



**RESIDENCY TRAINING PROGRAM REGISTRATION  
2019-2020  
SMALL ANIMAL INTERNAL MEDICINE**

**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 Small Animal Internal Medicine (SAIM) Residency Training Programs in the ACVIM Certification Manual (CM). The current version of the CM is available on the ACVIM website at [www.ACIVM.org](http://www.ACIVM.org).**

**Prior to making significant changes in a Residency Training Program, approval of the ACVIM and SAIM RTC must be obtained. The Candidate and/or Program Director must notify ACVIM, in writing. Significant changes could include, but are not limited to: 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 Small Animal Internal Medicine.

**For multi-site residency programs:** To ensure uniformity of training and compliance with current CM requirements, training programs which include multiple sites must provide detailed information regarding supervision and facilities available at each specific site(s). Multi-site programs, if any, are listed in Part Two.

Program Director Name:

[Dr. Julie R. Fischer](#)

The Program Director must be an active Diplomate of ACVIM in the Specialty of Small Animal Internal Medicine boarded for at least 4 years with 3 years experience training residents

Program Director's Contact Information:

Work Phone: [\(858\) 875-7500](#)

Mobile Phone:

E-mail: [jfischer@ethosvet.com](mailto:jfischer@ethosvet.com)

Mailing Address: [Veterinary Specialty Hospital of San Diego](#)  
10435 Sorrento Valley Rd. Ste. 100  
San Diego, CA 92121

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

Primary Site Location:

Length of Training Program:

[Veterinary Specialty Hospital of San Diego](#)

[3 year](#)

2. Resident Advisor(s): Must be Diplomate(s) of ACVIM in the Specialty of Small Animal Internal Medicine and boarded for at least 2 years with 1 year experience training residents. **Each Resident Advisor may supervise no more than 2 residents at a time.**

Kate Arnell  
 Jennifer DeBerry  
 Julie Fischer  
 John Hart

3. Supervising Diplomates on-site: Two on-site Diplomates boarded in Small Animal Internal Medicine are required - **2 ACVIM, or 1 ACVIM & 1 ECVIM**. The supervising diplomates must be active in the practice of the specialty and must maintain clinical competency in the field.

Katharine Arnell - SAIM  
 Jennifer DeBerry - SAIM  
 Julie Fischer - SAIM  
 John Hart - SAIM  
 Kevin Mallery - SAIM  
 Sheri Ross - SAIM

4. List all ACVIM Diplomates onsite responsible for supervision of clinical training who specialize in areas other than SAIM. If off-site, please explain the situation, and the method of providing direct contact with the resident.

Name and Specialty	Comments
Timothy Hodge - Cardiology Joao Orvalho - Cardiology Joy Delamaide Gasper - Neurology Robin Levitski - Neurology David Lipsitz - Neurology Tammy Stevenson - Neurology Andrea Flory - Oncology Brenda Phillips - Oncology	

5. List 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*
Natasha Loy Son	7/1/16	7/1/19	Jennifer DeBerry
Kathryn Robb	7/1/17	7/1/20	Julie Fischer
Molly Wingerd	7/1/17	7/1/20	Jennifer DeBerry
Nicole Strachan	7/15/18	7/31/21	Julie Fischer
Elizabeth Kubas	7/15/18	7/31/21	Johan Hart



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Part Two

Part Two of the Small Animal Internal Medicine Residency Training 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.

The SAIM Residency Training Committee may require supporting evidence for any statements made below. Per the Certification Manual (CM) section 9.C.2, at the time of annual program renewal, Program Directors may be asked to verify resident activities, including satisfactory clinical training, interaction with consultants, documentation of training in radiology and clinical pathology, documentation of off-site training, and documentation of study and education participation.

Current Date:

Program Director Name:

Must be an active Diplomate of ACVIM in the Specialty of Small Animal Internal Medicine boarded for at least 4 years with 3 years of experience training residents

Name of Sponsoring Institution (Residency Training Program):

1. 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). All requirements for both direct and indirect supervision must be met, as well as requirements for rounds and conferences. Refer to Section 9.C.1.e of the CM for definitions of secondary site and off-site experiences.

a) Secondary Site for multi-site program (if applicable):

Please attach specific information regarding the number of weeks scheduled at each site and which rotation requirements shall be met at each site.

b) Outside Rotations/Other Sites for specialty training (if applicable):

All rotations performed at a location other than that of the resident's program must be documented with a signed Residency Training Agreement Form from the specialist(s) providing the outside rotation. Residency Training Agreement Forms from the specialist(s) must also be included with the program renewal form. Please attach signed Residency Training Agreement Forms from all individuals providing off-site training of SAIM residents to this registration form. Residency Training Agreement Forms must be submitted annually with program renewal forms and with each new program request. This program application is not complete without Residency Training Agreement Forms for all outside rotations. If off-site rotations are added after program renewal, please submit necessary residency training agreement forms a minimum of 30 days before the resident departs for that off-site training.

