ACVIM CERTIFICATION AND RESIDENCY TRAINING MANUAL

Certification and Residency Training Manual (CM) for Residents, Candidates, Sponsoring Institutions, Program Directors, Resident Advisors, Supervising Diplomates, and Secondary-Specialty Supervising Diplomates

Effective July 1, 2024 – June 30, 2025

The information contained in this Manual becomes effective on July 1, 2024. It represents the current policies, procedures, and requirements for individuals involved in the certification processes of the American College of Veterinary Internal Medicine (synonyms: ACVIM or the College). Additional specialty specific requirements may exist and are detailed in the applicable specialty specific Manual(s).

ACVIM policies, procedures and requirements are subject to review and change.

While a concerted effort has been made to ensure the accuracy of this document, if clarification is required, program directors, resident advisors, supervising Diplomates, secondary-specialty supervising Diplomates, residents, and Candidates should contact the ACVIM certification and accreditation staff at the ACVIM office, preferably by email at certification@acvim.org, or by mail or phone, as referenced below.

If program directors, resident advisors, supervising Diplomates, secondary-specialty supervising Diplomates, residents, and/or Candidates have any questions, or if concerns arise about proposed or actual changes that could impact the certification process, they should contact the ACVIM certification and accreditation staff at the ACVIM office, preferably by email at certification@acvim.org, or by mail or phone, as referenced below.

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Our vision: Improving the lives of animals and people globally.

Our mission: Being the trusted leader in veterinary education, discovery, and medical excellence.

We value:

- **Inclusion** – Creating a community of inclusiveness that respects the diverse backgrounds and values of its members, Candidates, staff, and partners.
- **Integrity** – Fostering honesty and trust and adhering to the highest standards of professionalism.
- **Connection** – Being part of a supportive network with shared experiences and priorities.
- **Empathy** – Relating to others with kindness and humanity.
- **Excellence** – Committing to continuous improvement for ourselves and our profession.

In pursuit of our mission, the ACVIM advances the knowledge of animal health and diseases and fosters the continued development of specialty veterinary care in cardiology, large animal internal medicine, neurology, nutrition, oncology, and small animal internal medicine.

To achieve these purposes, the ACVIM:

- Certifies new Diplomates by guiding and overseeing residency training programs (RTPs) and ensuring fair and appropriate credentialing and examination procedures.
- Promotes and advocates ACVIM specialization to those individuals within the veterinary profession and to the animal-owning public, so that the value of certification is recognized.
- Promotes continuing education and the dissemination of knowledge in veterinary cardiology, large animal internal medicine, neurology, nutrition, oncology, and small animal internal medicine through the ACVIM Forum, the *Journal of Veterinary Internal Medicine*, advanced continuing education (ACE) courses, and other means.
- Promotes the generation of new knowledge, relevant to ACVIM specialties, to improve animal and human health.

2 IMPORTANT DEFINITIONS

Please note that important definitions related to the ACVIM, its mission and values are now included in Appendix A: Important Definitions.
3 CERTIFICATION AND RESIDENCY TRAINING REQUIREMENTS FOR ALL SPECIALTIES

This Manual informs residents, Candidates, SIs, PDs, RAs, SDs, SNDs and SSSDs (refer to Appendix A: Important Definitions) of the ACVIM’s certification and residency training program (RTP) requirements for all ACVIM specialties. Additional Specialty specific requirements may exist and are detailed in the applicable Specialty Manual(s).

Current information regarding deadlines, registration procedures, fees, current forms, credentials requirements, and examination content and procedures, is maintained on the ACVIM website, rather than in this Manual. Candidates should regularly check the ACVIM website for any updates and/or changes in deadlines, registration procedures, fees, current forms, credentials requirements, examination content and procedures, and other matters that may impact the successful completion of the certification process. It is solely the responsibility of Candidates and mentors to ensure up-to-date access to the ACVIM website, Candidate dashboard, and all relevant ACVIM listservs.

The ACVIM office does not send out individual notices to Candidates or mentors regarding approaching deadlines, as that information is maintained and kept current on the ACVIM website.

3.A ACHIEVING DIPLOMATE STATUS (BOARD-CERTIFICATION)

An ACVIM Diplomate is a highly educated veterinary professional, who has undertaken supplementary veterinary education, completed rigorous residency training, fulfilled additional credentialing requirements, and is certified by the ACVIM as a veterinary specialist.

The process for becoming an ACVIM Diplomate (synonym: Board-certification) involves the following steps. An individual must:

- Be a graduate of a college or school of veterinary medicine that is accredited by the AVMA, and/or be legally qualified to practice veterinary medicine.
- Satisfactorily complete a one-year rotating internship in veterinary medicine and surgery or have acquired equivalent broad-based clinical experience (typically three years in general clinical practice).
- Satisfactorily complete an ACVIM-approved RTP in the specialty for which the Candidate seeks certification.
- Pass the ACVIM General Examination.
- Pass the ACVIM Specialty Examination in the specialty for which the Candidate seeks certification.
- Fulfill the credentialing requirements of the specialty for which the Candidate seeks certification.
- Invariably demonstrate professional behavior.
3.B SUMMARY OF CRITICAL STEPS IN ACHIEVING DIPLOMATE STATUS

Note: This summary may not be all inclusive and each Specialty may have additional requirements that must be met prior to Board-certification. Any such additional requirements are outlined in the respective Specialty Manuals.

Registration of a resident as a Candidate with the ACVIM is submitted online to the ACVIM office:

*When:* Within 90 days of beginning the RTP.
*What:* Online registration form and registration fee.
*Reviewed by:* ACVIM office.
*Response time:* 8 weeks.

