

Cardiology

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.

Prior to making significant changes in a Residency Training Program, approval of the ACVIM and Oncology 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.

The Cardiology Residency Training Committee may require supporting evidence for any statements made below. At the time of annual program renewal, Program Directors may be asked to verify resident activities, including satisfactory clinical training, interaction with consultants, and documentation of study and education participation.

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 Cardiology. 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.

1. Current Date: February 11, 2020

2. Program Director's Name: Rebecca Stepien

The Program Director must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology

3. Program Director's Contact Information:

Work Phone: 608-263-7600

Cell Phone: 608-213-5791

Email: rebecca.stepien@wisc.edu

Mailing Address: 2015 Linden Drive, Madison, WI 53706

4. Location of Sponsoring Institution (Primary Site of Residency Training Program): University of Wisconsin

5. Length of Training Program (in years): 3

Comments:

6. Is this a traditional or non-traditional residency training program?

Traditional

For non-traditional programs, please provide details:

7. 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.

All current residents and incoming residents (if known) should be listed here.

Resident Name(s) (first/last)	Length of Program (in years)	Program Start Date (mm/dd/yyyy)	Program End Date (mm/dd/yyyy)	Resident Advisor Name (first/last)
Eva Frantz	3	07/16/2018	07/16/2021	Heidi Kellihan
Anna Sirochman	3	07/15/2019	07/15/2022	Heidi Kellihan

Unless specifically approved, in advance, by the CRTC, the ratio of cardiology residents to on-site Cardiology Diplomates who are actively involved in resident training cannot exceed 2 to 1.

9. Resident Advisor(s)

Rebecca Stepien

Heidi Kelliham

Sonja Tjostheim

Must be a Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology. There is no restriction on the number of Resident Advisors; however, each Resident Advisor can supervise up to two residents concurrently.

10. Supervising Diplomates on site:

Rebecca Stepien

Heidi Kelliham

Sonja Tjostheim

Must be an active Diplomate of ACVIM in the Specialty of Cardiology or an approved ECVIM Diplomate in Cardiology.

11. Diplomates of ACVIM responsible for supervision of clinical training who specialize in areas other than Cardiology.

If off-site, please explain the situation, and the method of providing direct contact with the resident

Name	Specialty	Comments
Katrina Viviano	SAIM	
Lauren Trepanier	SAIM	
Jon Bach	SAIM	
Michael Wood	SAIM	
Jessica Pritchard	SAIM	

12. Please list all Diplomates of the American College of Veterinary Pathology and the European College of Veterinary Pathology 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)	Clinical or Gross	ACVP or ECVP	Comments
Kristin Friedrichs	Clinical	ACVP	
Marie Pinkerton	Gross	ACVP	
David Gasper	Gross	ACVP	
Sophie Aschenbroich	Gross	ACVP	
Alison Dusick	Clinical	ACVP	

13. Please list all Diplomates of the American College of Veterinary Radiology and 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)	ACVR or ECVDI	Comments
JR Lund	ACVR	
Ken Waller	ACVR	
Lisa Forrest	ACVR	

14. Please list all Diplomates of the American College or equivalent European colleges of Dermatology, Surgery, Ophthalmology, Anesthesiology, ECC, clinical nutrition, clinical pharmacology, and/or theriogenology associated with residency training

If off-site, please explain the situation and the arrangements provided for contact with the resident.

Name of Diplomate(s)	Specialty	Comments
Douglas DeBoer	Dermatology	
Sarah Colopy	Surgery	

Robb Hardie	Surgery	
Susan Sample	Surgery	
Rebecca Johnson	Anesthesia	
Lesley Smith	Anesthesia	
Julie Walker	ECC	
Paul Miller	Ophthalmology	
Ellison Bentley	Ophthalmology	

15. Please indicate the availability of the following facilities or equipment. Indicate if these are available on-site 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. See CM 5.D for details.