2. Length of Training Program/Advanced degree:

a) Length in Years:

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"/>

b) Advanced Degree:

3. Please list all of the Diplomates of Veterinary Pathology in the areas of clinical or anatomic pathology approved by the American Board of Veterinary Specialties or European Board of Veterinary Specialties associated with residency training. If off-site, please attach signed Residency Training Agreement Forms from all individuals providing off-site training.

Name of Diplomate(s)	Clinical or Gross	Board Certification (e.g. ACVP, ECVCP)	Comments
Carolyn Grimes Jennifer Owen Samuel Jennings	Clinical Clinical Gross	ACVP ACVP ACVP	All DACVP are located on-site, though in the laboratory building next door to the main hospital building.

4. Please list all Diplomates of the American College of Veterinary Radiology or approved American Board of Veterinary Specialties radiology board associated with residency training. If off-site please attach signed Residency Training Agreement Forms from all individuals providing off-site training.

Name of Diplomate(s)	Include Board certification (e.g. ACVR, ECVDI)	Comments
Sarena Sunico Anne Bettencourt Trish Oura Blaise Burke	ACVR ACVR ACVR ACVR	Weekly radiology rounds; daily clinical contact; scheduled week of ultrasound training - on-site  Radiation oncology

5. Please list the Diplomates available for consultation in the areas of dermatology, surgery, ophthalmology, anesthesiology, emergency/critical care, clinical nutrition, clinical pharmacology, and/or theriogenology. If off-site, please attach signed Residency Training Agreement Forms from all individuals providing off-site training.

Name of Diplomate(s)	Specialty	Board Certification	Comments
Laura Stokking	Dermatology	ACVD	Sorrento Valley
Nicole Boynosky	Dermatology	ACVD	North County
Abby Foust	Dermatology	ACVD	Sorrento Valley
Fred Pike	Surgery	ACVS	Sorrento Valley
Sean Aiken	Surgery	ACVS	Sorrento Valley
Seth Ganz	Surgery	ACVS	North County
Katy Fryer	Surgery	ACVS	Sorrento Valley
Natasha Stanke	Surgery	ACVS	Sorrento Valley
Emily Moeller	Ophthalmology	DACVO	Sorrento Valley
Saya Press	Emerg./Critical Care	ACVECC	Sorrento Valley
Stephanie Istvan	Emerg/Clinical Care	ACVECC	Sorrento Valley
Brook Niemiec	Dentistry	AVDC	Sorrento Valley – part time
Margo Karriker	Clinical Pharmacology	ACVCP	Sorrento Valley

6. Does your training program consist of a minimum of 36 months?

Yes No

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Comments:

7. Does each resident in your program spend a minimum of 68 weeks on clinical rotations under the direct supervision of at least 2 ACVIM SAIM Diplomates (or at least 1 ACVIM SAIM Diplomate and at least 1 ECVIM Companion Animal Diplomate)?

Yes No

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Supervising Diplomate Name(s)	Specialty	Board Certification (e.g. ACVIM, ECVIM)	Comments
Kate Arnell	SAIM	ACVIM	Sorrento Valley
Jennifer DeBerry	SAIM	ACVIM	Sorrento Valley
John Hart	SAIM	ACVIM	Sorrento Valley
Sheri Ross	SAIM	ACVIM	UCVMC-San Diego (SV)
Kevin Mallery	SAIM	ACVIM	North County
Julie Fischer	SAIM	ACVIM	North County and Sorrento Valley

8. Does each resident in your program spend an additional 16 weeks of clinical training under the direct supervision of one or more supervising Diplomate(s) in other specialties such as cardiology, oncology, neurology, critical care, or ophthalmology? These Diplomates may be certified by the ACVIM or ECVIM, or by the American Board of Veterinary Specialties (ABVS) approved specialties or approved European Board of Veterinary Specialization recognized certification entities. A maximum of two secondary training site rotations is allowable for meeting clinical training in other specialties. These formal rotations on a specialty service must be completed in defined training periods of at least two continuous weeks each and the resident must have primary case responsibility. Additional SAIM weeks cannot be used to satisfy this requirement [See CM 9.F.2].