Application to take the ACVIM General Examination is submitted online to the ACVIM office:

*When:* All components are due by the date specified on the ACVIM website. The deadline will be in the year preceding the examination.
*What:* All components of the General Exam application packet and General Exam fee.
*Reviewed by:* ACVIM office.
*Response time:* 30 days.

Credentials for all specialties for the Specialty Examination are submitted online to the ACVIM office:

*When:* All components are due by the date specified on the ACVIM website. The deadline will be in the year preceding the examination.
*What:* All components of the credentials packet and credentials fee.
*Reviewed by:* Specialty CC.
*Response time:* 60 days.

Registration and fee for the Specialty Examination for all specialties are submitted online to the ACVIM office:

*When:* Registration is due by the date specified on the ACVIM website. For most examinations, the deadline will be the year of the examination. For the LAIM Specialty Examination, the deadline will typically be the year before the examination.
*What:* Examination fee and previously approved credentials.
*Reviewed by:* ACVIM office.
*Response Time:* 30 days.

Appeals for rejection of credentials and/or examination failure are submitted online to the ACVIM office:

*When:* An appeal is due within 30 days of results notification to the Candidate.
*What:* Concise letter elaborating the basis for the appeal and any additional relevant documentation.
*Reviewed by:* ACVIM Certification Appeals Committee.
*Response by:* ACVIM Certification Liaison.
*Response time:* Within 30 days of receipt of appeal.
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3.C RESIDENCY TRAINING PROGRAM (RTP) EXPERIENCE

ACVIM residency training programs (RTPs) are the foundation for the education and training of ACVIM Candidates seeking certification as ACVIM Diplomates.

Residency training is an indispensable component of the transformation of a veterinarian into a veterinary specialist. Residency training is intellectually, physically and emotionally demanding, and requires focused and committed effort on the resident’s part to master their chosen discipline.

The training of veterinary specialists is largely experiential and necessarily occurs within the context of an SI, with mentorship provided by the PDs, RA, SDs, and SSSDs. Developing the skills, knowledge, and attitudes leading to proficiency at the level of specialty care requires residents to assume personal responsibility for the care of individual patients and/or clients, while routinely seeking guidance from their RA, SDs, and SSSDs.

3.C.1 DURATION OF THE RTP

Most ACVIM RTPs are a minimum of 3 years of continuous training. The specialties of LAIM, neurology and nutrition do currently allow approval of RTPs that can be completed in 2 years of continuous training.

All specialties also allow for approval of non-traditional RTPs. A non-traditional RTP is a maximum of 5 years in duration. A non-traditional RTP is an intentionally non-continuous RTP, although all training must take place within clearly defined, continuous blocks of training time. All specialties stipulate that in a non-traditional RTP, all the specialty’s requirements for residency training must be met. Moreover, individual ACVIM specialties may stipulate additional expectations for non-traditional RTPs. Refer to the specialty-specific Manuals available on the ACVIM website for any specialty-specific specifications.

3.C.2 TIME ALLOWED BETWEEN COMPLETION OF THE RTP TO ACHIEVING ACVIM DIPLOMATE STATUS (BOARD-CERTIFICATION)

The maximum time allowed for completion of the Board-certification process is 5 years from the completion date of the Candidate’s RTP (the date on the Candidate’s residency certificate), with the RTP itself being 2-3 years under typical circumstances and a maximum of 5 years for a non-traditional RTP. Consequently, the maximum time allowed for completion of the Board-certification process is 7-8 years from the start date of the Candidate’s RTP under typical circumstances, and up to 10 years from the start date of the Candidate’s RTP for those Candidates undertaking a non-traditional RTP. For those RTPs that do not provide dated residency training program completion certificates, the RTP must provide the Candidate and the ACVIM a letter stating that the Candidate has completed their RTP and stipulating the date of completion.

3.C.3 REGISTRATION OF THE RESIDENT AS AN ACVIM CANDIDATE

A resident must apply to register as a Candidate with the ACVIM using the online registration form, and must pay the associated Candidate registration fee, within 90 days of commencing an ACVIM-approved RTP (e.g., by October 12 of the same year for an RTP that commences on July 15). Registration with the ACVIM is necessary to ensure that a resident embarks on an ACVIM-approved RTP that conforms to the requirements of the specialty in which the individual wishes to become Board-certified. Information pertaining to registration as an ACVIM candidate is posted on the ACVIM website. Responsibility for registration is solely incumbent on the resident, with support and guidance to be provided by the RTP’s PD and RA.
Failure of a Candidate to register or applying to register after the 90-day deadline may jeopardize the certification process. Time served in the RTP exceeding 90 days before the Candidate’s registration will *not* count toward completion of the Candidate’s ACVIM RTP training time and Board-certification requirements.

Before commencing an RTP, the resident should verify with the SI, PD and/or RA that the RTP is registered with the ACVIM and approved by the appropriate specialty’s RTC. The ACVIM maintains a registry of current ACVIM-approved RTPs according to specialty that is available on the ACVIM website, or by request from the ACVIM office. If the RTP is *not* approved at the time the resident attempts to register, the Candidate’s registration will either be delayed, or denied, pending submission of paperwork by the RTP’s PD and approval by the appropriate specialty's RTC. Time served in a RTP before the actual RTP is registered and approved (section 3.C.4) also will *not* count toward completion of the Candidate’s ACVIM RTP training time and Board-certification requirements.

