



RESIDENCY TRAINING PROGRAM REGISTRATION  
2018-2019  
NEUROLOGY

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](http://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="(614) 846-5800"/>
E-mail:	<input type="text" value="mathew.lovett@gmail.com"/>
Mailing Address:	<input type="text" value="300 E. Wilson Bridge Road&lt;br/&gt;Worthington, OH 43085"/>

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.

<a href="#">William Fenner</a> <a href="#">Mathew Lovett</a>
---

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

[William Fenner - Neurology](#)  
[Sasha Dixon - Neurology](#)

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

[Lisa Fulton - Oncology](#)  
[Linda Lehmkuhl - Cardiology](#)  
[Erin Malone - Oncology](#)  
[Roger Hostutler - SAIM](#)  
[Thaibinh Nguyenba - Cardiology](#)  
[Stephen Martinez - SAIM](#)  
[Sean Surman - SAIM](#)  
[Ioannis Giatis - Cardiology](#)

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)
---

<a href="#">None</a>
----------------------

**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.

2. Length of Training Program:

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

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
N/A	

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
Stephanie Corn, DACVP (Clinical Pathology)	Clinical	On-site. The first two pathologists work for IDEXX, which has an on-site clinical laboratory with both an anatomic and clinical pathologist in the building.
Mark Chalkley, DACVP (Anatomic Pathology)	Gross	
Mike Oglesbee, DACVP (Anatomic Pathology)	Gross	

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 Diplomat(e)s	Comments
Jonathan Shiroma, DACVR Adam Watson, DACVR	On-site: Both radiologists are full-time staff in our practice. Dr. Watson has a particular interest in both CT and MRI and will take the lead in training neurology residents in imaging. The radiology service has an active radiology residency and the neurology residents will be able to participate in radiology training rounds.

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 Diplomat(e)s	Specialty	Comments
John Gordon, ACVD Natalie Theus, ACVD Robert Dudley, ACVS Matthew Barnhart, ACVS Shawn Kennedy, ACVS Jenn Carr, ACVS Kevin Benjamino, ACVS Terah Webb, ACVO Melissa Clark, DACVCP	Dermatology Dermatology Surgery Surgery Surgery Surgery Surgery Ophthalmology Pharmacology	All are on-site

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)
Mathew C. Lovett	07/01/2013	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)
N/A				

**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.

N/A
-----

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:**

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

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:

	<b>Year I</b>	<b>Year II</b>	<b>Year III</b>
<b>Medical Neurology *</b>			
<b>Neurosurgery</b>			
<b>Neurology/Neurosurgery - Direct Supervision</b>	32	28	24
<b>Neurology/Neurosurgery - Indirect Supervision</b>	5	5	10
<b>Internal Medicine</b>	4	2	0
<b>Clinical Pathology</b>	2	0	0
<b>Radiology</b>	2	0	0
<b>Neuropathology</b>	1	1	1
<b>Other Rotation (please list the name of each rotation):</b>			
<b>Other: Radiation Oncology</b>	1	1	1
<b>Other: Medical Oncology</b> Cardiology	1 0	0 2	0 0
<b>Research</b>	2	4	5
<b>Independent Study</b>	0	7	9

<b>Vacation</b>	2	2	2
<b>Total *</b>	52	52	52

**\*The totals should add up to 52 weeks.**

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

Each morning there will be a review of hospitalized patients, the resident will be expected to present that morning's physical examination findings, any changes in the patient's status from the previous day, and a diagnostic and therapeutic plan for that day to the supervising diplomate for review and correction.

Each evening there will be a review of all patients seen that day, both in-patients and outpatients.

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](http://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.

There are two board certified radiologists at MedVet's Columbus location; Jonathan Shiroma and Adam Watson. Each resident's schedule will be set so that he/she has one day per week as non-clinic days. Those days are spent on an alternating basis between time in research/study and non-clinical rotations. Those days will be arranged so that a resident will spend the equivalent of 2 weeks (ten rotation days) in Radiology, which will include performing procedures (such as myelograms, CT scans, MRI's etc.), reviewing radiographs, ultrasounds, and other imaging studies with the radiologist on duty. This formal time in radiology (consisting of 10 rotation days will provide in excess of the required 50 hours). That time will be in addition to reviewing the imaging results of the neurology service patients with the radiology staff. In addition, a joint enhanced imaging series of seminars are held with the Radiation Oncology service, the Neurology service and the Radiology service to facilitate the training of the residents in all three services. There will be 3 of these presentations a year (9 hours); which will bring his total, structured radiology contact to 89 hours during the residency.

