

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:	Dr. Joe Smith	
Must be an active LAIM Dipl	omate of ACVIM	
Program Director's Contact	Information:	
Work Phone:		
Mobile Phone:		
E-mail:	Animal197@gmail.com	
Mailing	2412 Lloyd Vet Med, ISU, VDPAM	
Address:	1809 S. Riverside Drive	
	Ames, IA 50011-3619	
Select Practice Area: Food LAIM Equine LAIM Food Animal LAIM Mixed	d Animal	
1. Location of Sponsoring Ir Primary Site Location:	nstitution (Primary Site of Training Pro	gram): Length of Training Program:
Iowa State University		3 - 5 year
Resident Advisor(s): Mu:	st be Diplomate(s) of ACVIM in the	Specialty of Large Animal Internal Medicine

Amanda Kreuder

Joe Smith		
Jenna Bayne		

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.

Brett Sponseller - LAIM David Wong - LAIM Paul Plummer - LAIM Katarzyna Dembek - LAIM Amanda Kreuder - LAIM Joe Smith - LAIM Jenna Bayne - 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
Wendy Ware - Cardiology	
Jessica Ward - Cardiology	
Melissa Tropf - Cardiology	
Margaret Musser - Oncology	
Chad Johannes - Oncology & SAIM	
Albert Jergens - SAIM	
Dana LeVine - SAIM	
Jean-Sebastien Palerme - SAIM	
Laura Van Vertloo - SAIM	

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.

	Start date	End Date	
Resident Name	(mm/dd/yyyy)	(mm/dd/yyyy)	Resident Advisor Name*
None listed			



February 12, 2019

Current Date:

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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.

Program Director Name: Amanda Kreuder, DVM, PhD, DACVIM (LAIM)	
(Must be an active Diplomate of ACVIM in the specialty of Large Animal Internal Medicine)	
Name of Sponsoring Institution (Residency Training Program): Iowa State University Lloyd Veterinary Medical Center	
Species of the Program being registered: Equine 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)	/
None	

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.

Additional outside rotations based on interest of the resident may also be obtained, such as rotations at other universities specializing in a caseload that is diverse from that seen at ISU (ie - University of Montreal for intensive dairy medicine experience), however, these rotations are not a core component of the residency and will not comprise any of the required blocks of time to complete the residency training.

Please complete the follow					nates if hard numb	ers are not available):
	Primary site: Secondary site:	actual number actual number	_	ated numbers		
	Other site:	actual number		ated numbers		
	Other site.	actual number	5 650111	ated fidilibers		
	Total Annu Hosp Case	ual Cases ital Presente es Hospit	S Outpatient ed to Cases ral Treated Daily	Average No. Inpatients Treated Daily	Total No. Annual Ambulatory Visits	Average No. of Ambulatory Cases Per Visit
Equine	219	Daily 8-10		10	1593	2
Equine (Secondary site)*	213	0-10	, J	10	1000	
Equine (Other site)*						
Food & Fiber	276	7 10-1	1 5	8	1374	23 examined / 5 treated
Food & Fiber (Secondary site	e)*					
Food & Fiber (Other site)*						
Total						
*For residency training progra	ams in which train	ing weeks occur a	at more than one site	•		
	(includes medic theriogenology animals seen p year. Average routine service	cine, surgery, ar). Food animal a er visit is larger cases presente	cent calculated case of the riogenology cambulatory cases in than expected; the dot to hospital and ouge inpatients were expected.	ases) and all equiclude herd produse are the same introduction.	ine cases (medicir ction visit, thus the numbers as provide culated based on 2	ne, surgery and number of ed to COE this 250 days providing
Length of Training Prog	, ,		3-5 years			
Describe:			advanced degree is esidency training pro			
2. Advanced Degree: Y Masters: PhD:	es No	Optional				
If an advanced degree is training program:	required or op-	tional, please b	riefly describe how	the graduate tra	aining is incorpora	ted into the residency
Both a Masters and a course work and rese activities directly relat take the candidate rou how their program wo scheduled and paid to be allowed to go to class. 3. If ACVIM Associate Me Note: An ACVIM Associate	arch time. The ed to the resider ughly 4 years to uld be structure or by candidate casses, even who mbers are involved.	candidates would not year. In complete the red would be outlined as arranged been on clinical during wed in resident to	Id be required to sp As such, if the minin equired 104 weeks on ned at the time of co by sponsoring gradulty.	end a minimum omum time comminate training (26 were andidate applicate that mentor and whem here:	of ½ time participati tment on clinics wa eks per year). The ion. Graduate cou vould require a the	ing in clinical as utilized it would detailed plan of rses would be sis. Time would
Equine Internal Medicine (E	CEIM). ACVIM g	ırants certain priv	ileges to the ACVIM	1 Associate. (CM 3	3.B)	

Associate Member Specialty

Associate Members

N/Δ	NI/A
IN/A	N/A

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 ECVP.