	Available?	Location of equipment?
a) Blood pressure equipment (must be on site)	Yes	On-site
b) Cardiac catheterization capability (must be on-site)	Yes	On-site
c) Echocardiography equipment (must be on-site)	Yes	On-site
d) Fluoroscopy (must be on site)	Yes	On-site
e) Pacemaker interrogation (must be on site or available off-site)	Yes	On-site
f) Standard radiological equipment (must be on-site)	Yes	On-site
g) Electrocardiography (must be on-site)	Yes	On-site
h) Brainstem Auditory Evoked Response Equipment	Yes	On-site
i) Clinical Pathology capabilities: (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology, endocrinology, anatomic and histopathology)	Yes	On-site
j) Colloid oncotic pressure measurement	Yes	On-site
k) Computed Tomography	Yes	On-site
l) Electroencephalography	Yes	On-site
m) Electromyography	Yes	On-site
n) Endoscopy equipment		
GI equipment	Yes	On-site
Bronchoscopy	Yes	On-site
Cystoscopy	Yes	On-site
Rhinoscopy	Yes	On-site
Laparoscopy	Yes	On-site
o) Hemodialysis capability	No	
p) Intensive Care Facility – 24 hours	Yes	On-site
q) Magnetic Resonance Imaging	Yes	On-site
r) Nuclear Medicine [access is desirable]	Yes	On-site

s) Radiation Therapy Facility	Yes	On-site
t) Serum osmolality measurement	Yes	On-site
u) Total parenteral nutrition capability	Yes	On-site
v) Ultra sonographic equipment	Yes	On-site
w) Urethral pressure profile & cystometrography	Yes	On-site
x) Computerized Medical Records w/Searching Capabilities	Yes	On-site
y) Medical Library w/Literature Searching Capabilities	Yes	Computer plus med library within 2 blocks
z) Veterinary Library w/Literature Searching Capabilities	Yes	Computer plus med library within 2 blocks

If any of the above equipment or facilities are available off-site, please explain how the resident can access them for case management, research, or study:

16. Clinical caseload information (this information should reflect the caseload of the prior 12 months at the primary site)

Total Cardiology case load per year:	1500
Number of echocardiographic examinations per year:	1200
Number of cardiac catheterizations per year:	45

17. 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, B and one of C [See CM 5.E and 5.F]:

A. Journal Club: Critical review of literature, minimum of eighty (80) hours during the program.

Describe how this requirement is met or exceeded:

Two hours of journal club per week, 42-48 weeks per year

B. Cardiology-focused Educational Experiences: Minimum of one hundred fifty (150) hours during the program.

Describe how this requirement is met or exceeded. [See CM 5.E.2]

Topic-based resident rounds: 2 hours per week, 42-48 weeks per year

Pediatric cardiology rounds: 2 hours per week, 42-48 weeks per year

C. Successful completion of any one of the options listed below.

Describe how this will be fulfilled or exceeded in the individual trainee's specific application:

3 and/or 4: Trainees are required to generate one publication on a retrospective or prospective research study in the course of the program. In the process, some may submit grant proposals and some may present research abstracts or posters. In all cases, candidates may choose to attend ACVIM-sponsored research-related workshops should they choose to do so.

1. Successful completion of at least two (2) of the following three (3) short courses/workshops offered by ACVIM either on-line or at the Forum:

A. Critical evaluation of veterinary medical/biomedical literature

- B. Grant Writing
- C. Study, design and participation in clinical trials

2. Documented submission of a grant proposal (by advisor letter)
3. Acceptance and presentation at a scientific meeting of an abstract (oral or poster) of original work
4. Documented completion (by advisor letter) of a prospective or retrospective research program pertinent to the candidate's specialty
5. Documented completion (by advisor letter) of graduate course work in biostatistics, research methods, and/or research ethics.

Note: Letters of documentation by advisors will need to accompany the final submission of the Resident Logs to the Residency Training Committee in order to qualify for a resident certificate.

Submission of RTP Application/Renewal:

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.