In addition to that formal time, the resident will assist the radiologist in performing neurodiagnostic procedures, such as myelograms and CT scans. There will be rounds on a weekly basis with the radiologist to interpret images collected that week, such as CT scans, MRI studies, etc.

It is estimated there will be approximately 30 - 50 contact hours per year with a radiologist, above and beyond the formal requirements.

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

There is one board certified clinical pathologists at the IDEXX facility (which is next door to the MedVet building); Stephanie Corn. A resident's schedule will set so that he/she has one day a week as non-clinic days. Those days are spent on an alternating basis between research/study time and non-clinical activities. So time will be set so that the resident will spend 4 days as a Clinical Pathology day during their first year. This formal time in Clinical Pathology will spent reviewing current and past cases, reviewing slide sets with the pathologists and their Clinical Pathology resident. In addition, MedVet has a total of 16 hours of formal clinical pathology rounds per year. This will be combined with the rotations, so that each resident will spend the equivalent of 7 days (40 hours) of structured Clinical Pathology contact per year of residency, which is a total of 120 hours (so exceeds the minimum of 50 hours).

Arrangements have been made with the clinical pathologist (Dr. Corn) for the resident to review all CSF cytologies performed during each year with the pathologist during the course 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.

Idexx has an anatomic pathologist (Dr. Mark Chalkley) with a particular interest in neuropathology who is resident in the MedVet facility. Dr. Chalkley will spend time with each resident reviewing a slide set of neuropathology cases. This review will take about 8 hours. In addition, Dr. Chalkley will review the pathology of all biopsies submitted from surgical procedures with the residents. At present, necropsies on neurology patients are performed by The Ohio State University's Veterinary Pathology Department. Dr. Chalkley has a positive relationship with the department and slides of necropsied patients will be available for review by the residents with Dr. Chalkley.

Additionally, each resident will attend neuropathology rounds at The Ohio State University College of Veterinary Medicine, which are held the second Friday of each month. Twice annually, each resident will present cases at these rounds. During the 3 years of the residency, the neuropathology rounds will provide 36 hours of formal pathology rounds (12 hours per year). Each year there is a 4 hour review of neuropathology presented by Dr. Michael Oglesbee which the residents are able to attend.

Each resident will be able to audit the neuropathology lectures presented by Dr. Michael Oglesbee to the graduate students in pathology at The Ohio State University; this is a 10 hour lecture series. In total, each resident will have about 20+ hours of formal, structured neuropathology training in each year of residency, which will exceed the three year requirement of 50 hours.

In addition, the resident will attend the ACVIM Neuroscience review during their residency, which contains a neuropathology review.

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 perform neurosurgical procedures with both the ACVIM Board-certified neurologist at MedVet that has a neurosurgical practice and the ACVS Board-certified surgeons at MedVet, which will include observation, assisting and, during the 2nd and 3rd years of residency, performing neurosurgical procedures at MedVet.

The current ACVS surgical mentors at MedVet are all Board-certified surgeons with extensive neurosurgical experience. One of them, Dr. Kennedy, was trained by Lisa Klopp, DACVIM (Neurology) during his residency. Dr. Jennifer Carr completed her surgical training at Purdue under the mentorship of Dr. Amy Fauber, who is both ACVS and ACVIM (Neurology).

At present, each resident will be expected to assist in a minimum of 6 craniotomies per year (currently Dr. Lovett



performs in excess of 12/year). In the initial year of their residency, the residents will scrub in as assistants in neurosurgical procedures, including routine cervical, thoraco-lumbar, and lumbosacral procedures as well as craniotomies. One of MedVets surgeons has studied disc replacement surgery and those surgeries, although infrequent, are performed at MedVet.. By the middle of their second year of residency, the residents should be performing as lead surgeons with the mentors providing guidance.

