



RESIDENCY TRAINING PROGRAM REGISTRATION
2019-2020
LARGE ANIMAL INTERNAL MEDICINE

Part One

New applications for ACVIM Residency Training Programs must be received by the Residency Training and Credentials Committee (RTCC) 90 days prior to any residents beginning training. Before completing this form, please review the general and specific requirements for Large Animal Internal Medicine (LAIM) 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 LAIM RTCC 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 any 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 Large Animal Internal Medicine.

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 LAIM Diplomate of ACVIM

Program Director's Contact Information:

Work Phone:	
Mobile Phone:	
E-mail:	cschwarzwald@vetclinics.uzh.ch
Mailing Address:	Winterthurerstrasse 260 Zurich, 8057Switzerland

Select Practice Area: [Equine](#)

- LAIM Equine
- LAIM Food Animal
- LAIM Mixed

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

Primary Site Location:

Length of Training Program:

2. Resident Advisor(s): **Must be Diplomate(s) of ACVIM in the Specialty of Large Animal Internal Medicine**

Christina Eberhardt

3. List all Supervising Diplomates on site: (Must be an active Diplomate(s) of ACVIM in the Specialty of Large Animal Internal Medicine or ACVIM Associate). **At least 2 ACVIM Diplomates are required, one of whom must be ACVIM LAIM.**

Colin Schwarzwald - LAIM
Christian Gerspach - LAIM
Katharyn Mitchell - LAIM
Angelika Schoster - LAIM
Christina Eberhardt - LAIM

4. Please list all ACVIM Diplomates onsite responsible for supervision of clinical training who are specialists in areas other than LAIM.

Name and Specialty	Comments

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*
Julia van Spijk 6.1.17 - 5.31.20 (Angelika Schoster)			
Lynette Ramsay 10.1.17 - 9.30.20 (Colin Schwarzwald)			
Angela Becsek 9.1.18 - 4.1.22 (Christina Eberhardt)			
Isabelle Piotrowski 1.1.19 - 12.31.21 (Angelika Schoster)			



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LARGE ANIMAL INTERNAL MEDICINE

Part Two

Part Two of the Large Animal Internal Medicine Residency Training process addresses general features that apply to all current residents. These questions will be used to provide the Residency Training and Credentials Committee with information needed to judge the structure, quality, scope, and consistency of training provided.

This document outlines the content of each particular training program and is a template of the requirements that each resident will complete as part of the certification process. Any deviation from this registration is considered a change in the training program and requires written notification and approval by the LAIM Residency Training and Credentials Committee (RTCC) prior to those changes taking effect. Examples of changes to a program are listed at the end of this document. Of particular note, any outside rotations not listed on this program registration document must be preapproved by the RTCC in order to count towards the 104 weeks of clinical training. Outside rotations not being included in 104 weeks of required clinical training do not require RTCC approval.

Current Date: January 29, 2019

Program Director Name: Colin Schwarzwald Dr. med.vet, PhD, Dipl. ACVIM, Dipl. ECEIM

(Must be an active Diplomate of ACVIM in the specialty of Large Animal Internal Medicine)

Name of Sponsoring Institution (Residency Training Program): Clinic for Equine Internal Medicine, Equine Department, Vetsuisse Faculty, University of Zurich, Switzerland

Species of the Program being registered:

- Equine [checked]
Food Animal []
Mixed []

Location of Secondary Site (if applicable):

A secondary training site is a satellite clinic or educational facility at a separate location that is directly associated with the primary hospital or sponsoring institution (SI), or an independent facility for which a current and continuous relationship exists with the Residency Training Program. Offsite training occurs at a facility that is independent from the SI. (CM 4.F.8)

N/A

Outside Rotations/Other Sites & Name of Supervising Diplomates (if applicable):

If adequate personnel or facilities are unavailable for all required resident training at the primary training site, the PD must make arrangements at secondary training sites to fulfill all requirements (e.g. must submit a Training Agreement Form). The LAIM RTCC must approve secondary training site experiences before residents participate in external rotations that contribute to the minimum training requirements of the program (e.g. in order to count towards the 104 weeks of clinical training. (CM 6.E.5) If the radiology or pathology requirements are being fulfilled at secondary training sites, a Training Agreement Form must be submitted.

