



RESIDENCY TRAINING PROGRAM REGISTRATION  
2019-2020  
CARDIOLOGY

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](http://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="(765) 496-6743"/>
Mobile Phone:	<input type="text"/>
E-mail:	<input type="text" value="hogandf@purdue.edu"/>
Mailing Address:	<input type="text" value="VCS, CVM&lt;br/&gt;625 Harrison St.&lt;br/&gt;W. Lafayette, IN 47907-2026"/>

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

Primary Site Location:	Length of Training Program:
<input type="text" value="Purdue University"/>	<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
<a href="#">Laurent Couetil - LAIM</a> <a href="#">Janice Sojka Kritchevsky - LAIM</a> <a href="#">Sandra Taylor - LAIM</a> <a href="#">Stacy Tinkler - LAIM</a> <a href="#">R. Timothy Bentley - Neurology</a> <a href="#">Stephanie Thomovsky - Neurology</a> <a href="#">Melissa Lewis - Neurology</a> <a href="#">Deborah Knapp - Oncology</a> <a href="#">Michael Childress - Oncology</a> <a href="#">Christopher Ful</a>	

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*
<a href="#">Giannine Bedoya Nader 7.16.18 - 7.16.21 (Daniel Hogan)</a> <a href="#">Sara Ostenkamp 7.15.19 - 7.15.22 (Daniel Hogan)</a>			



American College of **Veterinary** Internal Medicine

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**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 ECVP	Comments
Harm HogenEsch	Gross	ACVP	
Willie Reed	Gross	ACVP	
Tiffany Lyle	Gross	ACVP	
Margaret Miller	Gross	ACVP	
Yava Jones	Gross	ACVP	
Craig Thompson	Clinical	ACVP	
Joanne Messick	Clinical	ACVP	
Abby Durkes	Gross	ACVP	
Andrea Santos	Clinical	ACVP	

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
Hock Gan Heng	ACVR	
Caroline Fulkerson	ACVR	
Chee Kin Lim	ECVDI	

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
Jeff Ko	Anesthesia	

Ann Weil	Anesthesia	
Tokiko Kushiro-Banker	Anesthesia	
Paulo Gomes	Dermatology	
Jean Stiles	Ophthalmology	
Wendy Townsend	Ophthalmology	
Gert Breur	Surgery	
Mark Rochat	Surgery	
Lynette Freeman	Surgery	
Kathy Salisbury	Surgery	
Aimee Brooks	Critical Care	
Elizabeth Thomovsky	Critical Care	
Sarah Malek	Surgery	
Mariej Risselada	Surgery	
Jennifer Koziol	Therigenology	

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 checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
b) Cardiac catheterization capability (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
c) Echocardiography equipment (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
d) Fluoroscopy (must be on site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
e) Pacemaker interrogation (must be on site or available off-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
f) Standard radiological equipment (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
g) Electrocardiography (must be on-site)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
hi) Brainstem Auditory Evoked Response Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
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"/>	On-site
j) Colloid oncotic pressure measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
k) Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
l) Electroencephalography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
m) Electromyography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
n) 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
o) Hemodialysis capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
p) Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
q) Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
r) Nuclear Medicine [access is desirable]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
s) Radiation Therapy Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
t) Serum osmolality measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
u) Total parenteral nutrition capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
v) Ultra sonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
w) Urethral pressure profile & cystometrography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site

- x) Computerized Medical Records w/Searching Capabilities
- y) Medical Library w/Literature Searching Capabilities
- z) Veterinary Library w/Literature Searching Capabilities

<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site

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.

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

Total Cardiology caseload per year:

900-1200

Number of echocardiographic examinations per year:

850-1125

6. Number of cardiac catheterizations per year:

>70

**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.

We meet with residents for resident journal rounds on a weekly basis for 1-2 hours. During the first year of the residency about 40% of these periods are replaced by book discussion to enhance cardiovascular physiology knowledge. We also have a service journal club where students are invited to join and that is 2+ hours once every 3 weeks.

The residents also participate in small animal internal medicine journal club rounds (weekly) and have access to oncology and neurology journal club on a weekly basis.

- 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]

There are a number of ways that the resident will meet this requirement. We have times set aside during the regular day to discuss advanced topics in cardiac physiology, advanced imaging techniques, novel therapeutic approaches, and advanced pacemaker programming.

We also have book club that typically meets weekly during periods of enhanced didactic education for the resident where it temporarily replaces the weekly journal club. Starting in the third year of training we set aside separate time (at least 2 hours every other week) to go over books which will facilitate the resident's preparation for the certifying examination.

We have cath lab rounds at least on a bi-weekly basis.

We join a local children's hospital on a sporadic basis for their cath lab/surgical rounds.

We have a weekly seminar series where cardiovascular topics are regularly discussed.

We spend many hours discussing research topics, study planning, study design, interpretation of results and clinical impact.

We have dedicated hours in the latter part of the second year and throughout the third year where we go through challenging ECGs, physiologic recordings, gross specimens, and nuclear cardiac imaging.

The resident will attend at least two ACVIM meetings as well as at least one human cardiology meeting (typically ACC or AHA) during their training.

- 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.

The residents in our program are expected to fulfill options 2, 3, 4, and 5. Additionally, they will take courses in critical evaluation of the biomedical literature, grant writing, study design/clinical trials, and biostatistics as part of their graduate 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.**