The ACVIM office evaluates the resident's Candidate registration application. The resident will receive notification of their registration status within 8 weeks of applying for registration. When approved, an ACVIM Candidate will receive a unique identifying number to be used throughout the certification process to access essential information, including examination results.

The CM rules and regulations regarding RTP requirements that are in effect at the time the Candidate registers with the ACVIM apply for the duration of that Candidate’s certification process unless an exception applies.

Policies and procedures that do *not* affect certification or RTP requirements (e.g., registration deadlines, fees, submission forms, etc.) may become effective for all Candidates at the time the change is made and published on the ACVIM website. It is incumbent on Candidates to regularly check the ACVIM website.

If a Candidate wishes to become Board-certified in more than one specialty simultaneously, the Candidate must indicate that multiple registration forms are being submitted and must pay a separate Candidate registration-associated fee for each specialty. The Candidate must satisfy the requirements of each specialty. Each RTP component completed may count toward the requirements of one specialty only.

If a Candidate subsequently registers for ACVIM candidacy in a second ACVIM specialty, the CM rules and regulations for that additional specialty that are in effect at the time of registration, apply for the duration of the certification process. An additional Candidate registration-associated fee must be paid.

If a Candidate wishes to change training emphasis or track and become certified in a specialty other than the one for which they originally registered, they must be accepted into a new RTP. The resident then applies to the ACVIM office to register as a Candidate in the new specialty. An additional Candidate registration-associated fee must be paid. The appropriate specialty’s RTC rules on the relevance of any RTP training that the Candidate has already completed as it pertains to the certification process for the new specialty.

If a Candidate wishes to change RTPs, but wishes to continue in the same specialty, the Candidate must be accepted into a new RTP, submit a relocation request to and get approval from the applicable Credentials and Residency Training Committees. In this case, the new RTP must have received approval as a non-traditional training program for that specific Candidate, even if that SI already has an ACVIM-approved (traditional) RTP in that specialty. This is because the Candidate will be participating in a unique experience, most likely with different training time requirements, at that SI, rather than those stipulated in the traditional approved RTP. The appropriate RTC must
approve the newly created non-traditional program for that specific Candidate, and the appropriate specialty CC will rule on the relevance of any RTP training that the Candidate has already completed.

Documentation of receipt of the Candidate’s registration application, receipt of the paid fee, and documentation of registration approval, with the Candidate’s unique identification number, must be maintained by the Candidate as part of their essential documentation.

Separate receipts for each ACVIM fee paid will be provided by the ACVIM and must be maintained by the Candidate as part of their essential documentation.

3.C.4 REGISTRATION OF THE RESIDENCY TRAINING PROGRAM (RTP)

The ACVIM maintains a registry of current ACVIM-approved RTPs, according to specialty, which is available on the ACVIM website, or by request from the ACVIM office.

The RTP’s PD is responsible for submitting a completed RTP registration form online for review by the relevant RTC initial approval. The relevant RTC either approves the RTP application or provides details of those deficiencies that must be corrected before the RTP can be approved. Registration materials for RTPs are specialty specific. Details regarding required information and online forms can be found on the ACVIM website. The relevant RTC responds within 45 days of the date of submission for new RTPs.

An RTP must be registered with the ACVIM and approved by the relevant RTC before accepting residents for training. PDs must always submit registration information for new RTPs at least 90 days before the scheduled RTP start date(s). If a resident commences an RTP before the RTP is approved, the time spent in the RTP before that RTP is registered will not count toward the completion of the Candidate’s ACVIM RTP training time and certification requirements.

The RTP’s PD is also responsible for submitting an annual application for re-approval. Each year, an ACVIM specialty’s RTC reviews its specialty’s RTPs to ensure that the RTPs remain in good standing (see Appendix A) and adequate to train residents in the relevant specialty. The PDs for all existing RTPs must submit current year renewal information each year no later than the date specified on the ACVIM website. Each calendar year (current year), online forms are updated and made available to all PDs no later than the date specified on the ACVIM website. The ACVIM office facilitates review of submitted information by the appropriate specialty RTC and designation as approved, on probation or denied / terminated will be granted to each RTP within 45 days of the renewal deadline. If a program is placed on probation, the relevant RTC provides details of deficiencies that must be corrected before the RTP can be re-approved.

PDs should note that the requirements specified in the RTP description that is approved by the specialty’s RTC become the official requirements for completion for residents commencing the RTP that year, even if those requirements exceed the minimum requirements stipulated in this Manual and the relevant specialty-specific Manual(s). Neither a Candidate, nor a PD, may retroactively petition for completion of a RTP, if the Candidate left the program before completing all requirements of the RTP as previously approved, even if the Candidate had met the minimum requirements for residency training as stipulated in this Manual and the relevant specialty-specific Manual(s). Moreover, neither the Candidate, nor the PD, may accelerate the completion date, nor lessen the requirements of the RTP, once that RTP has been approved by the RTC.

