

Part One

New applications for ACVIM Residency Training Programs must be received by the Residency Training Committee (RTC) 90 days prior to any residents beginning training. Before completing this form, please review the general and specific requirements for Cardiology Residency Training Programs in the ACVIM Certification Manual (CM). The current version of the CM is available on the ACVIM website at www.ACVIM.org.

Prior to making significant changes in a residency training program, approval of the ACVIM and Cardiology RTC must be obtained. The Candidate and/or Program Director 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 the following: 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: The data collected in this form is necessary both for the ACVIM to maintain its accreditation as a Registered Veterinary Specialty Organization and also is required for renewal of the residency training program. Some of the data collected is required of every specialty and some is specific to the specialty of Cardiology.

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, will be addressed by the Program Director in Part Two.

Program Director Name:

Must be an active Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology

Program Director's Contact Information:

Work Phone:	<input type="text" value="(902) 566-0870"/>
Mobile Phone:	<input type="text"/>
E-mail:	<input type="text" value="ecote@upei.ca"/>
Mailing Address:	<input type="text" value="Dept. of Companion Animals
550 University Ave.
Charlottetown, PEI C1A 4P3
Canada"/>

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

Primary Site Location:	Length of Training Program:
<input type="text" value="Atlantic Veterinary College"/>	<input type="text" value="3 year"/>

2. Resident Advisor(s): Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology. There is no restriction on the number of Resident Advisors; however, each Resident Advisor can supervise up to two residents concurrently.

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

4. Diplomates of ACVIM responsible for supervision of clinical training who specialize in areas other than Cardiology. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name and Specialty	Comments
J. T. McClure - LAIM William Stoughton - LAIM Peter Foley - SAIM Michelle Evason - SAIM Christine Savidge - SAIM Oriana Raab - SAIM	

5. Residents currently participating in your training program, along with the beginning date of the program, expected ending date of the program, and designated resident advisor. All current residents and incoming residents (if known) should be listed here. Unless specifically approved, in advance, by the CRTCC, the ratio of cardiology residents to on-site Cardiology Diplomates who are actively involved in resident training cannot exceed 2 to 1.

Resident Name	Start date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Resident Advisor Name*
Deepmala Agarwal 9.1.18 - 8.31.21 (Etienne Cote)			



American College of **Veterinary** Internal Medicine

**RESIDENCY TRAINING PROGRAM REGISTRATION
2019-2020
CARDIOLOGY**

Part Two

Part Two of the Cardiology Residency Training Program addresses general features that apply to all current residents. These questions will be used to provide the Residency Training and Credentials Committees with information needed to judge the structure, quality, scope, and consistency of training provided. (Part Three must be completed and submitted for each resident.)

Current Date:

Program Director Name:

(Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology)

Name of Sponsoring Institution (Residency Training Program):

1. Please list **all Diplomates of the American College of Veterinary Pathology and the European College of Veterinary Pathology** in the areas of clinical pathology or gross/histopathology associated with residency training. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name of Diplomate(s)	Clinical or Gross	ACVP or ECVCP	Comments
Paul Hanna DVM, PhD, DACVP	Gross	ACVP	
Shelley Burton DVM, MSc, DACVP	Clinical	ACVCP	
Cora Gilroy DVM, MSc, DACVP	Clinical	ACVCP	
Megan Jones, DVM, PhD, DACVP	Gross	ACVP	
Shannon Martinson, DVM, DACVP	Gross	ACVP	
Sandra MacConkey, DVM, DACVP	Clinical	ACVCP	
Chelsea Martin DVM, PhD, DACVP	Gross	ACVP	
Noel Clancey DVM, MVSc, DACVCP	Clinical	ACVCP	

2. Please list **all Diplomates of the American College of Veterinary Radiology and 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)	ACVR or ECVDI	Comments
Paul Rist, DVM, DACVR		Half-time position; advertising for 2 full-time positions. Locum visiting radiologist coverage in the meantime.

3. Please list **all Diplomates of the American College or equivalent European colleges of Dermatology, Surgery, Ophthalmology, Anesthesiology, ECC, clinical nutrition, clinical pharmacology, and/or theriogenology** associated with residency training. . If off-site, please explain the situation and the arrangements provided for contact with the resident.

Name of Diplomate(s)	Specialty	Comments
James Dundas, DVM, DACVS Leigh Lamont DVM, MS, DACVAA David Seeler DVM, MS, DACVAA Stephanie Hamilton DVM, DACVAA Cate Creighton DVM, MSC, DACVAA Bronwyn Crane DVM, MS, DACT Martha Mellish, DVM, DACT Aimie Doyle DVM, MS, DACVS Laurie McDuffee DVM, PhD, DACVS Charlotte Pye, DVM, DVSc, DACVD	SA Surgery Anesthesiology Anesthesiology Anesthesiology Anesthesiology Theriogenology Theriogenology Theriogenology LA Surgery LA Surgery Dermatology	

4. Please indicate the availability of the following facilities or equipment. Indicate if these are available on-site at the primary training site, or at a different location. (In the Location column, indicate on-site for primary location or the name of the facility where the equipment is located if off-site.) For facilities that are not on-site, please describe the situation and availability in the space at the end of this section. See CM 5.D for details.

