



**RESIDENCY TRAINING PROGRAM REGISTRATION  
2018-2019  
NEUROLOGY**

Part One

New applications for ACVIM Residency Training Programs must be received by the Residency Training Committee (RTC) 90 days prior to any residents beginning training. Before completing this form, please review the general and specific requirements for Neurology 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 Neurology RTC must be obtained. The Candidate and/or Program Director must notify ACVIM, in writing before the changes are made to ensure that the proposed changes are approved. Significant changes could include, but are not limited to the following: changes in Program Director or advisors, transferring from one program to another, alterations in program duration, locations of secondary site training, switching to a 'dual board' program, or enrolling in an institutional graduate program.

**Notice:** The data collected in this form is necessary both for the ACVIM to maintain its accreditation as a Registered Veterinary Specialty Organization and also is required for renewal of the residency training program. Some of the data collected is required of every specialty and some is specific to the specialty of Neurology.

**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. Annie Chen-Allen

Must be a Diplomate of ACVIM in the Specialty of Neurology or an approved Diplomate of the European College of Veterinary Neurology (ECVN) for at least 5 years with 3 years' experience training residents

Program Director Contact Information:

Work Phone:	509-432-6763
E-mail:	<a href="mailto:avchen@wsu.edu">avchen@wsu.edu</a>
Mailing Address:	PO Box 647010 Pullman, WA 99164-7010

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

Primary Site Location: <span style="border: 1px solid black; padding: 2px;">Washington State University</span>	Length of Training Program: <span style="border: 1px solid black; padding: 2px;">3 Year</span>
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2. Resident Advisor(s): Must be a Diplomate of ACVIM in the Specialty of Neurology or a Diplomate of the ECVN and boarded for at least one year. Each RA advises and supervises no more than two residents at one time.

<span style="border: 1px solid black; padding: 2px;">Annie Chen-Allen (ACVIM-Neuro)</span> <span style="border: 1px solid black; padding: 2px;">Yael Merbl (ECVN)</span>
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3. Supervising Diplomates: Must be a Diplomate of ACVIM in the Specialty of Neurology or a Diplomate of the ECVN. The supervising diplomate must be active in the practice of the specialty and must maintain clinical competency in the field. **The sponsoring institution must provide resident with onsite presence of any combination of at least two ACVIM or ECVN Neurology Diplomates with full-time clinical responsibilities.**

Annie Chen-Allen – ACVIM Neurology  
Yael Merbl - ECVN

4. All Diplomates of ACVIM or ECVIM responsible for supervision of clinical training who specialize in areas other than Neurology.

Name and Specialty	Comments
Rance Sellon – SAIM and Oncology Janean Fidel - Oncology Jillian Haines – SAIM Lynne Nelson – SAIM and Cardiology Debra Sellon – LAIM Jennifer Gold – LAIM Macarena Sanz – LAIM Jamie Kopper - LAIM	

5. Residents currently participating in your training program, along with the beginning date of the program, expected ending date of the program, and designated Resident Advisor.

Resident Name	Start date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Resident Advisor Name*
Jessica Chavera	7/15/17	7/15/20	Annie Chen-Allen
Hilary Wright	7/15/18	7/15/21	Annie Chen-Allen



RESIDENCY TRAINING PROGRAM REGISTRATION  
2019-2020  
NEUROLOGY

Part Two

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

Current Date:

Program Director Name:

Program Director Email Address:

Must be a Diplomate of ACVIM in the Specialty of Neurology or an approved Diplomate of the European College of Veterinary Neurology (ECVN) for at least 5 years with 3 years' experience training residents

Name of Sponsoring Institution (Primary Site):

1. Length of Training Program:

	Yes
2 years	<input type="checkbox"/>
3 years	<input checked="" type="checkbox"/>
Other -provide details	<input style="width: 100%; height: 20px;" type="text"/>

2. Advanced Degree:

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

Briefly explain how the degree is integrated into the residency program:

Residents are enrolled in the WSU graduate school while concurrently doing a 3-year neurology residency. Residents have to maintain a GPA of 3.0 or above in order to remain in the graduate school. The thesis master's degree is in Veterinary Medicine and residents are required to take specific courses during the 3 year period. Residents are enrolled in about 12-16 hours per semester. Credits are given for hospital rotation, neurology journal club, didactic courses in clinical neurology, research, seminar and outside elective courses. Three credit hours in statistics and in research grant writing are required. The master's degree requires a completion of a project and a defense prior to finishing the degree. A manuscript along with a thesis is submitted to the masters committee prior to defense. PhD is possible if resident is able to find a PhD advisor within the college. The preliminary course work is done within the 3 year residency and the rest of the PhD requires approximately another 3 years post-residency work.