RTP registration is different and separate from Candidate registration, which is covered in section 3.C.3.
3.C.5 RESIDENCY TRAINING PROGRAM (RTP) PROBATION

The relevant RTC may place an RTP on probation. Triggers that may result in probationary status for an RTP include, but are not limited to, the following:

- Failure of the PD to fill out all RTP registration and approval forms accurately and completely and submit them to the ACVIM office as required.
- Failure of the PD to comply with RTP registration and approval submission deadlines as published on the ACVIM website, or to meet deadlines established by the relevant RTC if supplemental information is requested.
- Failure of an RTP to comply with all requirements for residency training as stipulated by the ACVIM in this Manual and the relevant specialty-specific Manual(s), including failure to provide adequate case exposure, failure to provide sufficient journal clubs, failure to provide sufficient didactic educational opportunities, failure to encourage resident / Candidate research experience, failure to support resident / Candidate examination preparation, and/or failure to support resident / Candidate well-being.
- Failure of the PD to notify the ACVIM, the relevant specialty RTC within 14 days of substantive changes to an RTP that could lead to noncompliance with the RTP requirements of the ACVIM or specialty. E.g., loss of critical staff members, placing a resident on probation, or terminating a resident, would count as such a substantive change.
- Failure of an RTP to have an acceptable pass rate, as decided by the relevant specialty’s RTC for Candidates taking the ACVIM General Examination, the Specialty Examination, or both, over a given period of time.
- Failure of an RTP to have an acceptable percentage of Candidates, as decided by the relevant specialty’s RTC successfully submitting credentials over a given period of time.
- Failure of an RTP to have an acceptable percentage of Candidates, as decided by the relevant specialty’s RTC achieving Diplomate status (Board-certification) over a given period of time.

All existing residents must be notified in writing of the RTP’s change in status, from approved to probationary, within 14 days of this change.

The RTP may continue to train existing residents during a period of probation, although the program will be subject to additional scrutiny by the relevant specialty’s RTC. Existing residents should be made aware that if the RTP fails to address the deficiencies resulting in probation any training time accrued while the program was on probation may not ultimately count towards completion of the Candidate’s ACVIM RTP training time and Board-certification requirements.

While on probation, an RTP may not accept new residents into the RTP, with the sole exception of a situation in which the RTP can document that the resident was offered and had accepted the residency training position before the RTP was placed on probation. If an RTP is placed on probation after a resident has been offered and accepted a residency training position, but before the resident’s start date, the RTP must notify the resident of the change in the RTP’s status before the resident’s start date. In such a situation, the ACVIM will still allow the resident to register as an ACVIM Candidate, with the expectation that the RTP will mitigate the deficiencies resulting in probation and return to good standing (see Appendix A). However, acceptance of ACVIM Candidate registration in this circumstance is not an assurance that the RTP will return to good standing (see Appendix A), nor an assurance that the time in training will
count toward the Candidate’s RTP training time and Board-certification requirements. Thus, it is imperative that the resident be fully informed by the RTP of the RTP’s ongoing communications with the relevant specialty’s RTC.

If an RTC review of an RTP results in an RTP being placed on probation, the RTP’s PD will have 30 days to respond to the relevant specialty’s RTC, documenting a remediation plan to correcting the deficiencies identified on review and resulting in probationary status. Failure to provide such a plan within 30 days is grounds for termination of the RTP. If, within the timeframe decided by the specialty RTC, the RTP fails to successfully execute the plan to mitigate deficiencies identified on review and resulting in probationary status, the ACVIM’s BOR may terminate the RTP upon the recommendation of the relevant specialty’s RTC. Periods of probation are circumstance-dependent and at the discretion of the RTC. Extensions to periods of probation may be granted under exceptional circumstances, and at the discretion of the relevant RTC.

If there are unduly severe deficiencies in an RTP, impacting the RTP’s ability to provide an acceptable residency training experience, or if the PD, RA, SD(s) and/or SSSD(s) dishonestly and/or inaccurately report the RTP’s training resources or capabilities, the relevant RTC may recommend RTP termination, without a prior probationary period.

3.C.6 RESIDENCY TRAINING PROGRAM (RTP) TERMINATION

The BOR may terminate a RTP upon the recommendation of the relevant specialty’s RTC. Upon termination, an RTP is immediately ineligible to train residents.

Termination typically, but not always, follows a probationary period, during which the RTP failed to satisfactorily resolve, within a timely manner as decided by the relevant RTC, the deficiencies that initially triggered the probation. Termination of an RTP may also be recommended when the RTP’s PD fails to provide an acceptable response to the relevant RTC within 30 days of the committee’s communication.

Immediate termination of an RTP, without a preceding probationary period, without prior consideration or probation, may occur when the PD, RA, SD(s) and/or SSSD(s) dishonestly and/or inaccurately report the RTP’s training resources or capabilities, or if there are unduly severe deficiencies in an RTP that result in the RTP being unable to provide an acceptable residency training experience.

The ACVIM archives all relevant documents and notes of the RTC pertaining to the termination of an RTP, and these documents are available to future RTCs, as well as the RTP’s PD, upon request. A terminated RTP may not simply be renewed or re-approved. If a terminated RTP wishes to be reinstated at a later date, the RTP must submit a new RTP application to be approved by the relevant RTC as a new RTP. The new submission is expected to provide clear documentation of what steps the RTP implemented to correct the prior issues and how the RTP plans to keep the corrections ongoing.

3.C.7 RESIDENCY TRAINING PROGRAM (RTP) SITE LOCATIONS

Residency clinical training experiences may take place at the SI, or at approved secondary training site(s), with limits and/or additional stipulations dictated by some specialties.

3.C.7.a PRIMARY SUPERVISION/TRAINING SITE

The primary training site is considered the SI.

3.C.7.b SECONDARY SUPERVISION/TRAINING SITE(S)
A secondary training site is any training site that is not the SI. Examples might include a satellite clinic or hospital or educational facility at a separate location that is directly affiliated with the SI, or an independent training or educational facility for which a current and/or continuous relationship exists with the SI and RTP.

If the resident is to complete any clinical training portion of the RTP at a secondary training site, i.e., a location separate from the SI, a proposal for the experience, along with supporting letters from the SD, SSSD or SND, must be submitted by the PD, and approval obtained from the relevant specialty RTC before the start of the training experience at the secondary training site. Ideally, the plan for such secondary training site experiences, along with supporting letters from the SD, SSSD or SND, will be included by the PD in the RTP application, and/or annual renewal, but this is not required.

