



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="(305) 274-2777"/>
E-mail:	<input type="text" value="DrWong@SEVNeurology.com"/>
Mailing Address:	<input type="text" value="9300 SW 40th Street"/>
	<input type="text" value="Miami, FL 33165"/>

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.

[Michael Wong](#)

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

[Michael Wong - Neurology](#)  
[Michael Reese - Neurology](#)  
[Nick De Pompa - Neurology](#)

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

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="#">Franziska Peress 7.1.16 - 6.30.19 (Michael Wong)</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



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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: 1/31/2018

Program Director Name: Michael A. Wong

(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): Southeast Veterinary Neurology

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.

University of Florida - see below

2. Length of Training Program:

Table with 2 columns: Length of Training Program (2 years, 3 years, Other -provide details) and Yes/No/Optional status. '3 years' is marked with an 'X'.

3. Advanced Degree:

Table with 3 columns: Degree Type (Masters, PhD), Yes, No, Optional. 'Masters' and 'PhD' are both marked with an 'X' in the 'No' column.

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

Empty text box for explaining degree integration.

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 Diplomate(s)	Comments
Kirsten Cooke, SAIM	Residents spend 4 weeks in year 1 and 4 weeks in year 2 at the University of Florida on Internal Medicine.
Richard Hill, SAIM, Nutrition	Residents spend 4 weeks in year 1 and 4 weeks in year 2 at the University of Florida on Internal Medicine.
Andrew Specht, SAIM	Residents spend 4 weeks in year 1 and 4 weeks in year 2 at the University of Florida on Internal Medicine.

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 Diplomate(s)	Clinical or Gross	Comments
Sarah Beatty, DVM, DACVP	Clinical	Residents spend 14 days of clinical pathology with the Pathology department at the University of Florida. The Resident is involved in rounds, seminars, interpretation of in-house and mail-in clinical pathology samples. All work is done under the direct mentorship of the supervisors identified.

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
Ian Robertson, DACVR	Residents spend 7 days at North Carolina State University. The resident is involved in seminars, rounds, interpretation of in-house and telemedicine imaging (radiographs, CT, MRI, ultrasound, etc).

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
Luisito Pablo, DVM, ACVA	Anesthesiology	Dr. Pablo lectures annually at SEVN, including hands-on/practical and didactic training.
Robert Swinger, DACVO Lorraine Karpinski, DACVO Cherlene Delgado, DACVO	Ophthalmology	Adjacent practice. Available for phone or direct communication. Often comes on-site for evaluations.
Millie Rosales, DACVD	Dermatology	Adjacent practice. Available for phone or direct communication. Often comes on-site for evaluations.

Richard Hurt, DACVS	Surgery	Adjacent practice. Available for phone or direct communication. Often comes on-site for evaluations.
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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)
N/A		

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)
Franziska Peress	3	7/1/2016	6/30/2019	Michael A. Wong

**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:**

	<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>	40	38	36
<b>Neurology/Neurosurgery - Indirect Supervision</b>			1
<b>Internal Medicine</b>	4	4	0
<b>Clinical Pathology</b>	1	1	0
<b>Radiology</b>	1	0	1
<b>Neuropathology</b>	1	0	1
<b>Other Rotation (please list the name of each rotation):</b>			
<b>Other: Electrodiagnostics</b>	0	0	1
<b>Other: Soft Tissue/Orthopedic Surgery</b>	0	1	0
<b>Other: Conference (ACVIM, Braincamp, AO Spine, SEVEN conference, Peripheral Nervous System Conference)</b>	1	1	1
<b>Research</b>	2	2	4

<b>Independent Study</b>	0	4	6
<b>Vacation</b>	2	1	1
<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:

Daily cage-side rounds are conducted in the morning with the intern, resident, neurologists, support staff and overnight staff. In-house cases and “interesting cases” from the day before are discussed. All patients are discussed including diagnosis, planned or performed diagnostics, results, treatment plan, owner/pDVM communications, etc. A weekly topic or case presentation is made by the neurology intern, resident, specialist or support staff. Evening transfer rounds are conducted daily.

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.

