



**RESIDENCY TRAINING PROGRAM REGISTRATION
2018-2019
SMALL ANIMAL INTERNAL MEDICINE**

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 Small Animal Internal Medicine (SAIM) 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 SAIM 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 any advisors, transferring from one program to another, alterations in program duration, 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 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 Small Animal Internal Medicine)

Program Director’s Contact Information:

Work Phone:	(573) 882-7821
E-mail:	cohnl@missouri.edu
Mailing Address:	MU-Veterinary Health Center 900 E. Campus Dr., Clydesdale Hall Columbia, MO 65211

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

Primary Site:

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

2. Resident Advisor(s): (Must be Diplomate(s) in SAIM. Each Resident Advisor must be familiar with current Residency Training Program requirements as outlined in the CM and **each Resident Advisor may supervise no more than 3 residents at a time.**)

Carol Reinero
Leah Cohn
Amy DeClue

3. Supervising Diplomates on-site: (Two on-site Diplomates in SAIM are required - **2 ACVIM, or 1 ACVIM & 1 ECVIM.**)

Leah Cohn - SAIM
Carol Reinero - SAIM
Amy DeClue - SAIM
Megan Grobman - SAIM

4. Please list all **Diplomates** of ACVIM responsible for supervision of clinical training who are specialists in areas other than SAIM. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name and Specialty	Comments
Joan Coates - Neurology Carolyn Henry - Oncology Philip Johnson - LAIM John Middleton - LAIM Dennis O'Brien - Neurology Dusty Nagy - LAIM Jeffrey Bryan - Oncology Stacey Leach - Cardiology Dorothy Whelchel - LAIM Brian Flesner - Oncology Pamela Adkins - LAIM Daniela Mauler - DECVN Lindsay Donnelly - Oncology	

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.

Resident Name	Start date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Resident Advisor Name*
Aida Vientos-Plotts	7.15.15	7.14.18	(Leah Cohn)
Jared Jaffey	7.15.15	7.14.18	(Amy DeClue)
Megan VanEeden	7.15.16	7.14.19	(Carol Reinero)
Kristen Merrill	7.15.17	7.14.2020	(Amy DeClue)

* **Each Resident Advisor may supervise no more than 3 residents at a time.**

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**



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Part Two

Part Two of the Small Animal Internal Medicine Residency Training 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.

The SAIM Residency Training Committee may require supporting evidence for any statements made below. Per the Certification Manual (CM) section 9.C.2, at the time of annual program renewal, Program Directors may be asked to verify resident activities, including satisfactory clinical training, interaction with consultants, documentation of training in radiology and clinical pathology, documentation of off-site training, and documentation of study and education participation.

Current Date:

Program Director Name:

(Must be a Diplomate of ACVIM in the Specialty of Small Animal Internal Medicine)

Name of Sponsoring Institution (Residency Training Program):

1. 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). All requirements for both direct and indirect supervision must be met, as well as requirements for rounds and conferences. Refer to Section 9.C.1.e of the CM for definitions of secondary site and off-site experiences.

a) Secondary Site for multi-site program (if applicable):

(Please attach specific information regarding the number of weeks scheduled at each site and which rotation requirements shall be met at each site).

b) Outside Rotations/Other Sites for specialty training (if applicable):

All rotations performed at a location other than that of the resident's program must be documented with a signed Letter of Support from the specialist providing the outside rotation. The RTC recommends that each program have standard/default sites for out rotations identified. **Letters of Support from the specialist(s) must be included with the program renewal form.** Once a resident begins their training program, they can opt to use standard/default site or another off-site location/specialist as long as their Program Director and the RTC approve of their choice and a new Letter of Support is provided by the off-site location.

(Please attach signed Letters of Support from all individuals providing off-site training of SAIM residents to this registration form.) Each Letter of Support should contain specific information regarding a) the percentage of time scheduled at each site, b) which rotation requirement(s) shall be met at each site, and c) indicate that the resident(s) at the site will be directly supervised by the individual(s) signing the letter. **Letters of Support must be submitted annually WITH program renewal forms and WITH each new program request. This program application is not complete without Letters of Support for outside rotations.** Letters that do not contain all of this information will be returned for revision. **If off-site rotations are added after**

program renewal, please submit necessary letters of support a minimum of 30 days before the resident departs for that off-site training.

