



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.

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="(508) 839-5395"/>
Mobile Phone:	<input type="text"/>
E-mail:	<input type="text" value="john.rush@tufts.edu"/>
Mailing Address:	<input type="text" value="Cummings School of Veterinary Medicine
200 Westboro Rd.
N. Grafton, MA 01536"/>

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

Primary Site Location:	Length of Training Program:
<input type="text" value="Tufts 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.

<input type="text" value="John Rush
Suzanne Cunningham
Vicky Yang
Emily Karlin"/>

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.

John Rush - Cardiology
 Suzanne Cunningham - Cardiology
 Vicky Yang - Cardiology
 Emily Karlin - 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
Daniela Bedenice - LAIM Dominik Faissler - Neurology, ECVN Lisa Barber - Oncology Carrie Wood - Oncology Kristine Burgess - Oncology Mary Anna Labato - SAIM Cynthia Webster - SAIM Orla Mahony - SAIM Elizabeth Rozanski - SAIM Michael Stone - SAIM Therese O	

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*
Louis Dos Santos	7.16.18	7.16.21	(John Rush)
Katherine Lopez	7.16.19	7.15.22	(John Rush)



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
Joyce Knoll, VMD, PhD, DACVP	Clinical	DACVP	
Leslie Sharkey, DVM, PhD, DACVP	Clinical	DACVP	
Nicholas Robinson, BVSc, PhD, MACVSc, DACVP, DANZCVS		DACVP	
Elizabeth O'Neil, BSc, MBA, DVM, MVSc, DACVP		DACVP	
Perry Bain, DVM, PhD, DACVP	Clinical	DACVP	

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
Dominique Penninck, PhD, DVM, DACVR, DECVDI	DACVR	
Mauricio Solano, MV, DACVR	DACVR	
Amy F. Sato, DVM, DACVR	DACVR	
Michele Keyerleber, DVM, DACVR	DACVR	

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
Amanda Abelson, DVM, DACVAA, DACVECC	Anesthesiology	
John Berg, DVM, MS, DACVS	Surgery	

Armelle de Laforcade, DVM, DACVECC Lisa Freeman, DVM, PhD, DACVN W. Michael Karlin, DVM, MS, DACVS Michael P. Kowaleski, DVM, DACVS Raymond K. Kudej, DVM, PhD, DACVS Deborah Linder, DVM, DACVN Sean B. Majoy, DVM, MS, MA, DACVECC Robert McCarthy, DVS, MS, DACVS Emily McCobb, DVM, DACVAA Stefano Pizzirani, DVM, PhD, DACVS, ACVO Stephanie Pumphrey, DVM, DACVO Elizabeth Rozanski, DVM, DACVIM, ACVECC Annie Shea Wayne, DVM, MPH, DACVECC Lois Wetmore, DVM, MS, ScD, DACVA	ECC Nutrition Surgery Surgery Surgery Nutrition ECC Surgery Anesthesia Ophth Ophtho ECC ECC Anesthesia	

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"/>	
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"/>	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"/>	Endocrinology and biomarkers done at IDEXX; all others are on-site
j) Colloid oncotic pressure measurement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	On-Site when working
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 type="checkbox"/>	<input checked="" type="checkbox"/>	
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 type="checkbox"/>	<input checked="" type="checkbox"/>	Ordered as needed
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-Site
y) Medical Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-Site
z) Veterinary Library w/Literature Searching Capabilities	<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:

~2500

Number of echocardiographic examinations per year:

6. Number of cardiac catheterizations per year:

Will not let me fill in echo exams above in form - maybe 3500 echo exams, and maybe 35-75 cardiac cath

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.

Weekly journal reviews and discussions exceed this number with a mixture of cardiology-specific journal clubs and SAIM directed journal clubs

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]

We are scheduled to meet twice a week most weeks, Tuesday and Thursday am from 8-9, for a cardiology-specific event (occasionally skipped due to a Department meeting or other scheduling conflict). These sessions vary between book chapter review, cardiology journal club, ECG or physiology tracing review, review of angiograms, or pathology review. Residents also go to a national cardiology meeting at least 2 times during the residency.

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.

All our prior residents have completed more than one of the items listed as #2, #3 and/or #4. We consider these 3 items to be core goals of the residency, and the last 3 residents have completed all 3 of these.

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.