3. Please list all ACVIM, ECVIM or ECVN Supervising **Diplomates** (Cardiology, Large Animal Internal Medicine, Neurology, Oncology, Small Animal Internal Medicine) providing supervision **off-site** and explain the situation and the agreements provided for contact with

the resident. (Note, in Part One, current ACVIM/ECVN Supervising Diplomates are included; and you are requested to provide additional comments for off-site supervision here).

Name of Diplomate(s)	Specialty Certifying Body	Comments
N/A		

4. Please list all **Diplomates** of the American College of Veterinary Pathology or the European College of Veterinary Pathologists in the areas of clinical pathology or gross/histopathology associated with residency training. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name of Diplomate(s)	Specialty Certifying Body (ACVP or ECVF)	Clinical or Gross	Comments
Jane Wardrop	ACVP	Clinical	
<a href="#">Cleverson Souza</a>	ACVP	Clinical	
<a href="#">Kevin Snekvik</a>	ACVP	Gross	
<a href="#">Gary Haldorson</a>	ACVP	Gross	
<a href="#">Danielle Nelson</a>	ACVP	Gross	
<a href="#">Josh Ramsey</a>	ACVP	Gross	
<a href="#">Chrissy Eckstrand</a>	ACVP	Gross	
<a href="#">Allan Pessier</a>	ACVP	Gross	
<a href="#">Kyle Taylor</a>	ACVP	Gross	

5. Please list all **Diplomates** of the American College of Veterinary Radiology or the European College of Veterinary Diagnostic Imaging associated with residency training. If off-site, please explain the situation, and the arrangements for direct contact with the resident.

Name of Diplomate(s)	Specialty Certifying Body (ACVR or ECVDI)	Comments
Greg Roberts	ACVR	
<a href="#">John Mattoon</a>	ACVR	
<a href="#">Tom Wilkinson</a>	ACVR	
<a href="#">Ashley Hanna</a>	ACVR	

6. Please list all **Diplomates** available for consultation in the areas of dermatology, surgery, ophthalmology, anesthesiology, emergency/critical care, clinical nutrition, clinical pharmacology, behavior, and/or theriogenology. If off-site, please explain the situation and the arrangements provided for contact with the resident.

Name of Diplomate(s)	Specialty Certifying Body	Comments
<a href="#">Boel Fransson</a>	ACVS	
<a href="#">Tina Owen</a>	ACVS	
<a href="#">Bonnie Campbell</a>	ACVS	
<a href="#">Steve Martinez</a>	ACVS	
<a href="#">Peter Gilbert</a>	ACVS	
<a href="#">William Dernell</a>	ACVS	
<a href="#">Tamara Grubb</a>	ACVA	
<a href="#">Robert Keegan</a>	ACVA	

Katrina Mealey	ACVCP	Clinical Pharmacology
Ahmed Tibary	ACVT	
Linda Martin	ACVECC	Critical Care
Tandi Ngwenyama	ACVECC	Critical Care

The following questions will be used to provide the Residency Training Committee 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. Is this a traditional or non-traditional residency training program? *A traditional neurology residency is a two (2) or three (3) year postgraduate training program, with a minimum of ninety six (96) weeks of supervised clinical training with a majority of the time spent at one location. A non-traditional neurology residency allows for training that may occur in non-contiguous blocks of time over an extended time period.*

Traditional	<input checked="" type="checkbox"/>
Non-traditional	<input type="checkbox"/>

For non-traditional programs, please provide a detailed description of the residency program, including length of program, proposed annual schedule, and the amount of time of direct Diplomate supervision for each location of the residency. The resident must complete the residency in blocks of time no less than four weeks in length and attend a minimum of 20 weeks of training per year. The training period may not exceed a total of five years.