Some of our residents opt to do ultrasound training off site, but it can be done here on site. If a resident decides to do so, we will submit the required letter of support from the radiologist that will provide training.

2. Length of Training Program/Advanced degree:

Option 1: 3 Year Program:

Advanced Degree:

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

If advanced degree is required or optional, please briefly describe how the graduate training is incorporated into the residency training program:

We have strongly encouraged that our residents complete a MS degree. Normally, residents enroll in the graduate school immediately, and are assigned a temporary graduate advisor who helps them find a relevant mentor and project. During the residency, graduate courses are taken both within the CVM and outside the CVM. The majority of courses are taught in the CVM on a rotating schedule. The MS and PhD programs are thesis programs, requiring original research. The research is accomplished largely during “off clinic” time, although some projects lend themselves to completion while on clinical duty. The master’s research project is expected to be complete prior to the finish of the residency program. Most residents present their research at local and national meetings. Ideally, defense of the thesis occurs at the end of the third year of residency, although some students defend several months to a year after completing the residency while others finish as early as the end of year two of the residency. For the PhD degree, extra training time beyond the 3 year residency is very likely required (we have 2 such students now – one became boarded this past summer, the other will sit boards in June).

Option 2: Exceeds 3 Years:

of Years:

Advanced Degree:

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

If advanced degree is required or optional, please briefly describe how the graduate training is incorporated into the residency training program:

The PhD likely extends beyond 3 years, but is separate from the residency after the third year.

3. Please list all of the Diplomates of Veterinary Pathology in the areas of clinical pathology or gross/histopathology approved by the American Board of Veterinary Specialties or European Board of Veterinary Specialties associated with residency training. If off-site, please explain the situation, and the method of providing direct contact with the resident **(please attach signed Letters of Support from all individuals providing off-site training of SAIM residents to this registration form)**.

Name of Diplomat(e)s	Clinical or Gross	Board Certification (e.g. ACVP, ECVCP)	Comments
Marlyn Whitney	Clinical	ACVP	
Linda Berent	Both	ACVP	
Chuck Wiedmeyer	Clinical	ACVP	
Angela Royal	Clinical	ACVP	
Gayle Johnson	Gross	ACVP	
Dae Young Kim	Gross	ACVP	

Daniel Shaw	Gross	ACVP	
Keiichi Kuroki	Gross	ACVP	
Fred Williams	Gross	ACVP	
Jeff Mitchell	Gross	ACVP	
Tamara Hancock	Clinical	ACVP	

4. Please list all of the Diplomates of Radiology approved by the American Board of Veterinary Specialties or European Board of Veterinary Specialties associated with residency training. If off-site, please explain the situation, and the arrangements for direct contact with the resident (**please attach signed Letters of Support from all individuals providing off-site training of SAIM residents to this registration form**).

Name of Diplomate(s)	Include Board certification (e.g. ACVR, ECVDI)	Comments
James Lattimer Jodi Matheson Charles Maitz	ACVR ACVR ACVR- rad onco	dual boarded radology and radiation oncology

5. 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 (**please attach signed Letters of Support from all individuals providing off-site training of SAIM residents to this registration form**).

Name of Diplomate(s)	Specialty	Board Certification	Comments
Cecil Moore	Ophthalmology	DACVO	Part time
Elizabeth Giuliano	Ophthalmology	DACVO	
Kevin Donnelly	Ophthalmology	DACVO	
Keith Branson	Anesthesiology	DACVA	
John Dodam	Anesthesiology	DACVA	
Alex Bukoski	Anesthesiology	DACVA	
Fred Anthony Mann	Surgery & ECC	DACVS & ACVECC	
James Tomlinson	Surgery	DACVS	
Derek Fox	Surgery	DACVS	
Jill Luther	Surgery	DACVS	
Tim Evans	Therio & Toxicology	DACT & DAVT	
Dawna Voelkl	Theriogenology	DACT	
Dietrich Volkmann	Theriogenology	DACT	
David Senter	Dermatology	DACVD	Part time
Robert Backus	Nutrition	DACVN	
Lauren Young	Nutrition	DACVN	Part time (until new hire)
Becky Greer	ECC	ACVECC	
Mike Karagiannis	ECC	ACVECC	Part time (until new hire)
Richard Meadows	Canine/feline	ABVP	
Loren Schultz	Preventive med	ACVPM	A new criticalist has been hired and will start this fall; a search is active for another 2 criticalists
Karen Campbell	Dermatology	ACVD	
Amie Burling	Shelter/preventive med	ACVPM/DABVP	
Carrie Duran	Pharmacy	PharmD/DVM	
Bryan Torres	Surgery	DACVS	
Owen Skinner	Surgery	DECVS	

6. 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. If at all possible, please indicate whether the individual has completed the board certification process.

