

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 Neurology 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 Neurology 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 that include multiple sites must provide detailed information regarding supervision and facilities available at each specific site(s). Multi-site programs, if any, are listed in Part Two.

Program Director Name :

(Must be a Diplomate of ACVIM in the Specialty of Neurology or an approved Diplomate of the European College of Veterinary Neurology)

Program Director's Contact Information:

Work Phone:	<input type="text" value="(972) 820-7099"/>
E-mail:	<input type="text" value="jducote@cvsecvet.com"/>
Mailing Address:	<input type="text" value="2700 Lake Vista Drive"/>
	<input type="text" value="Lewisville, TX 75067"/>

1. Location of Sponsoring Institution (Primary Site of Training Program):

Primary Site and Length of Program:

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

2. Resident Advisor(s): Must be a Diplomate of ACVIM in the Specialty of Neurology or a Diplomate of ECVN.

[Julie Ducote](#)

3. Supervising Diplomates in Neurology: Must be a Diplomate of ACVIM in the Specialty of Neurology or a Diplomate of ECVN.

[Julie Ducote - Neurology](#)
[Susan Hollman - Neurology](#)
[Katheryn Wolfe - Neurology](#)

4. All Diplomates of ACVIM or ECVIM responsible for supervision of clinical training who are specialists in areas other than Neurology.

[Keven Gulikers - SAIM](#)
[Valerie Case - SAIM](#)

5. 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.

Resident Name, Dates of Program, (Resident Advisor)
Benjamin Williams 7.1.2016-6.30-2019 (Julie Ducote)
Barbara Lindsay 7.1.17 - 6.30.20 (Julie Ducote)

Please note, any Program Director or 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



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

Part Two

Part Two of the Neurology Residency Training renewal process addresses general features of the program that apply to all current residents. These questions will be used to provide the Residency Training Committee with information needed to judge the structure, quality, scope, and consistency of training provided.

Current Date:

Program Director Name:

(Must be a Diplomate of ACVIM in the Specialty of Neurology or an approved Diplomate of the European College of Veterinary Neurology)

Name of Sponsoring Institution (Residency Training Program):

1. For multi-site residency programs: To ensure uniformity of training and compliance with current Certification Manual (CM) requirements, training programs that include multiple sites must provide detailed information regarding supervision and facilities available at each specific site(s).

Secondary Site/Outside Rotations (if applicable):

(Please include the following for each site: Supervising Diplomate (ACVIM or other specialty), amount of time scheduled at the site and training requirements to be met.

[Animal Imaging](#)
6112 Riverside Dr.
Irving, TX 75039
972-869-2180
www.animalimaging.net
Rita Echandi, DVM, DACVR
Monthly Neuroradiology rounds hosted; two weeks Radiology training

[Oklahoma State University](#)
Veterinary Teaching Hospital
Stillwater, OK 74078-2041
405-774-7000
www.cvhs.okstate.edu
Jerry Ritchey, DVM, DACVP
80 hours clinical pathology

[Department of Veterinary Small Animal Clinical Sciences](#)

College of Veterinary Medicine
 Texas A & M University
 4474-TAMU
 College Station, TX 77843-4474
 979-845-2351
www.cvm.tamu.edu/vscs/
 Brian Porter, DVM, DACVP
 12 hours in neuropathology

Texas Veterinary Medical Diagnostic Laboratory
 1 Sippel Rd.
 College Station, TX 77843
 979-845-3414
<http://tvmdl.tamu.edu/>
 Barbara Lewis, DVM, DACVP
 80 hours in neuropathology

2. Length of Training Program:

	Yes
2 years	<input type="checkbox"/>
3 years	<input checked="" type="checkbox"/>
Other -provide details	

3. Advanced Degree:

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

Briefly explain how the degree is integrated into the residency program:

4. Please list all ACVIM Supervising **Diplomates** (Cardiology, Large Animal Internal Medicine, Neurology, Oncology, Small Animal Internal Medicine, ECVIM, or ECVN Diplomates) providing supervision off-site and explain the situation and the agreements provided for contact with the resident. (Note, in Part One, current ACVIM Supervising Diplomates are included; and you are requested to provide additional comments for off-site supervision here).