No off-site rotations. Radiology and pathology rotations are completed on-site (see 4. & 5.). All other relevant specialties are also available on-site (see 6.).

Please complete the following table (provide case numbers from previous year or provide estimates if hard numbers are not available):

Primary site: actual numbers [] estimated numbers []

Secondary site: actual numbers estimated numbers
 Other site: actual numbers estimated numbers

	Total No. Annual Hospital Cases	Average No. Cases Presented to Hospital Daily	Average No. Outpatient Cases Treated Daily	Average No. Inpatients Treated Daily	Total No. Annual Ambulatory Visits	Average No. of Ambulatory Cases Per Visit
Equine	750	2	1	10	0	0
Equine (Secondary site)*						
Equine (Other site)*						
Food & Fiber	750	2	<1	10	0	0
Food & Fiber (Secondary site)*						
Food & Fiber (Other site)*						
Total	1500	2	1	20	0	0

*For residency training programs in which training weeks occur at more than one site.

Describe:

The above numbers refer to the internal medicine sections (clinics).
 For the equine hospital, the total case load is approximately 2200, including 1250 surgery cases and 200 sports medicine cases and an average of 6 cases presented per day (thereof 3.5 in surgery).
 For the farm animal hospital, the total case load is approx. 2200, including 650 surgery cases and 800 repro cases, with an average of 6 cases presented per day (thereof 1.8 in surgery and 2.2 in repro).

The Equine and Farm Animal Department are on the same campus but run separate hospitals at our institution. The residency program is Equine emphasis. However, collaboration is established and the Clinic for Equine Internal Medicine consults on approximately 30-40 cases per year for the Farm Animal Department, conducting echocardiograms.

The equine residents are also participating in journal/book clubs and seminars in the Farm Animal Department and they have to opportunity to complete clinical rotations in the Farm Animal Department.

1. Length of Training Program (years):

3y

Describe:

The program duration is 3 years, usually with the option to add a 4th year in case of exam failure.

2. Advanced Degree:

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

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

One research project is conducted by every resident, time off-clinics is allocated to complete such a project. The candidate can choose to conduct the project without working towards a graduate degree, can choose to work towards the Dr. med. vet degree (local graduate degree, thesis based, 1 project similar to a MS degree but without course work) or work towards a PhD. If the candidate desires to fulfil requirements of a PhD, additional training time before starting or after completion of the residency is required.

3. If ACVIM Associate Members are involved in resident training, please list them here:

Note: An ACVIM Associate is a veterinarian certified as a specialist by non-ACVIM specialty organizations such as the European College of Equine Internal Medicine (ECEIM). ACVIM grants certain privileges to the ACVIM Associate. (CM 3.B)

Associate Members	Associate Member Specialty
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4. Please list all Diplomates of the American College of Veterinary Pathology or European College of Veterinary Pathology in the areas of clinical pathology or gross/anatomic pathology associated with residency training. If *off-site*, please explain the situation, and the method/arrangements for providing direct contact with the resident, and provide the RTCC with a "Training Agreement Form" signed by individual(s) providing direct supervision. Please indicate certifying body in the table, i.e., ACVP or ECVF.

Name of Diplomate(s)	Specialty Certifying Body	Clinical or Gross Anatomic	Comments
Martina Stirn	ECVCP	Clinical	On site
Marilisa Novacco	ECVCP	Clinical	On site
Monika Hilbe	ECVP	Gross	On site
Anja Kipar	ECVP	Gross	On site
Nicole Borel	ECVP	Gross	On site
Paula Grest	ECVP	Histopathology	On site
Kristiane Krudewig	ECVP	Gross	On site
Frauke Seehusen	ECVP	Gross/Histopathology	On site

5. Please list all Diplomates of the American College of Veterinary Radiology or European College of Veterinary Diagnostic Imaging associated with residency training. If *off-site* or at a secondary site, please explain the situation, and the method/arrangements for providing direct contact with the resident, and provide the RTCC with a "Training Agreement Form" signed by individual(s) providing direct supervision. Please indicate certifying body in the table, i.e., ACVR or ECVDI.

