LAIM

New applications for ACVIM Residency Training Programs must be received by the Residency Training and Credentials Committee (RTCC) 90 days prior to any residents beginning training. Before completing this form, please review the general and specific requirements for Large Animal Internal Medicine (LAIM) Residency Training Programs in the ACVIM Certification Manual (CM). The current version of the CM is available on the ACVIM website at www.ACVIM.org.

Prior to making significant changes in a Residency Training Program, approval of the ACVIM and LAIM RTCC must be obtained. The candidate and/or Program Director must notify ACVIM, in writing before the changes are made and 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: 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. 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. 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.

For multi-site residency program: 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).

1. Current Date: January 25, 2020

2. Program Director’s Name: Kevin Washburn
   Must be an active LAIM diplomate of ACVIM

3. Program Director’s Contact Information:
   Work Phone: 9798455541
   Mobile Phone:
   Email: kwashburn@cvm.tamu.edu
   Mailing Address: TAMU MS 4475

4. Select Practice Area: LAIM Mixed

5. Location of sponsoring Institution (Primary Site of Training Program): Texas A&M University

6. Length of Training Program (years): 3

7. Advanced Degree:
   Masters: Optional
   PhD:

   If an advanced degree is required or optional, please briefly describe how the graduate training is incorporated into the residency training program:
   The resident enters graduate school and takes appropriate courses in order to gain hours while working on their project. The research project fulfills the ACVIM research component and our training program requirement in addition to the advanced degree. This would be a thesis Masters program.

8. Location of Secondary Site (if applicable)
As 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)

Not applicable

9. Outside Rotations/Other Sites and 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 C.E.5). If the radiology or pathology requirements are being fulfilled at secondary training sites, a Training Agreement Form must be submitted.

Outside rotations not being included in 104 weeks of required clinical training do not require RTCC approval.

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

Primary Sites: Actual numbers
Secondary site:
Other site:

<table>
<thead>
<tr>
<th></th>
<th>Total No. Annual Hospital Cases</th>
<th>Average No. Cases Presented to Hospital Daily</th>
<th>Average No. Outpatient Cases Treated Daily</th>
<th>Average No. Inpatients Treated Daily</th>
<th>Total No. Annual Ambulatory Visits</th>
<th>Average No. of Ambulatory Cases Per Visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equine</td>
<td>3645</td>
<td>13</td>
<td>10</td>
<td>12</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Equine (secondary site)*</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Equine (other site)*</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Food and Fiber</td>
<td>2210</td>
<td>10</td>
<td>12</td>
<td>15</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Food and Fiber (secondary site)</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Food and Fiber (Other Site)*</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Total</td>
<td>5855</td>
<td>23</td>
<td>22</td>
<td>27</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

Describe:

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

Resident Advisor(s):

(Write Date)
12. List off 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.

<table>
<thead>
<tr>
<th>Supervising Diplomates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Susan Eades</td>
</tr>
<tr>
<td>Keith Chaffin</td>
</tr>
<tr>
<td>Michelle Coleman</td>
</tr>
<tr>
<td>Noah Cohen</td>
</tr>
<tr>
<td>Kevin Washburn</td>
</tr>
<tr>
<td>Evelyn MacKay</td>
</tr>
<tr>
<td>Dusty Weaver-Nagy</td>
</tr>
</tbody>
</table>

13. Please list all ACVIM Diplomates onsite responsible for supervision of clinical training who are specialists in areas other than LAIM.

<table>
<thead>
<tr>
<th>Name</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joseph Mankin</td>
<td>Neurology</td>
</tr>
<tr>
<td>John Levine</td>
<td>Neurology</td>
</tr>
<tr>
<td>Sorja Gordon</td>
<td>Cardiology</td>
</tr>
<tr>
<td>Ashley Saunders</td>
<td>Cardiology</td>
</tr>
<tr>
<td>Heather Robles-Wilson</td>
<td>Oncology</td>
</tr>
<tr>
<td>Kenita Rogers</td>
<td>Oncology</td>
</tr>
<tr>
<td>Emma Warry</td>
<td>Oncology</td>
</tr>
</tbody>
</table>

14. 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.