Name(s)	Program End Date (mm/dd/yyyy)	Diplomate (Yes or No)
Megan Grobman	July 14, 2016	yes
Meredith Sherrill	July 14, 2015	yes
Julie Trzil	July 14, 2014	yes
Laura Nafe	July 14, 2013	yes
Note: we did not have a resident finish in 2017		

7. 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. Each Resident Advisor may supervise no more than 3 residents at a time.

Resident Name (first/last)	Length of Program (in years)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	Resident Advisor Name (first/last)
Aida Vientos-Plotts	3	7/15/15	7/14/18	Leah Cohn
Jared Jaffey	3	7/15/15	7/14/18	Amy DeClue
Megan VanEeden	3	7/15/16	7/14/19	Carol Reinero
Kristen Merrill	3	7/15/17	7/14/20	Amy DeClue

8. Does your training program consist of a minimum of **36 months**?

Yes No

Comments:

NOTE: Direct supervision is required during clinical training. Direct supervision in SAIM 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 in the same facility (on site). 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.

9. Does each resident in your program spend a minimum of 68 weeks on clinical rotations under the direct supervision of at least 2 ACVIM SAIM Diplomates (or at least 1 ACVIM SAIM Diplomate and at least 1 ECVIM Companion Animal Diplomate)? *Two Boarded Diplomates (as above) are required at the same site for training to fulfill the 68 weeks. For programs with more than two Supervising Diplomates, please list the diplomates responsible for the majority of directly supervised SAIM training here (item 9), and list other SAIM diplomates in item 10. If the resident will utilize any directly supervised SAIM time to fulfill the CM requirement in item 10 (an additional 16 weeks under direct supervision of one or more supervising Diplomates, not listed in this item (item 9)), then at least one SAIM diplomate must be listed in item 10.*

Yes No

Supervising Diplomate Name(s)	Specialty	Board Certification (e.g. ACVIM, ECVIM)	Comments
Leah Cohn Amy DeClue Carol Reinero	SA internal med SA internal med SA internal med	ACVIM ACVIM ACVIM	

10. Does each resident in your program spend an additional 16 weeks on clinical rotation under the **direct supervision** of one or more supervising Diplomate(s) in the Specialty of Small Animal Internal Medicine (other than the Diplomates

providing supervision of the 68 weeks listed above), Neurology, Oncology, or Cardiology? These Diplomates can be ACVIM, ECVIM or have been granted associate status by the ACVIM.

Yes No

Supervising Diplomate Name(s)	Specialty	Board Certification (e.g. ACVIM, ECVIM)	Comments
Megan Grobman Jeff Bryan Brian Flesner Dennis O'Brien Joan Coates Daniela Mauler Stacey Leach Lindsey Donnelley	SAIM Oncology Oncology Neurology Neurology Neurology Cardiology Oncology	ACVIM ACVIM ACVIM ACVIM ACVIM ECVN (and rehab cert) ACVIM ACVIM	Dr. O'Brien will retire sometime this year (when?) Recently hired, will start in April 2018
Have a letter of offer out to a new neurologist, cardiologist, and another oncologist			

11. Does each resident in your training program spend an additional 36 weeks in training, not necessarily under direct supervision, in either internal medicine or related areas, or in writing, studying, teaching, or obtaining experience with a radiologist, clinical pathologist, or other specialist? (Note that vacation time and time to attend professional meetings is included in this period.)

Yes No

Comments:

In addition to direct case related time, most of our residents participate in graduate courses (including clin path and ultrasound) as well as in rounds type presentations such as cytology rounds. They also participate as possible in regular "microscope rounds" of path/clin path cases.

12. Does each resident in your training program spend a minimum of 8 hours per month in training with at least two other board-certified specialists (not ACVIM)? These may be specialists in dermatology, theriogenology, surgery, anesthesiology, ophthalmology, emergency/critical care, or clinical pharmacology. The training must be direct consultation, not telephone or E-mail consultation.