Name of Diplomate(s)	Specialty Certifying Body	Comments
Patrick Kircher	ECVDI	On site
Stephanie Ohlert	ECVDI	On site
Matthias Dennler	ECVDI	On site
Ines Lautenschläger	ECVDI	On site
Francesca Del Chicca	ECVDI	On site

6. Please list the Diplomates available for consultation in the areas of dermatology, surgery, ophthalmology, anesthesiology, emergency/critical care, clinical nutrition, clinical pharmacology, sports medicine/rehabilitation and/or theriogenology that are certified by the American Board of Veterinary Specialties or the European Board of Veterinary Specialties. If *off-site* or at a secondary site, please explain the situation, and the method/arrangements for providing direct contact with the resident, and provide the RTCC with a "Training Agreement Form" signed by individual(s) providing direct supervision. Please indicate certifying body in the table.

Name of Diplomate(s)	Specialty Certifying Body	Comments
Regula Bettschart	ECVAA	On site, Equine emphasis
Simone Ringer	ECVAA	On site
Anette Kutter	ECVAA	On site
Barbara Steblaj	ECVAA	On site
Andrea Schwarz	ECVAA	On site
Rahel Jud	ECVAA	On site
Anton Fuerst	ECVS - Large Animal	On site, Equine emphasis
Andrea Bischofberger	ACVS - Large Animal	On site, Equine emphasis
Jan Kuemmerle	ECVS - Large Animal	On site, Equine emphasis
Michelle Jackson	ECVS - Large Animal	On site, Equine emphasis
Felix Theiss	ECVS - Large Animal	On site, Equine emphasis
Karl Nuss	ECVS - Large Animal	On site, Food Animal
Michael Weishaupt	ACVSMR	On site
Antonio Pozzi	ACVS (SA), ACVSMR	On site
Sebastian Knell	ECVS (Small Animal)	On site

Federico Massari	ECVS (Small Animal)	On site
Phillip Schmierer	ECVS (Small animal)	On site
Stefan Grundman	ECVS (Small Animal)	On site
Simon Pot	ACVO	On site
Katrin Voelter	ECVO	On site
Antonella Rampazzo	ECVO	On site
Anette Liesegang	ACVCN	On site
Marcus Clauss	ECVCN	On site
Claude Favrot	ECVD	On site
Ana Rostaher	ECVD	On site
Nina Fischer	ECVD	On site
Michael Haessig	ECBHM	On site
Heiner Bollwein	ECBHM	On site
Doreen Zoller	ECAR	On site
Ulrich Bleul	ECBHM	On site
Christian Gerspach	ACVIM – LAIM (Food Animal)	On site
Frank Steffen	ECVN	On site
Katrin Beckmann	ECVN	On site
Tony Glaus	ACVIM - Cardiology	On site
Peter Deplazes	EVPC (Parasitology)	On site
Carla Rohrer Bley	ACVR - Rad. Oncology, ECDVI	On site
Valeria Meier	ACVR - Rad. Oncology	On site
Claudia Reusch	ACVIM – Small Animal, ECVIM-CA	On site
Bernhard Gerber	ACVIM – Small Animal, ECVIM-CA	On site
Filictas Boretti	ACVIM – Small Animal, ECVIM-CA	On site
Nadja Sieber-Ruckstuhl	ACVIM – Small Animal, ECVIM-CA	On site
Claudia Müller	ACVIM – Small Animal	On site
Peter Kook	ACVIM – Small Animal, ECVIM-CA	On site
Claudia Kümmerle –Fraune	ACVIM – Small Animal, ECVIM-CA	On site
Barbara Willi	ACVIM – Small Animal, ECVIM-CA	On site
Natalie Hofer-Inteeworn	ACVIM – Small Animal, ECVIM-CA	On site
Laura Beatrice	ACVIM- Small Animal	On site
Nadja Siegrist	ACVECC, ECVECC	On site
Jean Michel Hatt	ECAMS	On site
Maya Kummrow	ACZM, ECZM (ZHM)	On site
Henning Richter	SVLAS	On site

The following questions will be used to provide the RTCC 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.

7. Does your training program consist of a minimum of 104 weeks? If no, please describe. (CM 6.K)

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

Describe:

8. Does your training program provide on-site residency training by at least two ACVIM Diplomates (one of whom must be a Diplomate in the Specialty of Large Animal Internal Medicine)? If no, please provide a detailed explanation of how a second Diplomate is involved in training.