<table>
<thead>
<tr>
<th>Resident Name</th>
<th>Start date (mm/dd/yy)</th>
<th>End Date (mm/dd/yy)</th>
<th>Resident Advisor Name*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kari Beveino</td>
<td>07/15/2017</td>
<td>07/14/2020</td>
<td>Noah Cohen</td>
</tr>
<tr>
<td>Sara Thomas</td>
<td>07/15/2018</td>
<td>07/14/2021</td>
<td>Michelle Coleman</td>
</tr>
<tr>
<td>Natalia Rodriguez</td>
<td>07/15/2018</td>
<td>07/14/2021</td>
<td>Susan Eades</td>
</tr>
<tr>
<td>Andres Rivera</td>
<td>07/15/2019</td>
<td>07/14/2022</td>
<td>Keith Chaffin</td>
</tr>
</tbody>
</table>

15. If ACVIM Associate Members are involved in resident training, please list them here:

Note: An ACVIM Associate is a veterinary certified as a specialist by non-ACVIM specialty organizations such as the European College of Veterinary Internal Medicine (ECVIM). ACVIM associates are vital to practice and ACVIM education (ECVIM).
16. 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.

<table>
<thead>
<tr>
<th>Name of Diplomate(s)</th>
<th>Specialty Certifying Body</th>
<th>Clinical or Gross Anatomic</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gwen Levine</td>
<td>ACVP</td>
<td>Clinical</td>
<td></td>
</tr>
<tr>
<td>Mark Johnson</td>
<td>ACVP</td>
<td>Clinical</td>
<td></td>
</tr>
<tr>
<td>Karen Russel</td>
<td>ACVP</td>
<td>Clinical</td>
<td></td>
</tr>
<tr>
<td>Aline Rodriguez</td>
<td>ACVP</td>
<td>Gross</td>
<td></td>
</tr>
<tr>
<td>Brian Porter</td>
<td>ACVP</td>
<td>Gross</td>
<td></td>
</tr>
<tr>
<td>Joann Mansell</td>
<td>ACVP</td>
<td>Gross</td>
<td></td>
</tr>
</tbody>
</table>

17. 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 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.

<table>
<thead>
<tr>
<th>Name of Diplomate(s)</th>
<th>Specialty Certifying Body</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jay Griffin</td>
<td>ACVR</td>
<td></td>
</tr>
<tr>
<td>Lindsay Gilmour</td>
<td>ACVR</td>
<td></td>
</tr>
<tr>
<td>Lauren Russel</td>
<td>ACVR</td>
<td></td>
</tr>
<tr>
<td>Jessica Valone</td>
<td>ACVR</td>
<td></td>
</tr>
</tbody>
</table>

18. 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 who 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.
The following questions will be used to provide the RTCC with information needed to judge the structure, quality, scope, and consistency of training provided.

**Supervising Diplomate:** Direct supervision is required during clinical training, with the time required specified by each particular specialty. Direct supervision is defined as follows: The Supervision 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.

19. Does your training program consist of a minimum of 104 weeks? If no, Please describe. (CM.6.K)

Yes

**Describe:**

Our program easily meets and exceeds this requirement over the 3 year period.

20. 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 yes, please provide a detailed explanation of how your program meets this criterion.
Our residents are under the direction of one and sometimes two ACVIM Large Animal Diplomates while on clinic duty regardless of food animal or equine.

21. 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 Diplomate(s)? (CM 6.K.1) Yes

Describe:
Each resident spends at least 28 weeks per year with the aforementioned LAIM ACVIM Diplomates culminating to a minimum of 84 weeks per residency.

22. 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

Describe:
Each resident spends at least 28 weeks per year under direct supervision of ACVIM LAIM Diplomates. Two weeks per year are spent with cardiology, neurology and occasionally oncology specialists on cases in our hospital. This culminates in at least 84 weeks with ACVIM LAIM Diplomates and 6 weeks of training with other ACVIM Diplomates (cardiology, neurology and oncology) per residency period.

23. 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

Describe:
Each resident spends at least 8 weeks per year performing professional development (studying, research, writing), 2 weeks per year for vacation, 2 weeks in radiology, 2 weeks in ultrasound and 2 weeks in clinical pathology per residency period. This culminates in at least 36 weeks per residency.

24. 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, anesthesia, 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

Describe:
Each resident spends at least 4 to 6 weeks per year with specialists in emergency medicine and critical care and sports medicine.

25. Does each resident in your program have a minimum of 80 hours of training in diagnostic training? 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

Describe:
Each resident spends at least 2 weeks in radiology and 2 weeks in ultrasonography per residency. Further, each resident attends radiology and ultrasound imaging rounds weekly. This culminates in over 200 hours in diagnostic imaging training.

26. 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
   Describe:
   Each resident spends at least 2 weeks in clinical pathology culminating in approximately 80 hours of training.

27a. Does each resident in your program participate in patient management? Yes
   Describe:
   Each resident has primary case management throughout their entire residency.