Name of Diplomat(e)s	Comments

5. Please list all **Diplomates** of the American College of Veterinary Pathology or the European College of Veterinary Pathologists 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 Diplomat(e)s	Clinical or Gross	Comments
Jerry Ritchey DVM, DACVP	Both	Oklahoma State University

Brian Porter, DVM, DACVP	Gross	<p>Veterinary Teaching Hospital Stillwater, OK 74078-2041 405-774-7000 www.cvhs.okstate.edu Jerry Ritchey, DVM, ACVP 80 hours clinical pathology</p> <p>Department of Veterinary Small Animal Clinical Sciences College of Veterinary Medicine Texas A & M University 4474-TAMU College Station, TX 77843-4474 979-845-2351 www.cvm.tamu.edu/vscs/ Brian Porter, DVM, DACVP 12 hours in neuropathology</p>
Barbara Lewis, DVM, DACVP	Gross	<p>Texas Veterinary Medical Diagnostic Laboratory 1 Sippel Rd. College Station, TX 77843 979-845-3414 http://tvmdl.tamu.edu/ Barbara Lewis, DVM, DACVP 80 hours in neuropathology</p>

6. Please list all **Diplomates** of the American College of Veterinary Radiology or the European College of Veterinary Diagnostic Imaging 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
Rita Echandi, DVM, DACVR Beth Biscoe, DVM, DACVR Dana Neelis, DVM, DACVR	<p>Animal Imaging 6112 Riverside Dr. Irving, TX 75039 972-869-2180 www.animalimaging.net Rita Echandi, DVM, DACVR Monthly Neuroradiology rounds hosted; four weeks Radiology training</p>

7. Please list all **Diplomates** available for consultation in the areas of dermatology, surgery, ophthalmology, anesthesiology, emergency/critical care, clinical nutrition, clinical pharmacology, behavior, 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
Jennifer Mahon, DVM, DACVECC	Emergency / Critical Care	onsite
John Warren, DVM, DACVO	Ophthalmology	<p>Veterinary Eye Institute 10225 Custer Rd. Plano, TX 75025 available for phone consultation and neuro-</p>

Carrie Davis, DVM, ACVA	Anesthesia	ophthalmology rounds Animal Imaging 6112 Riverside Dr. Irving, TX 75039 972-869-2180 (in person or by phone)
Erin Corbin, DVM, ACVS	Surgery	VCA Metroplex Animal Hospital 700 W. Airport Fwy Irving, TX 75062 972-438-7113 (in person or by phone)

8. Please list the residents who have completed the training program within the last five years, including the year that each individual's training program ended and whether the individual has completed the Board certification process.

Name(s)	Program End Date (mm/dd/yyyy)	Diplomate? (Yes or No)
Robert Rushing, DVM, DACVIM (Neurology)	6/30/2013	YES

9. 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.

Resident Name(s) (first/last)	Length of Program (in years)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	Resident Advisor Name(s)
Benjamin Williams, DVM	3	7/1/2016	6/30/2019	Julie Ducoté
Barbara Lindsay, BSc, BVMS	3	7/1/2017	6/30/2020	Julie Ducoté

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.

10. Is this a traditional or non-traditional residency training program? A traditional neurology residency is a two (2) or three (3) year postgraduate training program, with a minimum of ninety six (96) weeks of supervised clinical training with a majority of the time spent at one location. A non-traditional neurology residency allows for training that may occur in non-contiguous blocks of time over an extended time period.

Traditional	<input checked="" type="checkbox"/>
Non-traditional	<input type="checkbox"/>

For non-traditional programs, please provide a detailed description of the residency program, including length of program, proposed annual schedule, and the amount of time of direct Diplomate supervision for each location of the residency.

