



**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](http://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:	(607) 253-3100
Mobile Phone:	
E-mail:	mbf6@cornell.edu
Mailing Address:	930 Campus Road, CVM Department of Clinical Sciences, Cornell University Ithaca, NY 14853

Select Practice Area: **Mixed**

- LAIM Equine
- LAIM Food Animal
- LAIM Mixed

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

Primary Site Location:	Length of Training Program:
<a href="#">Cornell University</a>	<a href="#">3 year</a>

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

<a href="#">Dorothy Ainsworth</a>
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Tom Divers  
Maria Julia Felipe  
Gillian Perkins

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.**

Dorothy Ainsworth - LAIM  
Thomas Divers - LAIM  
Maria Julia Felipe - LAIM  
Gillian Perkins - LAIM  
Toby Pinn-Woodcock - LAIM  
Joy Tomlinson - 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
Bruce Kornreich - Cardiology Nancy Moise - Cardiology Romain Pariaut - Cardiology Curtis Dewey - Neurology Jonathan Wood - Neurology Margaret McEntee - Oncology Cheryl Balkman - Oncology Kelly Hume - Oncology	

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*
Barbara Delvescovo	7.17.17	7.16.20	(Maria Julia Felipe)
Rachelle Thompson	7.16.18	7.19.21	(Gillian Perkins)



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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.**

Current Date:

Program Director Name:

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

Name of Sponsoring Institution (Residency Training Program):

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)*

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.*

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

Primary site:	actual numbers	<input type="checkbox"/>	estimated numbers	<input checked="" type="checkbox"/>
Secondary site:	actual numbers	<input type="checkbox"/>	estimated numbers	<input type="checkbox"/>
Other site:	actual numbers	<input type="checkbox"/>	estimated numbers	<input type="checkbox"/>

	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	600	3	2	5		
Equine (Secondary site)*						
Equine (Other site)*						
Food & Fiber	300	2	2	5		
Food & Fiber (Secondary site)*						
Food & Fiber (Other site)*						
Total	900	5	4	10		

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

Describe:

Numbers describe LAIM cases.  
All LAIM faculty members are board certified (Ainsworth, Divers, Felipe, Perkins)

1. Length of Training Program (years):

36 months

Describe:

2. Advanced Degree:

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

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

n/a

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
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 Body	Clinical or Gross Anatomic	Comments
Elizabeth Buckles Gerald Duhamel Kathleen Kelly Sean McDonough Andrew Miller Jeanine Peters-Kennedy Teresa Southard Maria Forzan	ACVP ACVP ACVP ACVP ACVP ACVP ACVP ACVP	Anatomic Anatomic Anatomic Anatomic Anatomic Anatomic Anatomic Anatomic	Weekly anatomic path teaching rounds; Daily histopath teaching rounds

Erica Behling-Kelly Tracy Stokol Julie Allen Ashleigh Newman	ACVP ACVP ACVP ACVP	Clinical Clinical Clinical Clinical	Weekly Clin Path teaching rounds based on case materials from CUHA.
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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
Erin E. Epperly Ian R. Porter Philippa Johnson Peter V. Scrivani Margret Thompson Amy Yeager	ACVR ACVR ECVDI ACVR ACVR ACVR	Daily imaging teaching rounds     Ultrasonography specialist

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
Bill Miller	ACVD	Available for derm consults on all large animal cases.
Norm Ducharme, Susan Fubini, Lisa Fortier, Alan Nixon, Jonathan Cheetham, Heidi Reesink, Rolfe Radcliffe	All are certified in ACVS	LA surgeons work closely with the LAM to optimize case management. Weekly teaching rounds (2 hr/wk)
Nita Irby; Tom Kern; Eric Ledbetter; Filipe Espinheira	All are certified in ACVO	LAM residents assist with ophtho cases
Robin Gleed; Luis Campoy; Manuel Martin-Flores, Jordyn Boesch	All are certified in ACVA and/or ECVA	Weekly teaching rounds for house officers & faculty
Rolfe Radcliffe; Tom Divers, Gretch Schoeffler, Dan Fletcher, Robert Goggs	All are certified in ACECC	LA critical care (Radcliffe, Divers)
John Loftus	ACVIM and residency in Clinical Nutrition	Nutrition consults on large animal cases
Christopher Frye, Norm Ducharme	certified ACVSMR or ACVS	Available for rehab consults

Soon Cheong, Mariana Diel de Amorim	All are certified in ACVT	Examine LA reproductive cases, available for consults, combined rounds with LAM weekly
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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:

Yes, clinical rounds presentation, journal club, research projects, manuscript writing training, biostatistics training, didactic or clinical skills teaching, studying for boards, visiting other practices, workshops, etc.  
This is a 36-month program.