8. The ACVIM Neurology Certification Manual (CM) requires that each resident experience 75 weeks (minimum) of clinical Neurology training under the supervision of either a Diplomate of ACVIM in the Specialty of Neurology or a Diplomate of ECVN. **The 75 weeks should include at least 50 weeks of direct supervision (see definition in CM) and the remainder as indirect supervision (indirect supervision is satisfied by the Supervising Diplomate Neurologist being available for face-to-face contact with the resident at least 4 days per week).**

Please provide an outline of planned yearly schedule, including number of weeks of direct and indirect supervision (i.e. in year 1, the resident will be directly supervised for 25 weeks etc.) A table similar to the example below outlining the proposed weekly schedule of duties for the residents should be provided:

**EXAMPLE TABLE ONLY:**

	Year I	Year II	Year III
Medical Neurology *			
Neurosurgery			
Neurology/Neurosurgery Direct Supervision	36	36	
Neurology/Neurosurgery - Indirect Supervision			34
Internal Medicine	4	2	2
Clinical Pathology	2		
Radiology	2		
Neuropathology		2	2
Other Rotation (please list the name of			

each rotation)			
		1	
	2	4	4
Research	4	5	8
Independent Study			
Vacation	2	2	2
<b>Total</b>	<b>52</b>	<b>52</b>	<b>52</b>

Numbers indicated are in "weeks".

\* Many residencies are a combined neurology / neurosurgery program with no distinct separation between the services. Some programs, however, have separate training with a surgery service and this example includes that possibility in describing the weekly rotations.

The example table is only a listing of a proposed weekly schedule for each of the three years of a typical 3-year residency program, including all that is required by ACVIM without making any specific recommendations.

Please indicate the outline of planned yearly schedule here:

	Year I	Year II	Year III
Medical Neurology *			
Neurosurgery			
Neurology/Neurosurgery - Direct Supervision	38	32	25
Neurology/Neurosurgery - Indirect Supervision			4
Internal Medicine	4		
Clinical Pathology	1	1	
Radiology	1	1	
Neuropathology			1
Other Rotation (please list the name of each rotation):			
Other: Orthopedics	2		
Other: Cardiology		2	
Research	4	10	10
Independent Study		4	10
Vacation	2	2	2
<b>Total **</b>	<b>52</b>	<b>52</b>	<b>52</b>

\* Many residencies are a combined neurology / neurosurgery program with no distinct separation between the services. Some programs, however, have separate training with a surgery service.

\*\*The totals should add up to 52 weeks.

9. Describe how daily clinical case rounds are conducted and supervised:

Clinical rounds start at 8:15am each weekday morning. The boarded neurologist, residents, interns and fourth year students meet to go over patients. After patient rounds, we have an hour of topic rounds with the students. Topic rounds are lead by

either the boarded neurologist or the residents. There are also late afternoon patient rounds each weekday to go over cases for that day and to formulate a plan for the following day.

10. The neurology specialty requires that the resident spend at least 50 hours during the residency in the following rotations: Imaging, Clinical Pathology, Neuropathology, Electrodiagnostics and Neurosurgery as well as participate in emergency duties on a rotational basis. A training hour (see CM 7.C.7) will be defined as a minimum of one (1) continuous hour of direct contact time with a supervising specialist in the other field. A Training Agreement Form must be completed and signed by the Diplomate supervising the required training, regardless of whether the training occurs on site or off-site. **Please use the standardized "Training Agreement Form" found on the ACVIM website ([www.ACVIM.org](http://www.ACVIM.org)) to document proof of supervision for all required contact hours (imaging, clinical pathology, neuropathology, electrodiagnostics and neurosurgery) in rotations other than neurology.** One Training Agreement form is required per rotation per resident at the beginning of the residency. Forms do not need to be resubmitted each year as long as a valid Training Agreement Form is on file.

In addition, please provide a brief description of how each phase of this required training is accomplished.

Imaging: 50 hours with a Board-certified radiologist interpreting images, learning and evaluating the results of special imaging techniques and attending imaging rounds or seminars.