11. The ACVIM Neurology Certification Manual (CM) requires that each resident experience 75 weeks (minimum) of clinical Neurology training under the supervision of either a Diplomate of ACVIM in the Specialty of Neurology or a Diplomate of ECVN. **The 75 weeks should include at least 50 weeks of direct supervision (see definition in CM) and the remainder as indirect supervision (indirect supervision is satisfied by the Supervising Diplomate Neurologist being available for face-to-face contact with the resident at least 4 days per week).**

Please provide an outline of planned yearly schedule, including number of weeks of direct and indirect supervision (i.e. in year 1, the resident will be directly supervised for 25 weeks etc.) A table similar to the example below outlining the proposed weekly schedule of duties for the residents should be provided:

EXAMPLE TABLE ONLY:

	Year I	Year II	Year III
Medical Neurology *			
Neurosurgery			
Neurology/Neurosurgery Direct Supervision	36	36	
Neurology/Neurosurgery - Indirect Supervision			34
Internal Medicine	4	2	2
Clinical Pathology	2		
Radiology	2		
Neuropathology		2	2
Other Rotation (please list the name of each rotation)			
_____		1	
_____	2	4	4
Research	4	5	8
Independent Study			
Vacation	2	2	2
Total	52	52	52

Numbers indicated are in “weeks”.

* Many residencies are a combined neurology / neurosurgery program with no distinct separation between the services. Some programs, however, have separate training with a surgery service and this example includes that possibility in describing the weekly rotations.

The example table is only a listing of a proposed weekly schedule for each of the three years of a typical 3-year residency program, including all that is required by ACVIM without making any specific recommendations.

Please indicate the outline of planned yearly schedule here:

	Year I	Year II	Year III
Medical Neurology *			
Neurosurgery			
Neurology/Neurosurgery - Direct Supervision	34	26	38
Neurology/Neurosurgery - Indirect Supervision		1	1
Internal Medicine		4	8
Clinical Pathology		2	
Radiology	2	2	

Neuropathology	2		
Other Rotation (please list the name of each rotation):			
Other: Surgery	4	2	
Other: Neurosciences course (brain camp), ACVIM Forum and exam		1	3
Research	4	4	4
Independent Study		4	4
Vacation	2	2	2
Total *	52	52	52

*The totals should add up to 52 weeks.

12. Describe how daily clinical case rounds are conducted and supervised:

Clinical case rounds at 7:45 am and 6 pm every day

13. The neurology specialty requires that the resident spend at least 50 hours during the residency in the following rotations: Radiology, Clinical Pathology, Neuropathology and Neurosurgery. A Training Agreement Form must be completed and signed by the Diplomate supervising the required training, regardless of whether the training occurs on site or off-site. **Please use the standardized “Training Agreement Form” found on the ACVIM website (www.ACVIM.org) to document proof of supervision for all required contact hours (clinical pathology, radiology, neuropathology surgery, etc.) in rotations other than neurology.** 1 Training Agreement form is required per rotation per resident at the beginning of the residency. Forms do not need to be resubmitted each year as long as a valid Training Agreement Form is on file.

In addition, please provide a brief description of how each phase of this required training is accomplished.

Radiology: 50 hours with a Board-certified radiologist interpreting radiographs, attending seminars and participating in and evaluating the results of special radiographic procedures.

The resident will spend two weeks (90 hours) in a clinical rotation with Dr. Rita Echandi during the first year and 2 weeks (90 hours) during the second year. The resident will also have daily contact by phone or email, with Dr. Echandi and participate in evaluating imaging on clinical cases.

Clinical Pathology: 50 hours with a Board-certified pathologist or clinical pathologist evaluating clinical pathologic findings, attending clinicopathologic conferences, and examining surgical sections.

The resident will spend two weeks (90 hours) in a clinical rotation with Dr. Jerry Ritchey (board certified pathologist, Oklahoma State University) during the second year of the residency.