Yes No

Comments:

Case based consultation

13. Does each resident in your training program have a minimum of **80 hours** of direct contact with a board certified veterinary radiologist? Are **40 hours** comprised of interpreting radiographs, learning and evaluating the results of special imaging techniques, and attending radiology rounds or conferences? Are an additional minimum of **40 hours** spent training in ultrasonography under the supervision of a Board-certified radiologist?

This training should emphasize abdominal ultrasonography and must include hands-on performance of abdominal ultrasonography, observation of ultrasound procedures on the resident's own patients, and theoretical training in the principals and application of ultrasonography.

Yes No

Comments:

Some of our residents prefer to spend time with ultrasound at somewhere other than MU so that it reduces competition for hands on time from other residents and DVM students.

14. Does each resident in your training program attend weekly conferences?

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

Comments:

We have weekly clinicopathologic case conferences, weekly SA medicine journal club, weekly SAIM journal club, and weekly seminars

15. Does each resident have **40 hours** of review sessions per year?

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

Comments:

Most far exceed this number between medicine related didactic courses and CE events

16. Does each resident in your training program have a minimum of **40 hours** direct contact with a board certified veterinary clinical or anatomic pathologist evaluating clinical pathologic findings, reviewing cytologies and biopsies, and attending clinical pathologic conferences or seminars?

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

Comments:

17.. a) Does each resident in your program participate in patient management, including patient receiving, diagnostics, case management and decision making, client communication, case follow-up, and communication with referral veterinarians?

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

Comments:

b) Is case management directly supervised and reviewed by a Diplomate of the ACVIM?

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

Comments:

18.. Is a complete medical record using the problem oriented veterinary medical record system maintained for each individual patient? (Medical records must be retrievable.)

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

Comments:

19. . a) Does the resident participate in clinical rounds on a daily basis while on clinical rotations?

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

Comments:

b) Is a supervising Diplomate available for the majority of the daily rounds reported in question 17?

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

Comments:

c) If a supervising Diplomate is not available for the majority of rounds, describe how rounds are attended and supervised.

Comments:

20.. Please indicate the availability of the following facilities or equipment to be used in resident training. 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, availability, and how the facilities or equipment are used for resident training in the space at the end of this section.

	Available?		Location of equipment?
	Yes	No	(On-site or list site name)
Standard radiological equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Ultrasonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Color flow/Doppler equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Cardiac catheterization capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Endoscopy equipment			
GI equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Bronchoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Cystoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Rhinoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Laparoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site Most these procedures are done by our surgery service
Thoracoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site Most these procedures are done by our surgery service
Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Serum osmolality measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Colloid oncotic pressure measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Electrocardiography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Blood Pressure Measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Electromyography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Nuclear Medicine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Radiation Therapy Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Computerized Medical Records w/Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Veterinary Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Medical Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
Urethral pressure profile & cystometrography	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Hemodialysis capability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Total parenteral nutrition capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site

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.

21.. Are formal conferences, such as clinicopathologic conferences, journal clubs, or seminars held on a weekly basis?

Yes No

Comments:

22. Please provide a description of the conferences, etc., that are provided and the typical schedule. **NOTE:** Per Section D.2.d.1 of the CM, a minimum of 80 hours over three years in journal club is required for each resident.

Monday 8-9 am: Clinicopathologic Case Presentation (CPC) attended by faculty and residents of small animal IM, cardiology, oncology, neurology, and clinical pathology. One case is prepared and presented in detail by either a faculty member or house officer, with emphasis in pathophysiology of disease, differential diagnosis, and therapeutic considerations.

Tuesday 9-10 am: SA Internal Medicine Journal Club.

SAIM residents may attend neurology or oncology JC if case load permits. Otherwise, they attend SAIM JC each week. SAIM Journal Club includes critical review of recent literature, once-monthly Evidence Based Medicine investigation of a clinically relevant issue, and once quarterly “ask the expert” presentation in which supervising diplomates present their take on a pre-determined clinical issue. Additionally, practice exams are given twice yearly during this time.

Wednesday 8-9 am: Joint Pathology-Clinical Case Conference. Cases that have been evaluated in the VMTH and by our pathology department are presented in this joint conference. For instance, the clinical presentation and diagnostics may be discussed by the admitting clinician, an aspirate or impression smear presented and discussed by a clinical pathologist, the biopsy or necropsy findings presented and discussed by anatomic pathologists. In addition, radiology faculty present radiographic images from the same case. 1-3 cases will be presented per week.