27b. Is case management supervised and reviewed by an ACVIM Diplomate or ACVIM Associate? (CM 6.G)
   All case management is reviewed and supervised by an ACVIM Diplomate.

28. Is a complete medical record using the problem oriented veterinary medical record system maintained for each individual patient? (Medical records must be retrievable)
   Yes
   Describe:
   Residents utilize an electronic record system in addition to individual case paper records.

29. Does the resident participate in clinical rounds on a daily basis while on clinical rotations?
   Yes
   Describe:
   Rounds are held each morning and evening for all clinical cases in the wards.

30. Is a supervising Diplomate available for the majority of rounds?
   Yes
   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).

31. 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.

<table>
<thead>
<tr>
<th>Equipment</th>
<th>Available</th>
<th>On-Site</th>
<th>Location of Off-Site Equipment</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Standard radiological equipment</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>b) Ultrasonographic equipment</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>c) Color flow/Doppler equipment</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>d) Cardiac catheterization capability</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>e) Endoscopy Equipment</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>GI Equipment</td>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>
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.

32a. Are formal conferences such as clinopathologic conferences, journal clubs, or seminars held on a weekly basis? (CM 6.8.3. Residents must attend formal conferences such as clinopathologic conferences, journal clubs, or seminars in internal medicine and related disciplines weekly, throughout the calendar year)

Yes

Describe:
Journal club occurs weekly with the exception of 3 weeks over the holidays and 10 weeks when there is a department meeting. This leaves 39 weeks of journal club per year (117 hours over the course of the residency). There are semi-weekly seminars presented by house officers and graduate students: Weekly clinical pathology and gross pathology rounds are available through the Department of Veterinary Pathobiology. There are critical care rounds approximately every week available through the Department of Small Animal Medicine and Surgery. Further, residents attend Small Animal Medicine rounds when relevant topics or therapeutics are discussed. This typically amounts to one hour 2 to 3 times per month. Every two weeks, there are advanced imaging rounds including ultrasound, CT and MRI. All told there are weekly events throughout the calendar year.

32b. 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 6.1.2. 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)

<table>
<thead>
<tr>
<th>Journal Review Activity</th>
<th>How Many Hours Per Week</th>
<th>How Many Weeks Per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Journal Article Review (Journal Club)</td>
<td>1</td>
<td>39</td>
</tr>
</tbody>
</table>
Journal club occurs weekly with the exception of 3 weeks over the holidays and 10 weeks when there is a department meeting. This leaves 39 weeks of journal club per year (117 hours over the course of the residency). There are semi-weekly seminars presented by house officers and graduate students: Weekly clinical pathology and gross pathology rounds are available through the Department of Veterinary Pathobiology. There are critical care rounds approximately every week available through the Department of Small Animal Medicine and Surgery. Further, residents attend Small Animal Medicine rounds when relevant topics or therapeutics are discussed. This typically amounts to one hour 2 to 3 times per month. Every two weeks, there are advanced imaging rounds including ultrasound, CT and MRI. All told there are weekly events throughout the calendar year.

34. Is the resident required to give one or more formal presentation at a conference or in an educational setting on a yearly basis? (CM 6.E.3) Yes

Describe:
Each resident is required to present a conference on a topic of their choosing which is typically research related each year to the faculty and fellow house officers.

35. How many major veterinary medical or medical meeting 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.

One

Describe:
Each resident at least attends the ACVIM Forum during their residency.

36. Are one or more publications required as part of the training program? (CM 6.1.7. The resident must publish at least one first author scientific manuscript relevant to LAIM) No

Describe:
However, they usually end up publishing on the required research project. They are also required to report the results, even if only by seminar to the faculty prior to completion of their residency.

37. Does the training program required a research project? Please indicate the number of research project required.

Yes

Number: 1

Describe:
Each resident is required to perform a research project and report the results to the faculty and house officers prior to completion of their residency.

38. 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 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. Evaluation should be presented in writing and discussed with each candidate. (CM 6.M) Yes

Frequency (i.e., quarterly, annually?)

0

bi-annually

Written evaluation:
Yes

Shared with candidate:
39. 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
Describe:
Our residents typically fulfill this requirement by completing D or E which culminates in C. Our residents frequently also perform A and B as well.

(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 trial (these seminars may be offered at the ACVIM Forum).
(B) Submission of grant proposal.*
(C) Acceptance and presentation at a scientific meeting of an abstract (either oral or poster) of original work.
(D) Documented completion of 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 a resident Advisor

40. Is there any additional pertinent information that the RTCC should consider in its evaluation of this Residency Training program? No
Describe: