of cardiology focused structured educational experiences will be met or exceeded. [See GIG E.g.1]

Residents participate in dedicated didactic resident rounds led by their resident advisors and supervising diplomates.

8. 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 GIG D.2.f and E.1.a.3 for definitions related to training programs including active (direct) supervision.]

Definitions from D.2.f:

Direct Supervision: The Supervising Diplomate and resident are participating in a clinical practice in which both the Diplomate and the resident are on duty interactively and concurrently managing cases. The Diplomate need not personally examine each patient seen by the resident, but must remain physically available for consultation.

Indirect Supervision: The Supervising Diplomate and resident, although participating in a clinical practice together, are not on duty simultaneously and so are not concurrently managing cases. To qualify as Indirect Supervision, the Supervising Diplomate(s) is required to have face-to-face contact with the resident for at least one (1) hour per day for four (4) days per week.

Residents receive at least 24 months of direct supervision during their program. Their resident advisor or supervising cardiologist are simultaneously on duty and interactively and concurrently managing cases. Residents are on such clinical duty 4 days a week during the entirety of their 36 month residency program (minus 14 days of vacation and 10 weeks off for studying for boards).

9. Please provide an outline of a typical weekly schedule

Mon/Weds/Thur/Fri: student rounds 9-10am (except Weds), outpatient receiving 10-12pm, case work ups 12-3:30pm, student rounds 3:30-4:30, paperwork etc 4:30-6:00. Residents simulataneously handle in house consults during the weekdays. Tues: reading day where resident studies, performs research. Weds AM 8-9am: pathology/angiography rounds with Dr Jim Buchanan DACVIM and emeritus professor followed by journal club 9-10am. Tues 10-11am: resident didactic rounds with faculty.

Name of Residency Training Program:

University of Pennsylvania, 3-year ACVIM cardiology residency program

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.

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