Yes No

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Supervising Diplomate Name(s)	Specialty	Board Certification (e.g. ACVIM, ECVIM)	Comments
Brenda Phillips	Oncology	ACVIM	Sorrento Valley
Andi Flory	Oncology	ACVIM	Both sites
David Lipsitz	Neurology	ACVIM	Sorrento Valley
Robin Levitski-Osgood	Neurology	ACVIM	Sorrento Valley
Tammy Stevenson	Neurology	ACVIM	Both sites
Joy Delamaide-Gasper	Neurology	ACVIM	Both sites
Joao Orvalho	Cardiology	ACVIM	UCVMC-San Diego (SV)
Timothy Hodge	Cardiology	ACVIM	UCVMC-San Diego (both sites)
Stephanie Istvan	ECC	ACVECC	Sorrento Valley
Saya Press	ECC	ACVECC	Sorrento Valley
Emily Moeller	Ophthalmology	ACVO	Sorrento Valley

9. Does each resident in your training program spend an additional 36 weeks in training, not necessarily under direct supervision, in either internal medicine or related areas, or in writing, studying, teaching, or obtaining experience with a radiologist, clinical pathologist, or other specialist? (Note that vacation time and time to attend professional meetings is included in this period.)

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

10. Does each resident in your training program spend

Describe:

Time for writing, study, meetings, electives, and vacation is allocated as follows: 8 weeks in year one, 14 weeks in year two, and 18 weeks in year 3. A minimum of 2 weeks will be spent under direct supervision of a radiologist and 1 week with a clinical pathologist for a total of at least 43 weeks in these training categories.

a minimum of 8 hours per month in training with at least two other board-certified specialists (not ACVIM)? These may be specialists in dermatology, theriogenology, surgery, anesthesiology, ophthalmology, emergency/critical care, or clinical pharmacology. The training must be direct consultation, not telephone or E-mail consultation.

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

11. Does each resident in your training program have a minimum of 80 hours of direct contact with a board-certified

Describe:

Residents interface directly with surgeons, dermatologists, dentist, and criticalists as needed on a daily basis, and well in excess of 8 hours per month. We anticipate that easily 8 hours per month will be spent in direct consultation with our criticalists alone, since they are present in the intensive care unit six days per week and are integrally involved in the care of any patient hospitalized in ICU. Additionally, Dr. Margo Karriker, a PharmD who is also board-certified in veterinary clinical pharmacology, divides her time between VSH and UCVMC-SD. She is available full-time for consultation with the residents on pharmacologic as well as parenteral nutrition issues. Dr. Karriker attends morning internal medicine case rounds on a near-daily basis, and her input on the pharmacologic aspects of case management is invaluable.

veterinary radiologist? Forty hours comprised of interpreting radiographs, learning and evaluating the results of special imaging techniques, and attending radiology rounds or conferences?

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

And an additional minimum of 40 hours spent training in ultrasonography under the supervision of a board-certified veterinary radiologist. This training should emphasize abdominal ultrasonography and must include hands-on performance of abdominal ultrasonography, observation of ultrasound procedures on the resident's own patients, and theoretical training in the principals and application of ultrasonography.

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

12. Does each resident in your training program attend weekly conferences?

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

Describe:

The residents will participate in weekly conferences/seminars as follows:

Grand rounds are held once monthly with mandatory participation of all departments. Mortality and morbidity rounds are occasionally substituted. The residents will present cases at grand rounds at least once annually on a rotating basis with other house officers.

ECC-specific physiology lectures/text reviews and case rounds are held once weekly. The residents will attend at least one and ideally more session/month (and may select which week(s) based on their receiving schedules).

Tumor boards are held every other month with participation of SAIM residents and specialists from SAIM, oncology, surgery, pathology, and sometimes others. Each session focuses on a particular tumor type and all departments give input from their perspective.

Clinical pathology seminars are held every other month with a different focus each time; residents are encouraged to bring their own cases to discuss.

Urology/nephrology case-based seminars will be held monthly in conjunction with UCVMC-SD's Urology/Nephrology service. The residents will bring case material to discuss and will periodically present cases to the group.