Neurology residents will be scheduled to rotate thru the radiology service for 2 weeks to train under the supervision of board certified radiologists for at least 50 hours. While on radiology clinical service, residents will work closely with the board certified radiologists in interpreting radiographs, myelograms, MR images and CT images of the nervous system of both small and large animals. Residents will also participate in radiology rounds with the radiology residents and 4<sup>th</sup> year veterinary students.

Clinical Pathology: 50 hours with a board-certified anatomic pathologist or clinical pathologist evaluating clinical pathologic findings, attending clinicopathologic conferences, or examining surgical sections.

Neurology residents will be scheduled to rotate thru the clinical pathology service for 2 weeks to train under supervision of board certified clinical pathologist for at least 50 hours. Residents will work closely with the board certified clinical pathologists in interpreting blood work, CSF cytology and tissue cytology on a case by case basis. Residents will also participate in clinical pathology rounds with clinical pathology residents and 4<sup>th</sup> year veterinary students on the clinical pathology rotation.

Neuropathology: 50 hours with a board-certified anatomic pathologist devoted to review of veterinary neuropathology. This time may be spent in lecture series, seminars, or a formal training program approved by the Residency Training Committee.

Our residents will attend a formal, college-wide neuropathology conference held by our pathology department once a month for an hour to go over neuropathology cases (12 contact hours per year). During this conference, our resident will present the clinical aspect of these cases while the pathology resident will provide the pathology aspect. This conference is supervised by both the boarded pathologists and neurologists. Additionally, our residents will spend 1 hour per week for 8 weeks with the pathology residents and faculty reviewing pathology of the nervous system in a formal class format (VPA 592) led by boarded pathologists (8 contact hours total). This course is held once every 2-3 years. Our residents will also spend one week during their third year on the pathology rotation working with a boarded pathologist on gross pathology of the nervous system thru the necropsy floor and also evaluating slides of the nervous system (both normal and abnormal).

Electrodiagnostics: 50 hours devoted to reviewing, evaluating, and interpreting different aspects of electrodiagnostics; including but not limited to, electroencephalography, electromyography, motor and sensory nerve conduction study and evoked potentials. Briefly state how the concepts of electrodiagnostics (including EEG) and their clinical application will be taught to residents during the training program. Specifically state whether or not the resident will have hands-on electrodiagnostic experience.

Residents will take a semester course on electrodiagnostics under the supervision of board certified neurologists. During this course 20 hour of lectures will be conducted on the concepts of EMG, MNCV, SNCV, BSEP, EEG and more. Residents will also perform electrophysiology (EMG, MNCV, SNCV, BSEP) on-site under the supervision of board certified neurologist on a case by case basis. Typically this takes anywhere from 30-90min. We perform about 10 BSEPs a year with a total of 10-15 hours of BSEP over a 3 year period. We also perform at least 5-10 cases of full electrophysiology work up for LMN diseases that mainly entails EMG and MNCV that take about 60-90min. This means we will have at least 15-30 hours of electrophysiology LMN workup in a 3 year period. We also discuss the results of these cases with the residents and the

resident on the case will formulate an official report for the medical record. Additionally, we do at least 5 muscle / nerve biopsies a year as part of the LMN workup. Prior to boards during the resident's third year, we also review electrophysiology cases as a group with the boarded neurologists and provide a mock exam which takes about another 10 hours. We also invite Dr. Collette Williams, who has had years of experience performing electrophysiology in animals at UC Davis, to WSU every 2-3 years to do a 2 day course on electrophysiology which includes both lectures and hands-on clinical experience (thru a lab) that then provides about 8-10 hours of electrophysiology experience. Residents also will attend brain camp where they will get some hours of electrophysiology experience. We do not have an EEG on site so EEG concepts will be learned thru lectures.

Neurosurgery: 50 hours participating in veterinary neurosurgical procedures. Please provide a specific description of the type of participation [i.e. observation, performance of neurosurgery], and credentials of those providing the training [i.e. ACVS vs. ACVIM Neurology/ECVN]. A Training Agreement Form must be completed if this training is provided by individuals other than the ACVIM (Neurology) or ECVN supervising Diplomate for the residency training program.