Thursday 8-9 am: Morbidity and Mortality rounds – Largely presented by interns, interesting or complicated learning cases are reviewed and discussed by faculty and house officers alike.

Thursday noon-1 pm: Cases permitting, residents and faculty attend IM Grand Rounds at human medical school.

Friday 8-9 am: ACVIM Journal Club – One hour critical literature review. The JC is attended by oncology, neurology, cardiology, and ECC as well as the clinical pathologists and medical librarian.

12-1 pm: House officer seminar series. Each house officer is required to present at least 1 seminar during the course of the year. Seminars are open to the entire CVM as well as vets from the surrounding area. All house officers are encouraged to attend weekly if clinical duties do not prevent attendance.

23. Is the resident required to give one or more formal presentations at a conference or in an educational setting on a yearly basis?

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

Comments:

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

Program length	None	One	Two	> Two
Option 1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Option 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

25. Does the training program require a research project? Please indicate the number of research projects required.

Program length	Yes	No	Optional	Number
Option 1:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One required but most residents do more than one
Option 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments:

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

Program length	Yes	No	Number
Option 1:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Must be prepared but not necessarily submitted
Option 2:	<input type="checkbox"/>	<input type="checkbox"/>	

Comments:

27. Does each resident in your program meet at least twice yearly with their Resident Advisor to evaluate the resident's performance, review their progress in the program, and assess whether or not their training program is proceeding as described in this document?

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

Comments:

Is a dated written summary of this evaluation recorded?

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

Comments:

28. Is this training program part of a combined program designed to provide training in Small Animal Internal Medicine as well as in another ACVIM Specialty or non-ACVIM specialty college?

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

If yes, please list the second specialty and describe in detail how the requirements of the Small Animal Internal Medicine Specialty are met separately from those of the second specialty. This should include a breakdown (by week) of training time to be counted toward each specialty.

Second specialty:
 Description:

29. Please provide the structure of the training program to include (but not limited to): the length and number of clinical rotations per year; distribution of time allocated for research, writing, exam preparation, other scholarly activity, and vacation; and distribution of time allocated to out-rotations if this is a multi-site program.

Please refer to the CM (Section 9.F) for specific details. The following table is provided as an example. NOTE: a detailed description defining the individual time requirements would be acceptable in addition to the table.

Example:

	<i>Year 1 # Weeks</i>	<i>Year 2 # Weeks</i>	<i>Year 3 # Weeks</i>	<i>Total # Weeks</i>	<i>Training On Site or Off Site</i>
Internal Medicine, Direct Diplomate Supervised (Diplomates listed in number 9), Minimum of 68 weeks					
Directly Supervised	23	23	23	69	On site
Additional Diplomate Supervised Rotations (Diplomates listed in number 10), Minimum of 16 weeks					
Internal Medicine	3	4	1	8	On site
Cardiology	2		2	4	On site
Neurology	2	2		4	On site
Oncology	2		2	4	On site
Additional Direct or Indirectly Supervised Rotations					
Internal Medicine, Indirectly Supervised	8	8	8	24	On site
Additional Clinical Rotations: Please specify in comment section	2	2	2	6	On site
Electives*	1	1	1	3	Off site
Diagnostic Imaging					
Radiology		1		1	On site
Ultrasound	1			1	On site
Pathology					
Clinical Pathology		1		1	Off site
Anatomical Pathology					
Additional Rotations					
Project/Studying/Writing	5	7	10	22	On site
Meeting	1	1	1	3	On/Off site
Vacation	2	2	2	6	Off site
Total	52	52	52	156	
<i>* Electives can be 0-3 weeks. If unavailable, will default to directly supervised internal medicine</i>					

Please note that this table is for recording the number of weeks and/or hours that the resident will spend on the rotations/services for each year that will satisfy the CM requirements. The number for each year should add up to 52 weeks. It is understood that each resident's program will differ with regard to which year a given rotation is completed; the table should summarize the rotations in which residents in your program will participate. The CM specifies that the program outlined in this program renewal form becomes the requirements that a resident must fulfill to complete the training program. Please see CM section 4.F.2 "Once a program has been approved, even if its requirements exceed the minimum requirements as published in the CM, the requirements specified in the program description have become the official requirements for completion of the residency. Neither a candidate nor a Program Director may retroactively petition for successful completion of a residency that has met the minimum requirements of the CM if they have left the program but have not completed all requirements of the previously approved program."