13. Does each resident have 40 hours of review sessions per year? 

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

Describe: 

A series of at least 40 hours of boards-review lectures will be provided by the specialists of all departments annually. The actual schedule is coordinated by the residents to assure their availability during lecture time.
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14. Does each resident in your training program have a minimum of 40 hours direct contact with a board certified veterinary clinical or anatomic pathologist evaluating clinical pathologic findings, reviewing cytologies and biopsies, and attending clinical pathologic conferences or seminars?

Yes No  

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Describe:

Each resident has a full week spent with the clinical pathologists. Additionally, residents are encouraged to directly consult with the clinical and anatomic pathologists on cases and results of cytologies and histopathology reports, and clinical pathology rounds are held once every other month.
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15. Patient Management:

a) 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 referral veterinarians?

Yes No  

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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b) Is case management directly supervised and reviewed by a Diplomate of the ACVIM?

Yes No  

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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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"/>
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17. Clinical Rounds:

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

Yes No  

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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b) Is a supervising Diplomate available for the majority of the daily rounds reported in question 17?

Yes No  

<input type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>
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c) If a supervising Diplomate is not available for the majority of rounds, describe how rounds are attended and supervised.

Describe:

The vast majority of rounds are attended by a supervising Diplomate. Very uncommonly a senior resident will lead rounds in the absence of a Diplomate, and will either consult on inpatients by phone, or later in the day in person.

18. Please indicate the availability of the following facilities or equipment to be used in resident training. 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, availability, and how the facilities or equipment are used for resident training in the space at the end of this section.

	Available?		Location of equipment?
	Yes	No	(On-site or list site name)
Standard radiological equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Ultrasonographic equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Color flow/Doppler equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Endoscopy equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, and endocrinology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site Some endocrinology is performed on-site (e.g., T4, free T4, cortisol, others); some endocrinology and other specialized tests (e.g., PTH, adrenal panel, fungal ID/sensitivities) are sent out.
Blood Pressure Measurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Electromyography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Nuclear Medicine	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Computed Tomography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Magnetic Resonance Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Computerized Medical Records w/Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site
Veterinary Library w/Literature Searching Capabilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site. The residents can apply for adjunct professorship at Western University, since we serve as clinical preceptors for their 4 <sup>th</sup> year students, and then can access their electronic database to support literature searches. Support letter attached.
Intensive Care Facility – 24 hours	<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-site

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. Clinical caseload information (this information should reflect the caseload of the prior 12 months)



Total SAIM caseload per year:

2726 new cases (appointments and emergencies)

Number of endoscopic examinations (respiratory, GI) per year:

249 GI and 30 bronchoscopy

Number of endoscopic examinations (urinary) per year:

12 urogenital

Note: These estimates represent minimum numbers, pooled between the two hospitals.

20. Didactic Learning Opportunities and Research Requirements: In recognition of the importance of scientific discovery as a critical mission of the ACVIM, all Residency Training Programs shall include an assessment period or instruction and/or participation in creative scholarship which will foster an appreciation of, competency in, and contribution to the knowledge base of their respective specialty and which will support their development as clinician scientists. This requirement is fulfilled through satisfactory completion of A and one of B [See CM 9.F.4]:

a) Journal Club: Critical review of literature, minimum of eighty (80) hours during the program. Describe how this requirement is met or exceeded.

The medicine residents are expected to attend when present in the building, unless on an elective rotation that precludes it, which means that at least 100 hours of journal club will be attended during the program.

b) At least 12 weeks over the three-year residency must be allocated for research and scholarly activity ideally in the pursuit of a publication. Successful completion of any one of the options listed below will satisfy the requirements for research by SAIM residents. Describe how this will be fulfilled or exceeded in the individual trainee's specific application.

1. Successful completion of at least six hours of seminars or classes offered at the ACVIM Forum, as on-line courses, or at other facilities and recognized by the ACVIM and covering the following subjects: Critical evaluation of the veterinary medical/biomedical literature, Grant-writing or Study design, and participation in clinical trials
2. Documented (by a letter from the RA) submission of a grant proposal
3. Acceptance and presentation at a scientific meeting of an abstract (either oral or poster) of original work
4. Documented completion (by a letter from the RA) of a prospective research project pertinent to SAIM
5. Documented completion (by a letter from the RA) of a retrospective research project pertinent to SAIM
6. Documented completion (by a letter from the RA) of graduate coursework in biostatistics, research methods, and/or research ethics

The residents attend the Clinician Scientist Training Workshop provided by the University of Wisconsin's School of Veterinary Medicine. Most of them will also submit a grant proposal and present a research abstract at the hospital's annual symposium. Also, a (ideally prospective, but sometimes retrospective) clinical project is required for completion of the residency program.

21. Is the resident required to give one or more formal presentations at a conference or in an educational setting on a yearly basis? Please provide a description of the conferences, etc., that are provided and the typical schedule.

Yes

X	<input type="checkbox"/>
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Describe:

A weekly house-officer lecture is provided by one of the hospital Diplomates (all specialties). The resident will be expected to provide at least one lecture annually.

A formal technician lecture series is provided by the hospital. The resident will present at least one lecture annually in this series.

The hospital provides a quarterly, well-attended CE program for local practitioners, and the resident may present lectures at these programs.

It's expected that the resident will present an abstract based on clinical research at the ACVIM Forum (or comparable meeting, e.g., GutSki/Sea) in year two or three of the program. The hospital holds a large CE Symposium for local veterinarians annually. Residents will be expected to present an abstract of clinical research or project at the Symposium.

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

Program length	One	Two	> Two
3 years	<input type="checkbox"/>	<input type="checkbox"/>	X

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

Program Length	Yes	No	Optional	Number
3 years	X	<input type="checkbox"/>	<input type="checkbox"/>	1

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

Program length	Yes	No	Number
3 years	<input type="checkbox"/>	X	0

25. Does each resident in your program meet at least twice yearly with their Resident Advisor to evaluate the resident's performance, review their progress in the program, and assess whether or not their training program is proceeding as described in this document with a dated written summary of this evaluation?

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

26. Please provide the structure of the training program to include (but not limited to): the length and number of clinical rotations per year; distribution of time allocated for research, writing, exam preparation, other scholarly activity, and vacation; and distribution of time allocated to out-rotations if this is a multi-site program.

Please refer to the CM (Section 9.F) for specific details. The following table is provided as an example.

NOTE: a detailed description defining the individual time requirements would be acceptable in addition to the table.

Example:

	Year 1 # Weeks	Year 2 # Weeks	Year 3 # Weeks	Total # Weeks	Training On Site or Off Site
Internal Medicine, Direct Diplomat Supervised (Diplomates listed in number 9), Minimum of 68 weeks					
Direct Supervision	34	28	26	88	On site
Additional Diplomat Supervised Rotations (Diplomates listed in number 8), Minimum of 16					

weeks					
Emergency and Critical Care	2	2		4	On site
Cardiology	2	2	2	6	On site
Neurology	2	2		4	On site
Oncology	2	2	2	6	On site
Additional Direct or Indirectly Supervised Rotations					
Internal Medicine, Indirectly Supervised			8	8	On site
Additional Clinical Rotations: Please specify in comment section	2	2	2	6	On site
Electives*	1	1	1	3	Off site
Diagnostic Imaging					
Radiology		1		1	On site
Ultrasound	1			1	On site
Pathology					
Clinical Pathology		1		1	Off site
Anatomical Pathology					
Additional Rotations					
Research and Scholarly Activity	4	4	4	12	On site
Studying		4	4	8	
Meeting		1	1	2	On/Off site
Vacation	2	2	2	6	Off site
Total	52	52	52	156	
* Electives can be 0-3 weeks. If unavailable, will default to directly supervised internal medicine					

Please note that this table is for recording the number of weeks and/or hours that the resident will spend on the rotations/services for each year that will satisfy the CM requirements. The number for each year should add up to 52 weeks. It is understood that each resident's program will differ with regard to which year a given rotation is completed; the table should summarize the rotations in which residents in your program will participate. The CM specifies that the program outlined in this program renewal form becomes the requirements that a resident must fulfill to complete the training program. Please see CM section 4.F.2 "Once a program has been approved, even if its requirements exceed the minimum requirements as published in the CM, the requirements specified in the program description have become the official requirements for completion of the residency. Neither a candidate nor a Program Director may retroactively petition for successful completion of a residency that has met the minimum requirements of the CM if they have left the program but have not completed all requirements of the previously approved program."