Neurology residents will participate in all neurosurgeries seen on the neurology clinical service as either the primary or assistant surgeon. Residents will initially be observing neurosurgeries but will eventually be actively involved in all neurosurgical procedures. Residents should be competent in performing hemilaminectomies, ventral slots, uncomplicated spinal stabilizations and uncomplicated craniectomies independently by the end of the residency training period. Most residents are able to perform TL hemilaminectomies independently by the end of their first year and ventral slots independently by the end of their second year. We will also hold 1-2 neurosurgery cadaver labs per year to further the residents neurosurgical skills. We perform on average 1-2 neurosurgeries a week which equates to at least 50 neurosurgeries a year, which will be sufficient to fulfill the 50 hour requirement.

Emergency Duty: Participation in emergency service on a rotational basis; cases seen may be limited to neurology. Please provide a specific description of the type of participation.

Residents are on call for all neuromedical and neurosurgical cases after-hours for 26 weeks out of a year. While on call, they support the interns on the emergency service, assess patients as needed, provide imaging (radiography, CT, MR) assessment, and perform as needed neurosurgeries. All of this is under the supervision of the board certified neurologist who is providing faculty backup for the resident on call. Our residents are required to call and update the faculty neurology backup on all admitted neuromedical and neurosurgical cases.

11. The neurology specialty requires that the resident spend a minimum of 80 hours involved in routine and regular participation in a critical review of the literature (e.g. journal club) during the residency training program with at least one board-certified neurologist in attendance at each journal club meeting. Please explain how this requirement is met:

Neurology journal club is held weekly on Tuesday morning under the supervision of the boarded neurologists thru out the residency period. Additionally, we do a neurosurgery journal club with our surgery department once a month and both the neurology and surgery faculty are present.

12. The neurology specialty requires that the advisor meet with the resident at 6 month intervals to assess, review and critique the resident's progress and weekly schedule of activities. The advisor must provide written documentation of the review that will be signed by both advisor and resident. Please explain how this is accomplished:

Our graduate school also has the same requirement. The boarded neurologists will meet with the residents every 6 months to have an official evaluation of the resident's performance. Each evaluation will also be officially documented on paper and be signed by all parties involved. Assessments will also be provided thru out the residency on a case by case basis. If there are concerns regarding the resident's performance, the boarded neurologists will meet with the resident immediately as needed.

13. The neurology specialty requires that the resident must complete a basic science or clinical research project that follows the scientific method approach and receives approval by the resident advisor (review CM section 7.E.5.c). Please describe how you plan for the resident to undertake, monitor, and complete a project. Include a timeline that the resident and mentor will use as a guide for completion of the project. Note that publication of this research project is not a requirement.

Our residents are also involved in our graduate program for a Master's degree which requires the resident to complete a scientific research project or a clinical investigative project. As part of the graduate program, the resident has to take a required course on grant writing during their first year which will help them come up with the project proposal. This grant will be

submitted intramurally to our graduate committee for potential funding up to \$7000. If additional funding is needed, the faculty mentor can submit for intramural funding to support the resident or we can apply extramurally. The resident should have funding by the end of the first year or beginning of second year. The project ideally should only take 1 year to complete so most of the project will be completed during the second year. During the third year of residency, the data will be analyzed and a manuscript and thesis will be written. The thesis will also be defended at the end of the third year in order to obtain the Master's Degree. The residents will each have a Master's Committee which consists of a chair (who is usually the resident advisor, boarded neurologist) and 2 other faculty members. This committee will be formed during the first year of the residency and the committee will meet regularly every 6-12 months depending on progress on project.

14. Please indicate the availability of the following facilities or equipment. 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. Please also provide the manufacturer and model of the unit for electrodiagnostic and imaging equipment.

	Available?		Location of equipment?
	Yes	No	(On-site or list site name)
a) Standard radiological equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
b) Ultrasonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
c) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
d) Electrocardiography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
e) Blood Pressure Measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
f) Radiation Therapy Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site, Philips SL 15 linac
g) Veterinary Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
h) Computerized Medical Records w/Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
i) Medical Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
j) Electromyography and nerve conduction study testing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
k) Evoked Response Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
l) Electroencephalography	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
m) Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site
n) Magnetic Resonance Imaging (include field strength)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On site, Philips 1 tesla

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, *especially with respect to the use of imaging and electrodiagnostic equipment*:

15. Residents must attend formal teaching conferences, resident seminars, grand rounds sessions, medicine journal clubs, neurobiology classes, etc. Residents must participate in these activities an average of four times per month, regardless of their duty status. Please describe the formal conferences, such as clinicopathologic conferences, journal clubs, or seminars that are held on a regular basis.