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

Describe:

9. Does each resident in your program spend a minimum of 52 weeks on clinical rotations under the direct supervision of at least one or more ACVIM LAIM Supervising Diplomates? (CM 6.K.1)

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

Describe:

10. Does each resident in your program spend an additional 16 weeks on clinical rotation under the direct supervision of one or more Supervising ACVIM Diplomates (with 6 of those weeks being supervised by ACVIM Diplomate(s) other than those referred to above) or individuals with ACVIM Associate status, in the Specialty of LAIM, Small Animal Internal Medicine, Cardiology, Neurology or Oncology? (CM 6.K.2 - Specialists with whom the resident has trained must provide the Program Director and/or Resident Advisor documentation of this interaction).

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

Describe:

11. Does each resident in your training program spend an additional 36 weeks in training, not necessarily under direct supervision, in either Large Animal Internal Medicine or related fields, or in writing, studying for examinations, attending scientific meetings, teaching, vacation, or obtaining experience with a radiologist, clinical pathologist, or other specialist? (Note that vacation time (no more than 2 weeks per year) can be counted toward these 36 weeks). (CM 6.K.3. Specialists with whom the resident has trained must provide the Program Director and/or Resident Advisor documentation of this interaction).

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

Describe:

12. Does each resident in your training program receive training from at least two other Board-certified specialists (not ACVIM)? These may be specialists in dermatology, theriogenology, surgery, anesthesiology, ophthalmology, emergency medicine and critical care, clinical pharmacology, sports medicine/rehabilitation, or clinical nutrition. The training must be direct consultation, not telephone or e-mail consultation.

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

Describe:

13. Does each resident in your training program have a minimum of 80 hours of training in diagnostic imaging? A minimum of forty (40) hours must be in direct contact with a board-certified veterinary radiologist interpreting radiographs, learning and evaluating the results of special imaging techniques, and attending radiology rounds and/or seminars. At least forty (40) more hours during the residency must be spent being directly trained in ultrasonographic imaging by either a radiologist or one or more LAIM diplomates with

advanced skills in ultrasonography. (CM 6.K.3. Specialists with whom the resident has trained must provide the Program Director and/or Resident Advisor documentation of this interaction).

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

Describe:

14. Does each resident in your training program have a minimum of 40 hours of direct contact with a board-certified veterinary clinical pathologist or anatomic pathologist evaluating clinical pathologic findings, performing necropsy examinations, reviewing cytology preparations and biopsies, and attending clinical pathologic conferences and/or seminars? (CM 6.K.3. Specialists with whom the resident has trained must provide the Program Director and/or Resident Advisor documentation of this interaction).

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

Describe:

15. 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 referring veterinarians? (CM 6.I.1) Is case management supervised and reviewed by an ACVIM Diplomate or ACVIM Associate? (CM 6.G)

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

Describe:

16. 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"/>

Describe:

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

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

Is a supervising Diplomate available for the majority of rounds?

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

If no, please describe how rounds are attended and supervised. (CM 6.I.3. Teaching Rounds: Residents must attend and participate in clinical rounds on a daily basis during the clinical training period. The resident should lead rounds discussions an average of once weekly.)

Describe:

18. Please indicate the availability of the following facilities or equipment (CM 6.E.2). 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.

	Available?		On Site?		Location of Off-Site Equipment
	Yes	No	Yes	No	
a) Standard radiological equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b) Ultrasonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c) Color flow/Doppler equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d) Cardiac catheterization capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e) Endoscopy equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
GI equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Bronchoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Cystoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Rhinoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Laparoscopy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
g) Serum osmolality measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
h) Colloid oncotic pressure measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i) Electrocardiography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
j) Blood Pressure Measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
k) Electroencephalography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
l) Electromyography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
m) Brainstem Auditory Evoked Response Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
n) Nuclear Medicine	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
o) Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
p) Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
q) Radiation Therapy Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Only for smaller individuals
r) Veterinary Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
s) Computerized Medical Records w/Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
t) Medical Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
u) Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
v) Hemodialysis capability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
w) Total parenteral nutrition capability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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.

19 (a). Are formal conferences, such as clinicopathologic conferences, journal clubs, or seminars held on a weekly basis? (CM 6.E.3. Residents must attend formal conferences such as clinicopathologic conferences, journal clubs, or seminars in internal medicine and related disciplines weekly throughout the calendar year)

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

Describe:

19 (b). Please list how many hours per week and how many weeks per year for each journal review activity (for example, a program may offer a Journal Review in Food Animal one hour per week for 48 weeks per year and Equine one hour per week for 32 weeks per year). (CM 6.I.2. Journal Club: Routine and regular attendance and participation in a critical review of the literature, e.g. journal club; must attend 80 hours minimum during the residency training program)

Journal Review Activity	How Many Hours Per Week	How Many Weeks Per Year
Equine Journal Club	45 min/wk	48

20. Please provide a description of the conferences, etc., that are provided and the typical schedule. (As required by question 20(a) above)

A weekly Journal Club is taking place throughout the entire year (Tuesday morning) except for holidays. The Journal Club lasts 45 minutes and 1-2 papers (chosen by the Diplomates or the residents in consultation with Diplomates) are read in advance and discussed during Journal Club. Residents and faculty rotate in presenting papers for the Journal Club.

Weekly advanced case discussions or practical teaching labs are taking place throughout the entire year on Thursday morning, except for holidays. They last 45 minutes. For case discussions, usually one case (or several cases of the same disease) is chosen and literature is searched, distributed and read in advance and discussed during the case discussions. Case discussions are held under the guidance and active participation of the faculty (Diplomates). The practical teaching labs typically include topics such as ECG readings, diagnostic ultrasound, echocardiography, and other procedures. Faculty actively participate in these training rounds.

The Journal Club, the case discussions and the practical teaching labs are dedicated to topics related to Equine Internal Medicine and they are not shared with surgery or other disciplines. However, residents and diplomates of other disciplines are welcome to participate.

Combined equine-food&fibre animal topic rounds take place on 3 out of 4 Fridays each month, lasting 45 min. The residents prepare presentations according to a preset topic schedule and then present the current literature to their peers. Presentations and literature are distributed. The rounds are always attended by one or several ACVIM-LAIM (Food Animal or Equine) Diplomates who help leading the discussions.

A weekly seminar series is held together with the other sections of the Equine Department (surgery, ophthalmology, anesthesia, sports medicine). Seminars are held on Wednesday mornings throughout the entire year except for holidays. They last 30 minutes with additional 10 minutes of discussion if required. A specific topic or organ system is chosen for every seminar series, and each series lasts approximately 6-12 months. All faculty, interns and residents (all sections) rotate in presenting different topics. Each resident is expected to prepare at least 2 presentations per year during this seminar series. Faculty also actively participate in the seminar series by guiding residents and giving presentations.

Histology teaching rounds with the pathology department are organized at least 4 times a year (or more often if current topics arise). An organ system is selected and recent cases discussed under the guidance of the pathology faculty with active participation of the medicine residents and faculty. This takes place on a Monday morning every 3 months and lasts 45 minutes. Residents are required to participate and medicine faculty are encouraged to participate.

Clinical pathology rounds with the clinical pathology department are organized at least 4 times a year (or more often if current topics arise). Cases discussed under the guidance of the clinical pathology faculty with active participation of the medicine residents and faculty. This takes place on a Wednesday at noon and lasts 45 minutes. Residents are required to participate and medicine faculty are encouraged to participate.

Radiology rounds are organized with the diagnostic imaging department on an intermittent basis. A topic or cases are chosen and relevant images discussed under the guidance of a board certified radiologist with equine emphasis. All residents are required to participate and medicine faculty are encouraged to participate.

Clinical ward rounds are held every morning, starting at 8.00 am. These rounds are joined with Equine Surgery and serve to discuss in-house patients and emergency cases and to refer cases that have been admitted on emergency to the respective service. "Sit-down" teaching rounds are held on Tuesdays. On Fridays these rounds are extended to clinical teaching rounds (case presentations) where residents are required to present 1-2 current interesting cases for further discussion (8.00-8.30

am). Relevant material such as endoscopy images, radiographs, blood work and theoretical background is presented. All faculty on clinics are required to participate. These rounds are followed by ward rounds.