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:

Please see the list of faculty in those specialties listed in section 6 and their activities in sections 6 & 11. Face to face consultations on cases typically occurs with all of those individuals listed. Frequent interactions occur with theriogenology, surgery, ophthalmology and anesthesiology specialists.

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:

Residents directly consult with the imaging faculty on individual cases (e.g. when radiographs on their cases are being evaluated), and attend imaging rounds when their cases are being discussed. Residents practice ultrasonography on a daily basis, and receive training from LAIM specialists and imaging specialists on their cases.

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:

Residents review cytology slides with the clin path faculty or attend weekly clin path teaching rounds. Residents interact with anatomy faculty on specific cases (necropsy floor), attend weekly gross path rounds ('Show and Tell') and/or read histology of their cases weekly.

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  
   

Describe: Yes, all the above, supervised by large animal ACVIM Diplomate, regular and after hours.

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  
   

Describe: Yes, we use EzyVet electronic medical record system, and residents work with students to input clinical history, physical exam, differential diagnosis list, treatment, clinical assessment, discharge statements, client and rDVM communication, and estimates.

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

Yes      No  
   

Is a supervising Diplomate available for the majority of rounds?

Yes      No  
   

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: Residents attend the morning and evening barn walk-around rounds, often leading the discussion depending upon the case/subject material under the supervision of the ACVIM Diplomate. Residents will attend sit-down teaching rounds with the students, and will lead these once a week also under the supervision of the ACVIM Diplomate.

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:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(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
- h) Colloid oncotic pressure measurement
- i) Electrocardiography
- j) Blood Pressure Measurement
- k) Electroencephalography
- l) Electromyography
- m) Brainstem Auditory Evoked Response Equipment
- n) Nuclear Medicine
- o) Computed Tomography
- p) Magnetic Resonance Imaging
- q) Radiation Therapy Facility
- r) Veterinary Library w/Literature Searching Capabilities
- s) Computerized Medical Records w/Searching Capabilities
- t) Medical Library w/Literature Searching Capabilities
- u) Intensive Care Facility – 24 hours
- v) Hemodialysis capability
- w) Total parenteral nutrition capability

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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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.

The only equipment absent is hemodialysis, and we would refer a case if that was an option for the species, availability in other referral hospitals and cost.

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:

Weekly, residents lead journal club and present 2 recent publications (every Wednesday), and present LA Med Case with literature review (every Thursday), all under ACVIM diplomate supervision. Residents join LA surgery and pathophysiology rounds twice a week (Mondays and Fridays), and occasionally substitute one of this for Anesthesiology or Cardiology rounds. On Fridays (noon) they join Anatomic Pathology rounds ('Show and Tell'). Residents attend and rotate in presenting at Joint rounds with Ambulatory faculty and residents once a month. Infectious Disease Rounds (college wide) are held 4 times a year; Dept Clin Sci faculty seminars are held every other Friday (afternoon) in the Fall and Spring. NYS Veterinary Conference is held in the fall every year, and residents attend/present the research abstracts, present a case of the year, and attend the lectures of invited speakers..

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
Medical and/or physiological topics of large animals	minimum 1	48

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

Weekly, residents lead journal club and present 2 recent publications (every Wednesday), and present LA Med Case with literature review (every Thursday) on equine or farm animal topics, all under ACVIM diplomate supervision. For more details see 19a.

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: Residents often present once or twice during their program research findings at the ACVIM or at another nationally recognized veterinary meeting (e.g. AAEP or AABP); expectation described in their job contract. In addition, they present one or two research abstracts in the NYS veterinary conference at Cornell.

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: Each resident attends a major veterinary medical meeting each year of their program. Typically AAEP or AABP in the first year, and ACVIM in the second and third years.

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: We expect at least 2 publications, and the expectation is described in their job contract

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"/>	at least 1

Describe: At least one clinical research project is expected.

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"/>	Formal, in person, documented performance dialogue twice a year; informal feedback is provided periodically.

Written evaluation:

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

Shared with resident:

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

Describe:

Performance dialogue happens in person with resident and all LAIM faculty twice a year. LAIM faculty ask for input from LVTs and others working routinely with residents. Dialogue follows a format that covers performance, communication skills, ACVIM credentials, training areas of interest, research projects, publications, teaching opportunities, timelines, specific requests, areas for improvement, and future career. Students in each rotation provide written evaluations to residents, and they have access to them. We also ask residents for their input on how faculty and hospital operations can improve residency program, teaching, patient care, etc. The dialogue is documented, reviewed and signed by resident and residency program director, and filed.

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:

- 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:

If the resident expresses an interest in gaining additional teaching experience, they will also present one hour in the didactic teaching curriculum.

**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.