Every semester, residents are involved with the following:

- Neuropathology conference – held by pathology department, supervised by boarded pathologists, one hour session, once a month
- Neurology journal club – supervised by boarded neurologists, one hour session, once weekly
- Neurosurgery journal club – supervised by boarded neurologists and surgeons, one hour session, once monthly
- Advanced neurology course – supervised by boarded neurologists, focus on board topics (electrophysiology, neuropathology, neuroradiology..etc), one hour session, once weekly

- Seminars in Clinical Medicine – each resident is required to give a 20 min presentation on a topic of their choice (usually on neurology or on their research project) once a semester
- House officer rounds – this is held for one hour, once weekly, to discuss board related topics and for residents to present cases to other house officers and faculty

16. The resident must give a presentation at a formal conference at least once per year. This may include lectures in departmental courses for veterinary students, grand rounds presentations, presentation of papers or seminars at conferences, or participation in continuing education programs. Documentation of these presentations must be included in the neurology credentials packet of the resident.

All residents are required to take the course, Seminars in Clinical Medicine. This course requires all residents to present a 20 min oral presentation once a semester to the college. The residents are required to take this course for credit for their Master's Degree. The residents are also strongly encouraged to submit research abstracts for ACVIM. Additionally, residents are given opportunity to give neurology didactic lectures to third year veterinary students thru VM 552. The residents are also responsible for teaching the fourth year students on clinics. They will often lead daily topic rounds for fourth year veterinary students. There are also opportunities for residents to give presentations to different student clubs and organizations.

17. A Neurology Residency Training Program must provide at least 40 hours per year of intensive formal review sessions for residents on topics covered in the General and Specialty Examinations. The requirement could be met in part by attending an ACVIM Advanced Continuing Education (ACE) course, the ACVIM Neuroscience Course (Brain Camp) or an ACVIM Forum. Please describe how these opportunities will be made available to the resident.

The residents will be allowed to attend brain camp for 2 weeks during residency period. WSU pays for their registration fee. Residents can also attend ACVIM at least one time during the residency period. WSU will pay up to \$1000 a year for travel / registration to a meeting. The faculty (consists of all boarded specialists) also holds formalized courses for board review topics for both general and specialty examinations. Residents get credits for taking these courses each semester.

18. How many major veterinary medical or medical meetings are each resident able to or expected to attend during his/her training program?

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

Comments: Brain camp once, ACVIM Forum at least once

19. Are one or more publications required as part of the training program?

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

Comments: Yes, a paper submission is required for the Master's Degree

20. Please describe any additional pertinent information that the Residency Training Program should consider in its evaluation of this Training Program.

Our program is currently on probation due to loss of our other board certified neurologist as of September 2018. We currently have only one boarded neurologist (Dr. Chen-Allen) and have a board eligible neurologist at WSU as a clinical instructor who has also applied to our clinical track assistant professor position. An offer has been made to this board eligible neurologist, who will be sitting for boards for the radiology section this year. We have also made a second offer to another boarded neurologist. Our hope is to have 2 additional boarded neurologists here by September 2019 making a total of three faculty neurologists for our program.

Please note: The Program Director must report substantive changes within a Neurology RTP affecting compliance with Specialty of Neurology requirements to the Neurology RTC Chair within 14 days. This must be done in writing through the ACVIM office before the changes are made to ensure they are acceptable to the Neurology RTC.

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

I verify that the above information is an accurate reflection of this Residency Training Program.

Per the Certification Manual, each year, the Program Director (PD) must certify to the RTC/ RTCC and ACVIM, in writing, that they have read the ACVIM Certification Manual and understands their role in residency training.

Checking this box is an indication I have read the ACVIM Certification Manual and understand my role in the Residency Training Program.