	Available?		Location of equipment? (On-site or list site name)
	Yes	No	
a) Blood pressure equipment (must be on site)	<input type="checkbox"/>	<input type="checkbox"/>	
b) Cardiac catheterization capability (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c) Echocardiography equipment (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d) Fluoroscopy (must be on site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e) Pacemaker interrogation (must be on site or available off-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f) Standard radiological equipment (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
g) Electrocardiography (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
hi) Brainstem Auditory Evoked Response Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, endocrinology, anatomic and histopathology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
j) Colloid oncotic pressure measurement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
k) Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
l) Electroencephalography	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
m) Electromyography	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
n) Endoscopy equipment			
GI equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Bronchoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Cystoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Rhinoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Laparoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
o) Hemodialysis capability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
p) Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
q) Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Local jospital (2

- r) Nuclear Medicine [access is desirable]
- s) Radiation Therapy Facility
- t) Serum osmolality measurement
- u) Total parenteral nutrition capability
- v) Ultra sonographic equipment
- w) Urethral pressure profile & cystometry
- x) Computerized Medical Records w/Searching Capabilities
- y) Medical Library w/Literature Searching Capabilities
- z) Veterinary Library w/Literature Searching Capabilities

		mi. away)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	3 hrs drive away
<input checked="" type="checkbox"/>	<input type="checkbox"/>	

If any of the above equipment or facilities are available off-site, please explain how the resident can access them for case management, research, or study.

Human medical library (Dalhousie University, Halifax) is open-access.

5. Clinical caseload information (this information should reflect the caseload of the prior 12 months at the primary site)

Total Cardiology caseload per year:

350 new cases, plus rechecks

Number of echocardiographic examinations per year:

6. Number of cardiac catheterizations per year:

5-8 cath; 300 echoes

Didactic Learning Opportunities and Research Requirements: In recognition of the importance of scientific discovery as a critical mission of the ACVIM, all Residency Training Programs shall include an assessment period or instruction and/or participation in creative scholarship which will foster an appreciation of, competency in, and contribution to the knowledge base of their respective specialty and which will support their development as clinician scientists. This requirement is fulfilled through satisfactory completion of A, B and one of C [See CM 5.E and 5.F]:

A. Journal Club: Critical review of literature, minimum of eighty (80) hours during the program. Describe how this requirement is met or exceeded.

Once-weekly general internal medicine resident rounds (48 weeks/year; history over the last 5-6 years suggests 30 will actually be done) = 30 hours X 4 years = 120 hours.

B. Cardiology-focused Educational Experiences: Minimum of one hundred fifty (150) hours during the program. Describe how this requirement is met or exceeded. [See CM 5.E.2]

One-on-one veterinary cardiology journal club, human cardiology journal club, cardiology textbook chapter review, and unusual echo/ECG review. 2 hours/week X 45 weeks/year X 3 years = 270 hours.

C. Successful completion of any one of the options listed below. Describe how this will be fulfilled or exceeded in the individual trainee's specific application.

1. Successful completion of at least two (2) of the following three (3) short courses/workshops offered by ACVIM either on-line or at the Forum:
 - A. Critical evaluation of veterinary medical/biomedical literature
 - B. Grant Writing
 - C. Study, design and participation in clinical trials
2. Documented submission of a grant proposal (by advisor letter)
3. Acceptance and presentation at a scientific meeting of an abstract (oral or poster) of original work
4. Documented completion (by advisor letter) of a prospective or retrospective research program pertinent to the candidate's specialty
5. Documented completion (by advisor letter) of graduate course work in biostatistics, research methods, and/or research ethics.

Master's of Science degree occurs jointly with residency program. This involves 12+ credits of graduate coursework (biostatistics, research methods, etc. - item #5), completion of the project (item #4), and presentation of results (item #3) for all; and item #2 and parts A and B +/- C of item #1 depending on the nature of the project.

NOTE: Item #4 says "Documented completion... of a research program..." but I think it is meant to be "research

project," right? (the project takes place within the larger research program)

Note: Letters of documentation by advisors will need to accompany the final submission of the Resident Logs to the Residency Training Committee in order to qualify for a resident certificate.

Please note, any Program Director or Candidate that significantly changes or alters this Residency Training Program before completion must notify ACVIM, in writing, before the changes are made to ensure that the proposed changes are approved.

Significant changes could include, but are not limited to:

- transferring from one program to another
- alterations in program duration
- switching to a 'dual board' program
- enrolling in an institutional graduate program
- change of Program Director or Resident Advisor

As Program Director, I verify that I have read the Certification Manual and that the above information is an accurate reflection of this Residency Training Program.