If the resident completes any clinical training portion of the RTP at a secondary training site, i.e., a location separate from the SI, the resident must obtain written and signed confirmation of the training experience from the SD(s), SSSD(s) or SND(s) for each secondary training site experience to be included with their credential packet.

3.C.7.c REMOTE SUPERVISION/TRAINING SITE(S)

Both remote supervision and remote training experiences involve the use of technology, such as tele- or videoconferencing (e.g., Zoom, MS Teams, Skype, etc.) to facilitate some level of resident training and/or education. Online rounds, journal clubs, seminars and conferences are those best suited to the use of such technologies, but remote technology may be utilized to contribute to additional residency training requirements under certain circumstances. The utilization and availability of such technologies, and the application of remote training, may be further elaborated by each individual specialty in the relevant specialty specific Manual(s) available on the ACVIM website.

3.C.8 SUPERVISION OF RESIDENTS

The SI and PD must ensure that each RTP provides an appropriate level of supervision and meets the training needs for all residents and Candidates based on the specialty’s RTP requirements. Resident supervision is provided by SDs, SSSDs and SNDs, and may be direct, indirect, or remote. Educational didactic experiences may be in-person or remote.

3.C.8.a DIRECT SUPERVISION

Direct supervision is defined by the ACVIM as having the SD(s), SSSD(s) or SND(s) and resident on clinical duty together, with hands-on management of cases, interactively and concurrently. The SD(s), SSSD(s) or SND(s) is expected to be available for face-to-face consultation with the resident throughout the day. See specialty requirements in each individual specialty manual available on the ACVIM website for any further definition.

3.C.8.b INDIRECT SUPERVISION

Indirect supervision is defined by the ACVIM as circumstances wherein the SD(s), SSSD(s) or SND(s) and resident, although participating in a clinical practice together, are not on the clinic floor simultaneously and are not concurrently managing cases (e.g., “chief” weeks). Indirect supervision does imply a level of interactive case management, however, with the SD(s), SSSD(s) or SND(s) being immediately available (e.g., telephone,
text, email, Zoom, MS Teams, Skype, etc.) for consultation and direct supervision (section 3.C.8.a) when needed by the Candidate.

3.C.8.c REMOTE SUPERVISION

Remote supervision is defined by the ACVIM as the use of technology, such as tele- or videoconferencing (e.g., Zoom MS Teams, Skype, etc.) to facilitate some level of interactive resident training. The key component of remote supervision, as defined by the ACVIM, is that it involves interaction between the supervisor(s) and resident. Remote supervision is most suited to on-line interactive rounds, journal clubs and seminars, but it may be utilized to contribute to additional resident training requirements (e.g., clinical case management where the supervisor is not on-site, therefore not available for direct supervision when needed by the Candidate). The utilization and availability of such technologies and the application of remote supervision may be further elaborated on in each individual specialty manual available on the ACVIM website. for any further definition.

3.C.8.d REMOTE TRAINING / EDUCATIONAL EXPERIENCES

In contrast to remote supervision, remote training is defined by the ACVIM as the use of technology, such as tele- or videoconferencing (e.g., Zoom, MS Teams, Skype, etc.) to facilitate some aspects of resident education and/or training. Remote training, as defined by the ACVIM, best applies to on-line classes, seminars and conferences, where there is minimal to no interaction. The type and extent of remote training must be defined in the RTP application and/or annual renewal. The utilization and availability of such technologies and the application of remote training may be further elaborated on in each individual specialty manual available on the ACVIM website. for any further definition.

3.C.9 TRAINING WEEKS

The ACVIM stipulates that 1 week’s residency training be defined as a minimum of 40 hours accrued during a contiguous 7-day period. Typically, a resident cannot claim more than 1 week of training in any 7-day calendar week. See specialty requirements in the manual for each specialty for further definition of the 40-hour week and an explanation of any exceptions to the contiguous day requirement.

3.C.10 TRAINING HOURS

The ACVIM acknowledges that specific residency training experiences are, or may be, better suited to being completed through training hours, rather than in training weeks. The ACVIM stipulates that 1 training hour be defined as 1 continuous hour (60 minutes) of contact time with a SD, SSSD or SND, undertaking the specified training activity. See specialty-specific requirements in the manual for each specialty for further definitions and clarification of the application of training hours.

3.C.11 TRAINING MINUTES

The ACVIM acknowledges that specific residency training experiences are, or may be, better suited to being completed through training minutes, rather than in training hours or weeks. The ACVIM stipulates that 4 blocks of a minimum of 15 training minutes will amount to 1 continuous hour (60 minutes) of contact time with an SD, SSSD or SND, undertaking the specified training activity. See the specialty specific manual for further definitions and clarification of the application of training minutes.
3.C.12 RESEARCH REQUIREMENTS

Scientific discovery is critical to the mission of the ACVIM. In recognition of this, all ACVIM RTPs must include an assessable period of instruction or participation in research / creative scholarship that fosters an appreciation of, competency in, and contribution to the knowledge base of the Candidate’s respective specialty. This research / creative scholarship supports the development of Candidates as clinician-scientists. Research and scholarly activity is an essential credentialing requirement of all ACVIM specialties that the Candidate must fulfill before Diplomate status (Board-certification) is granted. Individual specialties stipulate specific requirements for research and scholarly activities. See the specialty-specific Manuals available on the ACVIM website.

3.C.13 JOURNAL CLUB

An organized, routinely scheduled, and documented journal club of at least 80 total hours over the course of the RTP must be an integral part of all ACVIM RTPs. Through the journal club, a resident sharpens critical thinking skills and increases understanding of statistical analysis of scientific data and clinical material. Residents and at least one Board-Certified individual from any ACVIM specialty, or from other specialties recognized by the ABVS and/or the EBVS, as permitted by a specialty in this Manual, must attend each journal club. This Manual allows for remote training / supervision and RTPs programs hosting joint journal clubs. Where required, documentation must be maintained by the Candidate, and provided as part of the credentials submission. Documentation of journal club will include dates of meetings, names of participants, including supervising mentors, and articles reviewed at each meeting. The RTC may request the documentation from the RTP if there are questions during an RTP’s annual review. See the specialty specific manual available on the ACVIM website.

3.C.14 DIDACTIC LEARNING EXPERIENCES

Individual ACVIM specialties stipulate resident participation in additional didactic educational experiences during the RTP, which might include rounds, examination preparation sessions, seminars, conferences, regional, state and/or national meetings. Where required, documentation must be maintained by the Candidate, and provided as part of the credentials submission. See the specialty specific manual available on the ACVIM website.

3.C.15 CLINICAL MILESTONES

Clinical milestones are not requirements of the ACVIM for residency training, nor the certification process. Clinical milestones are the recommendations of a specialty that provide guidelines for both residents and mentors during an RTP. Clinical milestones vary between specialties. The SI, PD, RA, SD(s), SSSD(s), SND(s) and resident should utilize these clinical milestones as guides to gauge clinical competencies and resident progress through the arc of the RTP. The RTP can use each specialty’s clinical milestones to identify a resident’s strengths and weaknesses, and areas where the resident can improve. The PD and RA can also use them, in combination with the stated RTP requirements, to decide whether to give a resident earlier leadership opportunities or privileges, or whether it might be appropriate to provide remediation or targeted training/educational experiences to the resident. See the specialty specific manual available on the ACVIM website.

3.C.16 ROLES AND RESPONSIBILITIES

3.C.16.a RESPONSIBILITIES OF THE SPONSORING INSTITUTION (SI)
The SI, in partnership with the PD and RA, must ensure a healthy and safe learning and working environment that promotes resident professional advancement, as well as psychological, emotional, and physical well-being. The SI and the PD must ensure the availability of all necessary professional, technical, and clerical personnel to best support the RTP. The responsibilities of the SI and PD include, but are not limited to, the following:

- Register and obtain ACVIM approval of all ACVIM RTPs offered by the SI.
- Give residents ready access to specialty-specific and other appropriate reference material in print or electronic format.
- Make available electronic medical literature databases with search capabilities, including providing access, either directly or remotely, to a veterinary or human medical library containing the textbooks and current journals that the RTC specifies.
- Provide access to all required textbooks, either as hard copies or as digital copies.
- Ensure access to clinical pathology services that include hematologic, clinical chemistry, microbiologic, and cytologic diagnostic abilities, and ensure that all clinical pathology reports are archived and retrievable.
- Ensure access to anatomic pathology services and ensure that all anatomic pathology reports are archived and retrievable.
- Establish a medical records system that allows the resident to maintain a medical record for each patient under the resident’s care.
- Make medical records retrievable within a searchable database.
- Make all necessary equipment for specialty-appropriate comprehensive imaging studies available. (This includes providing access to standard radiographic equipment, ultrasonography, CT, and MRI as appropriate for the specialty.)
- When required by a specialty, an intensive care facility must be present on the premises with qualified staffing that provides 24-hour care. The ACVIM defines an intensive care facility as a designated area of a hospital facility that is dedicated to the care of patients who are seriously ill and/or in need of continuous monitoring and/or therapeutic interventions. The intensive care facility must be staffed by qualified veterinary technicians with direct supervision by a licensed veterinarian.
- Offer regularly scheduled and performed didactic teaching sessions, journal clubs, and scientific seminars. The RA or PD must be able to provide documentation of these teaching events upon request of the RTC and/or specialty CC.
- Complete and approve semiannual written reviews by the PD and the RA of a resident’s progress that evaluate competencies, including the resident’s clinical and technical skills and knowledge base. The resident must sign off on these evaluations as documentation that they received the review and must be given a copy of the review for their records.
3.C.16.b RESPONSIBILITIES OF THE PROGRAM DIRECTOR (PD)

The PD, in partnership with the SI and RA, must ensure a healthy and safe learning and working environment that promote resident professional advancement, as well as psychological, emotional, and physical well-being. To this end, the PD’s responsibilities are as follows:

- Certify each year to the appropriate RTC and to the ACVIM, in writing, that they have read this Manual and any applicable specialty specific Manual(s) and understand their role in residency training.

- Ensure that the human resources policies and systems established to support both physical and psychological well-being of the resident are maintained and upheld.

- Ensure that all reports from the SI to the ACVIM are accurate, timely, and complete.

- Ensure that substantive changes within the RTP affecting compliance with a specialty’s or ACVIM’s requirements are reported to the ACVIM and the chair of the appropriate specialty within 14 days of the implementation, including, but not limited to, ensuring that the minimum number of SDs defined by each specialty is present within the RTP structure.

- Update and re-register each RTP with the ACVIM each year by the date specified on the ACVIM website to ensure that the RTP is in good standing and remains approved to train residents.

- Notify the ACVIM of any change in a resident’s status within 14 days of such a status change. If the resident is placed on probation, the required information must include the reason for probation and the date of the next scheduled resident review. If the resident is dismissed, the information provided must include the effective date of dismissal. If a resident on probation is reinstated to good standing, the PD will also notify the ACVIM of that change in status within 14 days.