PLEASE CHECK YOUR MATH

	Year 1 # Weeks	Year 2 # Weeks	Year 3 # Weeks	Total # Weeks	Training On Site or Off Site
Internal Medicine, Direct Diplomate Supervised (Diplomates listed in number 7), Minimum of 68 weeks					
Direct Supervision	34	31	30	95	on
Additional Diplomate Supervised Rotations (Diplomates listed in number 8), Minimum of 16 weeks [CM 9.F.2]					
Cardiology	2	2		4	on
Oncology	2	2		4	on
Neurology	2	2		4	on
Critical Care					on
Ophthalmology					on
Radiation Oncology		2		2	on
Resident's choice of above options			2	2	on
Additional Direct or Indirectly Supervised Rotations					
Internal Medicine, Indirectly Supervised					
Additional Clinical Rotations: Please specify in comment section	1	1		2	on
Electives*	3	1	3	7	on or off
Diagnostic Imaging					
Radiology	1			1	on
Ultrasound	1			1	on
Pathology					
Clinical Pathology	1			1	on
Anatomical Pathology					on
Additional Rotations					
Scholarly Activity	2	4	7	13	on
Studying	0	4	6	10	
Meeting	1	1	2	4	off
Vacation	2	2	2	6	off (I hope!)
Total	52	52	52	156	
* Electives can be 0-3 weeks. If unavailable, will default to directly supervised internal medicine					

NOTE: a detailed description defining the individual time requirements would be acceptable here in addition to the table:

Describe:

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

Yes      No

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Describe:

medicine in a private practice setting with a guiding philosophy of educational excellence and development of teaching skills, and with the advantage of colocation with the UCVMC-San Diego. This program's intent is to exploit the opportunities available in a busy, exceptionally equipped, medically progressive, two-site private practice, while also providing enhanced didactic content and selected university partnering opportunities.

The Sorrento Valley and North County hospitals are located within 30 miles of each other, both are considered "on-site" and many of our specialists work days at both hospitals (many of our clients elect to be seen at both hospitals and follow their doctor back and forth for any given appointment). The two locations operate on a unified Hospital Information System/electronic medical record system, so patient records are easily accessed at both locations. Both hospitals are fully-equipped, but are located in very different socioeconomic zones with very different client and patient demographics. We consider being able to train residents to operate in both environments with these different sets of variables to be a program strength. Most residents elect to live closer to the Sorrento Valley hospital since 80% of their time is spent there, but some elect to live between the two hospitals. The area traffic patterns generally render the commute to both hospitals similar for most residents. Since all core rotations are provided by on-site specialists, no travel to any locations other than the two VSH hospitals is required of the resident, though some may choose off-site elective rotations. The residents rotate regularly through the North County hospital, in pre-scheduled fashion and usually in blocks of no less than 3 weeks. We strive to have residents see rechecks of appointments they're initially involved with, and maintain communication with those clients regardless of which hospital the client uses. Residents are copied on all lab reports, and often communicate results and a plan, after one is developed with the senior clinician. We will do this with patients from both hospitals, regardless of which hospital the resident is currently rotating through.

Though this residency emphasizes clinical medicine, the resident is expected to develop and hone teaching skills by acting as a mentor to hospital interns, as well as by delivering formal lectures to interns, to local practitioners, and to hospital and community practice technicians. We strive to keep science and literature as the foundation of the training process, with formal lectures and internal medicine journal club, and by requiring a (ideally prospective and clinical) project for satisfactory program completion. The resident is also expected to develop the skills to analyze and professionally convey the results of a clinical project at a national (ACVIM Forum or equivalent caliber) venue. Support and mentorship for both the project and the required publication may be provided by Diplomates from either or both institutions (VSH and UCVMC-SD).

We strive to combine rigorous, case-based clinical training with a thorough didactic grounding, in an environment that balances ample support with encouragement of independent thought and exploration. We are committed to using the wide and unique array of resources available to us to produce exceptionally trained, well-rounded Diplomates who are equipped to enter and contribute either to a private or academic medical venue.

X Please note, any Program Director or Candidate that significantly changes or alters this Residency Training Program before completion must notify ACVIM, in writing, before the changes are made to ensure that the proposed changes are approved.

Significant changes could include, but are not limited to:

- transferring from one program to another
- alterations in program duration
- switching to a 'dual board' program
- enrolling in an institutional graduate program
- change of Program Director or Resident Advisor

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

Per the Certification Manual, each year, the Program Director 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 Residency Training Program.