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:

Yes, MedVet has Cadwell electrodiagnostic equipment for both EEG and Neuromuscular electrodiagnostics.

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:

The resident has two hours of Journal Club a week. One hour is held jointly with the faculty and residents at OSU and is focused on the current literature. The second hour is held at MedVet and focuses on the neurology specialty reading list, including text books.

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:

There will be a formal meeting every six months. In preparation for this, there will be a progress report solicited from all mentors who have worked with the resident in the preceding six months. In addition, the resident will be asked to complete a self assessment; judging their own progress. This will allow comparison of the resident's perspective on their success with the perspectives of the mentors. At the end of each six month period, the resident will receive a written copy of their evaluation report, which will be signed off on by both resident and Program Director. These will be kept in the residents file and will be available to the RTC or the Credentials Committee if there are questions about the resident's progress or the training program.

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.

MedVet has a director of clinical studies and is engaged in both clinical trials and retrospective clinical studies. The resident will have to submit a research proposal by the date of their first six month review. The resident will be expected to have completed the project by the end of their second year of residency. The resident will be expected to have submitted, or be preparing to submit, the results of their research for publication by their six month review in the third year of residency. Failure to complete the research will be grounds for unsatisfactory completion of the residency and will result in the candidate not receiving a residency certificate; so will be ineligible to attain board certification by ACVIM.

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"/>	On Site
b) Ultrasonographic equipment	X	<input type="checkbox"/>	On Site
c) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)	X	<input type="checkbox"/>	On Site
d) Electrocardiography	X	<input type="checkbox"/>	On Site
e) Blood Pressure Measurement	X	<input type="checkbox"/>	On Site
f) Radiation Therapy Facility	X	<input type="checkbox"/>	On Site
g) Veterinary Library w/Literature Searching Capabilities	X	<input type="checkbox"/>	On Site and at The Ohio State University
h) Computerized Medical Records w/Searching Capabilities	X	<input type="checkbox"/>	On Site
i) Medical Library w/Literature Searching Capabilities	X	<input type="checkbox"/>	The Ohio State University
j) Electromyography and nerve conduction velocity testing	X	<input type="checkbox"/>	On Site (Cadwell Sierra)
k) Evoked Response Equipment	X	<input type="checkbox"/>	On Site (Cadwell Sierra)
l) Electroencephalography	X	<input type="checkbox"/>	On Site (Cadwell Easy II EEG unit)
m) Computed Tomography	X	<input type="checkbox"/>	On Site
n) Magnetic Resonance Imaging (include field strength)	X	<input type="checkbox"/>	On Site – GE 1.5 Tesla

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 Dr. Fenner, DACVIM (Neurology) is an emeritus faculty member at OSU, with continuing library privileges. The campus is 8 miles from the practice.

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:

There is a joint Journal Club with the neurology service at OSU, held once weekly, There are joint Neuropathology Rounds with OSU, held once monthly. There is a comprehensive series of graduate courses taught through the Clinical Sciences Department at OSU that all OSU ACVIM residents must take. These are typically Wednesday and Thursday mornings at 7 AM, some quarters they are Tuesday and Wednesday. These are graded courses. MedVet residents have been allowed to audit those courses. In addition, there are joint journal clubs with the SAIM and Oncology residents/interns at MedVet each week. There are neurology specific book reviews held on a weekly basis.

There are hospital wide Clinicopathology conferences held twice monthly at MedVet and tumor rounds once weekly. The neurology resident will be expected to present at the CPC at least once yearly during their residency.

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 present once annually at a MedVet clinicopathology conference. The resident is required to present once annually at Ohio State University neuropathology rounds. The resident will be expected to submit the results of their research project for presentation as an abstract at ACVIM during the third year of their residency. The Neurology Service provides CE lectures to the local community at least twice yearly, the resident will be expected to present at least one hour of material during these events the last two years of their residency.

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 checked="" type="checkbox"/>	<input type="checkbox"/>

Comments: The resident will be expected to attend the ACVIM Forum twice during their residency. In addition the resident will participate in the ACVIM Neurology Basic Science Course, provided it is held in the US during their residency.

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

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

Comments: Although a publication is not mandatory, the resident is required to complete a research project during their residency and it is expected that the results of that project will be published.

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

None

**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

**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.

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