PLEASE CHECK YOUR MATH

	<i>Year 1 # Weeks</i>	<i>Year 2 # Weeks</i>	<i>Year 3 # Weeks</i>	<i>Total # Weeks</i>	<i>Training On Site or Off Site</i>
Internal Medicine, Direct Diplomate Supervised (Diplomates listed in number 9), Minimum of 68 weeks					
Directly Supervised	30.5	27.5	28.5	56.5	On site
Additional Diplomate Supervised Rotations (Diplomates listed in number 10), Minimum of 16 weeks					
Internal Medicine	4	4	4	12	On site
Cardiology	2	2	2	6	On site

Neurology	2	2	0	4	On site
Oncology	2	2	2	6	On site
Additional Direct or Indirectly Supervised Rotations					
Internal Medicine, Indirectly Supervised	0	0	1	1	On site
Additional Clinical Rotations: Please specify in comment section	0	0	0	0	
Electives*	3	3	3	9	On site
Diagnostic Imaging					
Radiology	0	1	0	1	On site
Ultrasound	0	1	0	1	On or off
Pathology					
Clinical Pathology	1	0	0	1	On site
Anatomical Pathology	0	0	0	0	NA
Additional Rotations					
Project/Studying/Writing	5	7	9	21	On site
Meeting	.5	.5	.5	1.5	Off site
Vacation	2	2	2	6	NA
Total	52	52	52	156	
<i>* Electives can be 0-3 weeks. If unavailable, will default to directly supervised internal medicine</i>					

NOTE: a detailed description defining the individual time requirements would be acceptable here in addition to the table:

Comments:

The table provided in question 20 is difficult to complete while providing for flexibility of scheduling and being scrupulously honest about future scheduling since it requires each year be spelled out. During the three years, residents may be scheduled in different ways depending on the needs of other services. As an example, we always schedule our SAIM resident for a minimum of 4 weeks on neurology. Usually, this is during the first and second year of the residency. However, there have been times that the neurology service has requested a change, usually do to the manpower associated with their residency program of visiting residents, so that the SAIM resident spends less time in year one and more time in year two and three. We cannot know these sorts of things for the full three years in advance. Therefore, the table as completed reflects what is TYPICAL and INCLUDED, but there may be modifications in scheduling with something marked as one year when in actuality is may occur in another year. Additionally, time for the research project may be divided differently depending on the needs of the project; some require intensive work early on, others can be spread more evenly through the three years Our program is not IDENTICLE in timing of schedule from one resident to the next, but the MC requirements for greater than or equal to 68 weeks on SAIM with direct supervision, greater than or equal to 16 weeks with other ACVIM diplomates direct supervision of clinical training, 80 hours with radiologists, half of them with ultrasound, and 40 hours with a clinical pathologist, are always met. While we have boarded radiologists on site, many of our residents prefer to go off site for this intensive training to allow a more focused experience than can be accommodated here with our radiologist, who must also instruct veterinary students and their own house officers. Each time our residents do a week of radiology training off site, they identify a boarded radiologist and we (mentors) approve the experience, but we cannot tell you now where the experience will occur for the next resident we train. Some find a radiologist close to their parents or friend's homes so that they have a place to stay for that week. Our residents can also practice on site with our own US unit available at all times to our residents for comparison to the findings of our own radiologists.

Electives depend entirely on the interest of the resident. Some choose all elective time in SAIM, others choose other subjects, and others use that time for additional research time. We have all small animal relevant subjects represented in our hospital other than dentistry, so they

have a wide variety of options to choose from for electives.

30. Is there any additional pertinent information that the Residency Training Committee should consider in its evaluation of this Training Program?

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

Comments:

You should also know that in the past 21 years, only a single resident completing our program did not become board certified; that single resident chose not to complete the project requirements, and although he passed the ACVIM examinations and case reports, he was denied his residency certificate from us pending completion of a project. This resident trained with us now > 10 years ago, and this issue has never been repeated.
Finally, you should know that we offer a large array of clinically relevant course work that may be used for graduate credit for residents pursuing an MS (or PhD) degree, or may be audited by those not in graduate school. The class time is kept sacrosanct for our residents, who are never denied the ability to attend class based on other obligations..

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.

Per the Certification Manual, each year, the Program Director 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 Residency Training Program.