Neuropathology: 50 hours devoted to review of veterinary neuropathology. This time may be spent in lecture series, seminars, or a formal training program recognized and approved by the college.

The resident will spend two weeks (90 hours) in a clinical rotation with Dr. Barbara Lewis (board certified pathologist, Texas Veterinary Medical Diagnostic Laboratory) during the first year of the residency. The resident will also spend 12 hours in a lecture series given by Dr. Brian Porter (board certified pathologist, Texas A & M),

during the first year of the residency.

Neurosurgery: 50 hours participating in veterinary neurosurgical procedures. Please provide a specific description of the type of participation [i.e. observation, performance of neurosurgery], and credentials of those providing the training [i.e. ACVS vs. ACVIM Neurology]. A Training Agreement Form must be completed if this training is provided by individuals other than the ACVIM (Neurology) or ECVN supervising Diplomate for the residency training program.

The resident will be required to assist or act as primary surgeon for neurosurgical procedures. As assistant or primary surgeon, the resident will be under the direct supervision of Julie M. Ducoté or Susan Hollman. Medical Neurology and Neurosurgery are not separate departments, but are run as a single service within our hospital.

Julie M. Ducoté, DVM is a Diplomate of the College of Neurology since 2001, and completed a residency that included training in and performing neurosurgery (Texas A & M 1997-2000, under the mentorship of Curtis Dewey and Joan Coates). She has been performing neurosurgery since that time. Her practice includes approximately 4-6 neurosurgical cases per week (>200 per year). Dr. Ducoté has attended the Advanced Techniques in Neurosurgery course, and holds the certificate for Neurosurgery.

Susan Hollman, DVM is a Diplomate of the College of Neurology since 2012, and completed a residency that included training in neurosurgery, under the mentorship of Dr. Don Levesque. She has been performing neurosurgery since the beginning of her residency (2008).

14. The neurology specialty requires that the resident be able to perform and interpret current electrodiagnostic procedures. Briefly state how the concepts of electrodiagnostics (including EEG) and their clinical application will be taught to residents during the training program. Specifically state whether or not the resident will have hands-on electrodiagnostics experience:

The resident will be required to perform and interpret electrodiagnostic procedures on clinical patients, under the supervision of Julie M. Ducoté, DVM, ACVIM (Neurology) or Susan Hollman, DVM, ACVIM (Neurology).

These doctors' training programs have each been described above. These residency programs all included training in the concepts, performance and interpretation of electrodiagnostics, including EEG.

15. The college requires that the resident spend a minimum of 80 hours involved in routine and regular participation in a critical review of the literature (e.g. journal club) during the residency training program. Please explain how this requirement is met:

Journal club rounds will be held for 2 hours per week, under the supervision and direction of one of Julie M. Ducoté, DVM, Susan Hollman, DVM, or one of the other specialist clinicians in our hospital.

16. The neurology specialty requires that the advisor meet with the resident at 6 month intervals to assess, review and critique the resident's progress and weekly schedule of activities. Please explain how this is accomplished:

The resident will meet with the advisor once every six months for this face to face review, and will also receive a written performance evaluation at that time.

17. The neurology specialty requires that the resident complete a significant research or clinical investigative project. Please describe how you plan for the resident to undertake, monitor, and complete a project. Include a timeline that the resident and mentor will use as a guide for completion of the project. Note that publication of this research project is not a requirement.

With supervision and assistance from advisor, the resident will develop a clinical research project. Some funds (\$5000) will be available to support this project. If additional funding is needed, a source for this will need to be identified (e.g. ACVIM Foundation grant). This may be a prospective clinical trial or a retrospective study. A case report will not satisfy this requirement. This project should be planned and funded by the end of the first year, completed by the end of the second year, and prepared for publication by Dec. 31 of the third year. If the resident fails to complete the research project, he/ she will not be considered to have satisfactorily completed the requirements of the residency.

18. Please indicate the availability of the following facilities or equipment. Indicate if these are available 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. Please also provide the manufacturer and model of the unit for electrodiagnostic and imaging equipment.

	Available?		Location of equipment?
	Yes	No	(On-site or list site name)
a) Standard radiological equipment	X	<input type="checkbox"/>	Cuatro DR system on site
b) Ultrasonographic equipment	X	<input type="checkbox"/>	MyLab 50 on site
c) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)	X	<input type="checkbox"/>	Heska on site, Antech off
d) Electrocardiography	X	<input type="checkbox"/>	GE MAC 1200 on site
e) Blood Pressure Measurement	X	<input type="checkbox"/>	Doppler on site
f) Radiation Therapy Facility	X	<input type="checkbox"/>	LinAc off site at VSNT
g) Veterinary Library w/Literature Searching Capabilities	X	<input type="checkbox"/>	TAMU Med Sci Library
h) Computerized Medical Records w/Searching Capabilities	X	<input type="checkbox"/>	StringSoft on site
i) Medical Library w/Literature Searching Capabilities	X	<input type="checkbox"/>	TAMU Med Sci Library
j) Electromyography and nerve conduction velocity testing	X	<input type="checkbox"/>	Nicolet Viking on site
k) Evoked Response Equipment	X	<input type="checkbox"/>	Nicolet Viking on site
l) Electroencephalography	<input type="checkbox"/>	X	
m) Computed Tomography	X	<input type="checkbox"/>	GE ProSpeed On site
n) Magnetic Resonance Imaging (include field strength)	X	<input type="checkbox"/>	GE Verio 3T off site at Animal Imaging

If any of the above equipment or facilities is available off-site, please explain how the resident can access them for case management, research, or study, *especially with respect to the use of imaging equipment*:

The Texas A & M Medical Sciences Library provides electronic journal articles at no charge to veterinarians licensed in the state of Texas, and has an extensive collection of veterinary and medical literature.

Animal Imaging is local and within a 10 minute drive of the primary site.

VSNT (Veterinary Specialists of North Texas) is local and within a 15 minute drive of the primary site. A board certified radiation oncologist (Glen King) is on staff, and equipment includes a linear accelerator.

19. Describe the formal conferences, such as clinicopathologic conferences, journal clubs, or seminars that are held on a regular basis. Please provide a description and the typical schedule for these:

Journal club rounds are held once a week.
Topic rounds in neuroanatomy, neurophysiology, neuropathology, clinical neurology, or physiology, are held weekly.

20. Detail the teaching responsibilities expected of the resident during the training program. This may include lectures in departmental courses for veterinary students, grand rounds presentations, presentation of papers or seminars at conferences, or participation in continuing education programs.

The resident is required to give at least one formal presentation to the doctors (including senior clinicians, other residents and interns) and staff of the Center for Veterinary Specialty + Emergency Care, every six months. The resident is also required to occasionally give a formal presentation to local general practitioner veterinarians at continuing education meetings (average of once per year). The resident is involved in teaching and mentoring interns and students during their Neurology rotations.

21. How many major veterinary medical or medical meetings are each resident able to or expected to attend during his/her training program?

None	One	Two	> Two
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Comments: ACVIM Forum in the second year
ACVIM Forum in the third year
Comparative Neurology and Neurosurgery Basic Sciences Course once during the residency program

22. Are one or more publications required as part of the training program?

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

Comments: A publication based on the resident's research project should be prepared for submission by Dec. 31st of the third year. It is hoped that this will be published research, but actual acceptance for publication is not required.

23. Please describe any additional pertinent information that the Residency Training Program should consider in its evaluation of this Training Program.

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

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

Per the Certification Manual, each year, the Program Director (PD) must certify to the RTC/ RTCC and ACVIM, in writing, that they have read the ACVIM Certification Manual and understands their role in residency training.

X Checking this box is an indication I have read the ACVIM Certification Manual and understand my role in the Residency Training Program.