- Submit information by the deadlines posted on the ACVIM website. A failure to meet these deadlines may result in an RTP being placed on probation. If the PD (whether the RTP is in good standing or on probation) does not respond to an RTC’s request for documentation regarding the RTP within 30 days of the request, that RTP may be placed on probation, or the current probation may be extended, or the program may be recommended for termination. If an RTP is placed on probation or is terminated, the ACVIM notifies the PD and all residents currently in the RTP of the action against the RTP. If an RTP is terminated, it may not be renewed. A previously terminated RTP may reapply as a new RTP; however, any time served by a resident after the RTP’s termination does not count toward completion of that individual’s residency. Therefore, if an RTP is placed on probation before a new resident’s start date (before the resident registering as a Candidate), the RTP is responsible for notifying the resident of the change in the RTP’s status before the resident beginning the residency.

- Inform each new resident, before they start the RTP, of their obligation to read this Manual, which applies to all specialties, and any applicable specialty specific Manual(s) in which they are to be registered and wish to become Board-Certified.

- Ensure that the RTP maintains the correct ratio of Diplomates to residents as specified by a specialty.

- Monitor resident supervision provided by others, namely SDs, SSSDs and SNDs, to ensure adequacy.
● Monitor and ensuring the quality of training activities that do not involve direct patient care, such as journal club, didactic education, and research requirements of the specialty.

● Verify to the relevant specialty’s CC or RTC that a Candidate has completed all residency training requirements.

3.C.16.c RESPONSIBILITIES OF THE RESIDENT ADVISOR (RA)

The RA, in partnership with the SI and PD, must ensure a healthy and safe learning and working environment that promotes resident professional advancement, as well as psychological, emotional, and physical well-being. To this end, the RA’s responsibilities are as follows:

● Certify each year to the appropriate RTC and the ACVIM, in writing, that the RA has read this Manual and any applicable specialty specific Manual(s) and understands their role in residency training.

● Contribute to a fair, respectful, and courteous atmosphere within the RTP.

● Make themselves available for career counseling and clinical mentoring of the resident.

● Provide meaningful and direct assessments of strengths and weaknesses to the resident, in writing, at least semiannually (Clinical Milestones for each specialty are available in the specialty specific manual available on the ACVIM website. The resident is to sign the SI’s copy of the evaluation to document that the resident has received the assessment.

● Ensure that the successful resident gains competency and can perform all diagnostic and therapeutic procedures essential to the specialty.

● Support and encourage the resident to participate in scholarly activities and guide the resident and ensure that case reports, publications, and research projects as required by the specialty are completed.

● Support and attend resident journal club regularly.

● Sign all documentation verifying completion of a resident’s RTP and provide this documentation to the PD.

3.C.16.d RESPONSIBILITIES OF A SUPERVISING DIPLOMATE (SD)

The SD must contribute to ensuring a healthy and safe learning and working environment that promotes the resident’s professional advancement, as well as psychological, emotional, and physical well-being. To this end, the SD’s responsibilities are as follows:

● Provide appropriate mentoring in the primary discipline as required by the specialty.

● Ensure that the resident provides appropriate and compassionate clinical patient care.
● Ensure that the resident gains a growing knowledge of established and evolving medical literature that is essential to the specialty.

● Participate in clinical rounds or discussions of topical issues germane to the resident’s specialty.

● Support and attend resident journal club meetings.

● Contribute to a fair, respectful, and courteous atmosphere within the RTP.

3.C.16.e RESPONSIBILITIES OF A SECONDARY-SPECIALTY SUPERVISING DIPLOMATE (SSSD)

The SSSD must contribute to ensuring a healthy and safe learning and working environment that promotes the resident’s professional advancement, as well as psychological, emotional, and physical well-being. To this end, the SSSD’s responsibilities are as follows:

● Provide appropriate mentoring in that supporting discipline as required by the specialty.

● Contribute to a fair, respectful, and courteous atmosphere within the RTP.

3.C.16.f RESPONSIBILITIES OF SUPERVISING NON-DIPLOMATE (SND)

The SND must contribute to ensuring a healthy and safe learning and working environment that promotes the resident’s professional advancement, as well as psychological, emotional, and physical well-being. To this end, the SND’s responsibilities are as follows:

● Provide appropriate mentoring in the primary discipline as required by the specialty.

● Ensure that the resident provides appropriate and compassionate clinical patient care.

● Ensure that the resident gains a growing knowledge of established and evolving medical literature that is essential to the specialty.

● Participate in clinical rounds or discussions of topical issues germane to the resident’s specialty.

● Support and attend resident journal club meetings.

● Contribute to a fair, respectful, and courteous atmosphere within the RTP.

3.C.16.g RESPONSIBILITIES OF A RESIDENT

During the certification process, residents are required to:

● Register as an ACVIM Candidate within 90 days of commencing their RTP.

● Conduct themselves professionally and ethically. Residents that fail to maintain ethical standards of conduct will be subject to disciplinary actions as described in section 3.D.1 below or in the “Academic Misconduct Statement” located on the Candidate pages of the ACVIM’s website.

● Reasonably participate in and contribute to their own learning and professional development, as well as psychological, emotional, and physical well-being.
● Provide competent and compassionate medical care.

● Be responsive to patient and/or client needs.

● Communicate effectively and honestly with clients, all members of the supporting medical and administration staff, and referring veterinarians.

● Maintain timely and accurate medical records.