Name of Diplomate(s)	Specialty Certifying	Clinical or Gross	Comments
	Body	Anatomic	
Amanda Fales-Williams, DVM, PhD	ACVP	Gross Anatomic	
Joseph Haynes, DVM, PhD	ACVP	Gross Anatomic	
Jesse Hostetter, DVM, PhD	ACVP	Gross Anatomic	
Jodi Smith, DVM, PhD	ACVP	Gross Anatomic	
Micheal Yaeger, DVM, PhD	ACVP	Gross Anatomic	
Austin Viall, DVM, MS	ACVP	Clinical	
Shannon Hostetter, DVM, PhD	ACVP	Clinical	
Claire Andreasen, DVM, PhD	ACVP	Clinical	
Tomislav Jelesijevic, DVM, PhD	ACVP	Gross Anatomic	
Shankumar Mooyottu, DVM, PhD	ACVP	Gross Anatomic	

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
Kristina G. Miles, DVM	ACVR	
Elizabeth A. Riedesel, DVM, MS	ACVR	
Jennifer Fowler, DVM, MS	ACVR	

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
James O. Noxon, DVM	ACVIM	Dermatology
Darren Berger, DVM	ACVD	Dermatology
Tamara Swor, DVM	ACVS/ACVECC	Large Animal Surgery - Eq
Stephanie Caston, DVM	ACVS	Large Animal Surgery - Eq
Kevin Kersh, DVM	ACVS	Large Animal Surgery - Eq
Dane Taraniuk, DVM, MS	ACVS	Large Animal Surgery - Eq
Cheryl Hedlund, DVM, MS	ACVS	Small Animal Surgery
Karl Kraus, DVM, MS	ACVS	Small Animal Surgery
William Hoefle, DVM, MS	ACVS	Small Animal Surgery
Eric Zellner, DVM	ACVS	Small Animal Surgery
Gil Ben-Shlomo, DVM, PhD	ACVO	Ophthalmology
Rachel Allbaugh, DVM, MS	ACVO	Ophthalmology
Lionel Sebbag, DVM	ACVO	Ophthalmology
Bonnie H. Kraus, DVM	ACVAA/ACVS	Anesthesiology
Michael Curtis, DVM, PhD	ACVAA	Anesthesiology

David Wong, DVM, MS	ACVIM/ACVECC	Emergency/critical care
April Blong, DVM	ACVECC	Emergency/critical care
Rebecca Walton, DVM	ACVECC	Emergency/critical care
Johnathan Mochel, DVM, MSc, PhD Tyler Dohlman, DVM, MS	ECVPT ACT	Clinical pharmacology Theriogenology
Caitlin Wiley-Messerschmidt, DVM,	ACT	menogenology
MS	ACT	Theriogenology
Swanand Sathe, DVM	ACT	Theriogenology
·		5 3,
The following questions will be used to proceed consistency of training provided.	provide the RTCC with information needed to judge	e the structure, quality, scope, and
supervision is defined as follows: The Sup Diplomate and the resident are on duty a	ing clinical training, with the time required specified pervising Diplomate and resident are participating in and interactively and concurrently managing cases. It, but must remain physically available for consultations clinical rotations.	a clinical practice in which both the The Diplomate need not personally
7. Does your training program consist of a	minimum of 104 weeks? If no, please describe.(CM 6	K)
Yes No		
Describe:		
	te residency training by at least two ACVIM Diplomate dicine)? If no, please provide a detailed explanation of	
Yes No		
Describe:		
9. Does each resident in your program sper or more ACVIM LAIM Supervising Diplomate	nd a minimum of 52 weeks on clinical rotations under thes? (CM 6.K.1)	ne direct supervision of at least one
Yes No		
Describe:		
Supervising ACVIM Diplomates (with 6 of th individuals with ACVIM Associate status, in	end an additional 16 weeks on clinical rotation under ose weeks being supervised by ACVIM Diplomate(s) othe Specialty of LAIM, Small Animal Internal Medicine, tent has trained must provide the Program Director and	other than those referred to above) or Cardiology, Neurology or Oncology?
Yes No		
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
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
Describe: Board certified theriogenologists are part of the primary clinicians on duty for the Food Animal and Camelid Hospital so training is received in these areas on a regular basis, training is also received from board certified large animal surgeons on a case by case basis; other specialists as listed above are always available and utilized for direct consultation on clinical cases as needed depending on the nature of the case
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
Describe: A dedicated 40 hours is currently spent under direct supervision of a board-certified veterinary radiologist for training in radiographic interpretation and techniques. A dedicated 40 hours is spent being trained in ultrasonographic imaging by both a radiologist and LAIM diplomates with advanced ultrasonography skills.
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
Describe: A dedicated 40 hours is spent in direct contact with a board-certified clinical pathologist with additional training/direct contact on a case by case basis in anatomic pathology.

15. Does each resident in your program participate in patie and decision making, client communication, case follow-management supervised and reviewed by an ACVIM Diplor	up, and cor	mmunica	tion with r	eferring veterinarians? (CM	
Yes No					
Describe: All cases are managed via a tea involved in case management.	m approach	with a re	esident and	clinician (ACVIM diplomate)	directly
16. Is a complete medical record using the problem oriente (Medical records must be retrievable)	ed veterinary	y medica	I record sy	stem maintained for each ind	ividual patient?
Yes No					
Describe:					
17. Does the resident participate in clinical rounds on a dail Yes No	ly basis whil	e on clini	cal rotation	ns?	
Is a supervising Diplomate available for the majority of rouny Yes No	rised. (CM 6				
Describe:					
18. Please indicate the availability of the following facilities training site, or at a different location. (In the Location columequipment is located if off-site.) For facilities that are not on this section.	mn, indicate -site, please	on-site for describe	or primary the situat	location or the name of the fa ion and availability in the space	acility where the ce at the end of
	Available Yes N		On Site? 'es No	Location of Off-Site Equip	ment
a) Standard radiological equipment					
b) Ultrasonographic equipment					
c) Color flow/Doppler equipment d) Cardiac catheterization capability					
e) Endoscopy equipment					
GI equipment					
Bronchoscopy					
Cystoscopy					
Rhinoscopy					
Laparoscopy					
f) Clinical Pathology capabilities:					
(includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)					
g) Serum osmolality measurement					

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) Colloid oncotic pressure measurement		\boxtimes		
Electrocardiography		\boxtimes		
Blood Pressure Measurement		\boxtimes		
:) Electroencephalography		\boxtimes		
Electromyography		\boxtimes		
n) Brainstem Auditory Evoked Response Equipment		\boxtimes		
n) Nuclear Medicine		\boxtimes		
) Computed Tomography		\boxtimes		
) Magnetic Resonance Imaging		\boxtimes		
ı) Radiation Therapy Facility		\boxtimes		newly opened spring 2019
) Veterinary Library w/Literature Searching Capabilities		\boxtimes		
c) Computerized Medical Records w/Searching Capabilities		\boxtimes		
) Medical Library w/Literature Searching Capabilities			\boxtimes	University of Iowa
ı) Intensive Care Facility – 24 hours		\boxtimes		
Hemodialysis canability		X		_

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.

Medical library is accessible through lowa university system and interlibrary loan program.

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

w) Total parenteral nutrition capability

Describe:

Weekly resident clinicopathlogic seminars and large animal internal medicine journal clubs, as well as bi-weekly general food animal journal clubs, are all required attendance for residents.

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)

	How Many Hours Per	How Many Weeks Per Year
Journal Review Activity	Week	
Large Animal Internal Medicine Journal Review (Equine and Food Animal)	1	40
Food Animal journal club (production, theriogenology, surgery and medicine topics)	1	26

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

Weekly attendenace at resident clinicopathlogic seminars presented by a variety of clinical residents and specialities at the ISU LVMC is expected of each residency candidate.

Morbidity and mortali attendance is expect	ty rounds for the Food Animal hospital and field services unit are held on a monthly basis and resident ed.
21. Is the resident requir (CM 6.E.3)	ed to give one or more formal presentations at a conference or in an educational setting on a yearly basis'
Yes No	
Describe:	One resident seminar (1 hour) and one case seminar (20 minutes) are presented by each resident every year during the clinicopathologic seminars.
	Additional presentation at local or national conferences or as a lecturer in underclass veterinary courses is also encouraged.
	eterinary medical or medical meetings is each resident able to or expected to attend during the residence E.3). The resident must attend at least one major veterinary medical or human medical meeting during the
None On	e Two > Two
Describe:	Candidate is strongly encouraged to attend ACVIM Forum annual conference in at least 2 of the 3 years of the residency. Attendance at annual lowa Veterinary Medical Association meetings is also encouraged. If candiate wishes to attend additional conferences, this is discussed with mentors and decided on a case by case basis.
23. Are one or more publi scientific manuscript relev	ications required as part of the training program? (CM 6.I.7. The resident must publish at least one first authorant to LAIM)
Yes No	
Describe:	Development of a research project and a minimum of one publication is required to be completed during the residency.
24. Does the training pro	gram require a research project? Please indicate the <u>number of research projects required</u> .
Yes No	Optional Number 1
Describe:	Minimum of 1 project, additional projects are encouraged if funding and time is available.
Diplomate, hospital section minimum of two (2) formation his/her progress as an A	in your program receive regular institutional reviews of their progress and performance by the supervising on, or other Departmental committee or advisory group? (Note: LAIM Candidates are required to receive and evaluations per year. These evaluations should provide the resident an unbiased comprehensive review of CVIM Candidate and include reasonable suggestions for improvement, if indicated. Evaluations should be discussed with each Candidate). (CM 6.M)
Yes No	Frequency (i.e., quarterly, annually?)

Quarterly for the first year of residency, then every 6 months thereafter	
Written evaluation:	
Yes No	
Shared with resident:	
Yes No	
Describe: Copy of evaluation provided.	
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	
Describe: Exact requirement varies based on resident interests.	
A) Successful completion of at least 6 hours of seminars or classes recognized by the ACVIM and coveri following subjects: critical review of the veterinary medical/biomedical literature; grant writing; study design 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 Progr	am?
Yes No	
Describe:	\neg

Please note, any Program Director or Candidate that significantly changes or alters this Residency Training Program before completion must notify ACVIM, in writing, <u>before</u> 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.