MRI, CT and spinal radiographs are interpreted daily with the neurologists’ guidance. In addition, residents spend 1 week of one-on-one training with Dr. Wong going over a case bank of images in year 1 and year 3. Residents spend a one-week out rotation at North Carolina State University in year 1 and year 3 under the supervision of a board-certified radiologist, reviewing cases and reading images. MRI/CT rounds are held every other week with all neurologists and residents in attendance.

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

In addition to collecting and interpreting in-house CSF cytology samples on a daily basis, residents spend two weeks at the University of Florida with the clinical pathology service interpreting clinicopathological samples from in-house and mail-in sources, including CSF, FNA, blood smears and surgical sections.

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.

Residents spend two weeks of one-on-one training with Dr. Wong using a glass slide collection of clinical cases, histopathological glass slide collections, photographs and online resources (Cornell neuropathology website). The first week is in year 1 and the second is in year 3 prior to exam preparation/boards study time. The resident has attended the ACVIM Neuromuscular Disease Course and will attend Braincamp this year. Residents participate in the online Neuropathology course.

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.

Neurosurgical procedures are performed by Dr. Wong, Dr. De Pompa, and Dr. Reese. The residents also have a two-week soft-tissue surgery rotation and attend the AO spinal course. Initially, the residents observe surgery, then as their level of competency increases, they perform surgery with and then without direct supervision (e.g. neurologist scrubbed in for entirety of surgery). However, a supervising diplomate will always scrub in prior to closure to ensure completeness/quality of the surgery. An operating microscope with viewing monitor is utilized. The resident can be supervised via monitor as needed. Furthermore, procedures can be recorded for review and study. Routinely-performed neurosurgical procedures include hemilaminectomies, ventral slot procedures, dorsal laminectomies, spinal stabilizations, craniectomies, muscle/nerve biopsy, ventriculoperitoneal shunt placement, etc. All neurologists have completed the neurosurgery certificate of training.

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:

Electrodiagnostics are performed in-house. The resident attends the ACVIM Neuromuscular Disease Course in year 1 and an in-house course on concepts and clinical applications is done in the first year. These concepts are solidified with clinical cases throughout the training. The one-week didactic course is repeated in year three. Concepts are further reviewed in Journal Club and at the Neuroscience course.

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 is held every other week. Articles specific to currently-managed patients are also reviewed.

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:

Dr. Wong and Dr. De Pompa meet with the residents and provide a formal review every 2-3 months. Clinical competencies, client/staff communications, record-keeping, surgical competencies and research progress will be discussed. The resident is responsible for maintaining a surgical case log.

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.

Eight weeks of dedicated research time is allocated. The resident is expected to identify a project within the first 6 months of the residency. Study design and implementation will be expected to be complete by month 18. Manuscript preparation and submission will be expected by month 24. The mentors are available for review and consultation during the preparation, study design, data preparation, writing and submission process.



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		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"/>	OFF site, Animal Cancer Care Clinic
g) Veterinary Library w/Literature Searching Capabilities	X	<input type="checkbox"/>	On site
h) Computerized Medical Records w/Searching Capabilities	X	<input type="checkbox"/>	On site
i) Medical Library w/Literature Searching Capabilities	X	<input type="checkbox"/>	On site
j) Electromyography and nerve conduction velocity testing	X	<input type="checkbox"/>	On site
k) Evoked Response Equipment	X	<input type="checkbox"/>	On site
l) Electroencephalography	<input type="checkbox"/>	X	
m) Computed Tomography	X	<input type="checkbox"/>	On site
n) Magnetic Resonance Imaging (include field strength)	X	<input type="checkbox"/>	On site. 1.5T

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*:

Referral for RT to Animal Cancer Care Clinic.

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:

ACVIM conference: annual. Southeastern Veterinary Neurology Conference: annual. Daily hospital rounds are held. Case presentations weekly. Weekly topic presentation are conducted related to neurology, neuroanatomy, neurosurgery, neuropathology, etc. Bi-weekly journal club. Bi-weekly neuroradiology rounds.

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.

Residents are required to make a presentation to local veterinarians. Residents assist in training neurology interns. Weekly presentations are made by interns/residents/neurologists. The resident is responsible for 1 per month.

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: At least one annually. ACVIM, Braincamp will be attended at each offering Southeastern Veterinary Conference is attended annually. Neuromuscular course.

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

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

Comments:

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

**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.**