Once a month (Friday morning) formal case presentations (in class room) are held for the Equine and Farm Animal Hospital. All section of the Farm Animal and Equine Hospital rotate through presenting cases. Residents are required to present these cases, and each resident is required to present 1-2 cases throughout their residency. These presentation last for approximately 30 minutes and all faculty are required to attend and participate actively in the subsequent discussions.

21. Is the resident required to give one or more formal presentations at a conference or in an educational setting on a yearly basis? (CM 6.E.3)

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

Describe:

22. How many major veterinary medical or medical meetings is each resident able to or expected to attend during the residency training program? (CM 6.E.3). *The resident must attend at least one major veterinary medical or human medical meeting during the residency*

None	One	Two	> Two
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Describe:

23. Are one or more publications required as part of the training program? (CM 6.I.7. *The resident must publish at least one first author scientific manuscript relevant to LAIM*)

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

Describe:

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

Yes	No	Optional	Number
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1

Describe:

25. Does each resident in your program receive regular institutional reviews of their progress and performance by the supervising Diplomate, hospital section, or other Departmental committee or advisory group? (Note: LAIM Candidates are required to receive a minimum of two (2) formal evaluations per year. These evaluations should provide the resident an unbiased comprehensive review of his/her progress as an ACVIM Candidate and include reasonable suggestions for improvement, if indicated. Evaluations should be presented in writing and discussed with each Candidate). (CM 6.M)

Yes	No	Frequency (i.e., quarterly, annually?)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	2/year

Written evaluation:

Yes	No
-----	----

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Shared with resident:

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

Describe:

26. Does each resident **complete at least 1 of the following** to complete requirements for research/scholarly activity?
(CM 6.C.6 and 6.I.7)

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

Describe:

As residents are required to complete a research project of their own, more than one of these requirements are usually met. Presentation of an abstract of their research is highly encouraged and this goal is met in all but most unusual circumstances.

- A) Successful completion of at least 6 hours of seminars or classes recognized by the ACVIM and covering the following subjects: critical review of the veterinary medical/biomedical literature; grant writing; study design and participation in clinical trials (these seminars may be offered at the ACVIM Forum).
 - B) Submission of a grant proposal.*
 - C) Acceptance and presentation at a scientific meeting of an abstract (either oral or poster) of original work.
 - D) Documented completion of a prospective research program pertinent to the candidate's specialty.*
 - E) Completion of a retrospective research project pertinent to the candidate's specialty.*
 - F) Completion of graduate work in biostatistics, research methods and/or research ethics.*
- *Must be documented by a letter from the Resident Advisor

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

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

Describe:

In 2018, the Vetsuisse Faculty of the University of Zurich was placed number 15 in the Shanghai Raking among 200 universities worldwide in the area „Veterinary Sciences“.
The University of Zurich ranked 73th in the QS Ranking and 54th in the Academic Ranking of World Universities in 2018.

The Vetsuisse Faculty of the University of Zurich had been accredited (as the 2nd European Veterinary School after Helsinki) by the EAEVE (European Association of Establishments for Veterinary Education) and the FVE (Federation of Veterinarians of Europe). The EAEVE re-accreditation was successfully passed in 2017.

List of approved residency programs at the Vetsuisse Faculty, University of Zurich:
European College of Bovine Health Management
European College of Equine Internal Medicine
American College of Veterinary Internal Medicine (SAIM, LAIM)
European College of Veterinary Internal Medicine (CA)
European College of Veterinary Internal Medicine (CA - Cardiology)
European College of Veterinary Surgeons (CA, Equine, Food Animal)
European College of Veterinary Anesthesiology and Analgesia
European College of Animal Reproduction (with specialties)
European College of Veterinary Diagnostic Imaging

American College of Veterinary Radiology
European College for Veterinary Ophthalmology
European College of Veterinary Dermatology
European College of Veterinary Neurology
European College of Veterinary Pathology
American College of Veterinary Pathology
European College of Veterinary Pharmacology and Toxicology
American College of Veterinary Radiology (Radiation Oncology)
European College of Zoological Medicine (avian)
American College of Zoological Medicine
European College of Veterinary Public Health
European College of Laboratory Animal Medicine
European College of Veterinary and Comparative Nutrition
European Veterinary Parasitology College
European College of Veterinary Clinical Pathology
American College of Sports Medicine and Rehabilitation

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
- Outside or elective rotations not listed on this form

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.