● Respect the privacy interests of the owners of their patients.

● Progress satisfactorily in their RTP as defined by their RTP.

● Participate in research and scholarly activities, such as conferences, seminars, rounds, and journal club.

● Comply with the schedule provided them by their RA, including primary clinic duties, emergency duties, research, study time, and vacation.

● Contribute to a fair, respectful, and courteous atmosphere within the RTP.

3.C.16.h RESPONSIBILITIES OF A CANDIDATE

● Read this Manual and any applicable specialty specific Manual(s) and understand the requirements that must be met prior to granting of Board-certification.

● Reasonably participate in and contribute to their own education, clinical training, and professional development, as well as psychological, emotional, and physical well-being.

● Reasonably work towards fulfilling the requirements of the ACVIM certification process in the specialty in which they wish to become Board-Certified.

● Conduct themselves professionally and ethically. Candidates that fail to maintain ethical standards of conduct will be subject to disciplinary actions as described in section 3.D.1 below or in the “Academic Misconduct Statement” located on the Candidate pages of the ACVIM website.

3.D CREDENTIALS

THERE ARE NO EXCEPTIONS TO THE DEADLINE DATE: CREDENTIALS PACKETS MUST BE SUBMITTED BY THE DUE DATE TO ALLOW ADEQUATE TIME FOR REVIEW BY THE RELEVANT SPECIALTY CC.

NOTE: Credentials submission and subsequent conditional approval is a prerequisite to sitting the Specialty Exam. Failure to submit credentials will render a Candidate ineligible to sit the Specialty Exam.

3.D.1 CREDENTIALS CONDUCT

Please refer to the “Academic Misconduct Statement” on the Candidate pages of the ACVIM website. All submitted credentials must accurately represent the Candidate’s own work.

The following infraction(s) by a Candidate may result in disciplinary action:
3.D.2 CREDENTIALS ELIGIBILITY, REQUIREMENTS AND SUBMISSION

Candidates must submit documentation of their credentials to the ACVIM before they are eligible to take their respective Specialty Examination. The relevant specialty CC reviews, approves, conditionally approves or rejects, the Candidate’s credentials documentation.

Each specialty has established credentials requirements, some or all of which must be satisfied before the Candidate may take the Specialty Examination, and all of which must be satisfied before a Candidate can attain ACVIM Diplomate status (synonym: Board-certification). Candidates can access submission and credentials requirements on the ACVIM website for each individual specialty. Candidates should always check the ACVIM website for the most up to date information regarding credentials eligibility, requirements and submission.

Deadlines for credentials submission and/or the credentials fee may vary between the specialties. Deadline dates may be found at the ACVIM website and within the application materials to be submitted online. It is each Candidate’s responsibility to review and comply with all requirements of credentials submission.

3.D.3 CREDENTIALS FEES

Separate fees are associated with: 1) Candidate registration, 2) the ACVIM General Examination, 3) specialty credentials submission, and 4) the ACVIM Specialty Examinations. Fees specific to each specialty are available in the specialty manual available on the ACVIM website. Candidates must pay a fee associated with credentials submission. Candidates whose credentials were not previously approved, and who are resubmitting credentials, do not pay an additional credentials fee associated with the resubmission.

Documentation of receipt of the Candidate’s credentials application, receipt of the paid fee, and documentation of credentials approval, with the Candidate’s unique identification number, must be maintained by the Candidate as part of their essential documentation.

Separate receipts for each ACVIM fee paid will be provided by the ACVIM and must be maintained by the Candidate as part of their essential documentation.
The BOR determines the fee amounts annually. Fees must be paid online or by other means set forth by the ACVIM. The ACVIM website contains details regarding payment of the various fees, including deadlines, under individual sections dealing with each specific portion of the certification process.

3.E GENERAL AND SPECIALTY EXAMINATIONS

***Always check the Candidate exam webpage(s) on the ACVIM website for the most up-to-date information pertaining to ACVIM Examinations. Examination format/design, item types, and standard setting/cut score determination method(s) are subject to change, as necessary to continue to align the examination with best practice and industry standards. Any changes will be reflected in the current examination blueprint and/or information provided to Candidates. ***

3.E.1 EXAMINATION CONDUCT

ACVIM Candidates take all examinations on the honor system. Please refer to the “Academic Integrity Statement” on the Candidate pages of the ACVIM website.

The following infraction(s) by a Candidate may result in disciplinary action:

● Cheating on an examination.
● Receiving outside assistance on an examination (including advance notice of questions on the examination).
● Misrepresenting work on an examination.
● Violating the confidentiality of an examination.
● Having behaved unethically in any other way during the examination process.

The following disciplinary action(s) may be taken regarding a Candidate found to have violated the “Academic Integrity Statement”:

● Receiving a failing grade on the examination in question.
● Forfeiture of fees.
● Denial of permission to retake the examination in future years.
● Loss of the ability to attain ACVIM Diplomate status.
● Being subject to any other disciplinary action as deemed appropriate by the Certification Council.
● Any combination of the aforementioned.

3.E.2 SPECIAL ACCOMMODATIONS

The ACVIM complies with the Americans with Disabilities Act of 1990, as amended (the “ADA”). Any Candidate with a disability or impairment, that may require special accommodation(s) to take an examination, must complete the application form available on the Candidate pages of the ACVIM website, or by request from the ACVIM office, and return it via email to Certification@acvim.org by the registration deadline.
ACVIM CERTIFICATION MANUAL

The ACVIM cannot guarantee the availability of accommodation if a Candidate who requires special accommodation does not request an accommodation by the registration deadline. If a disability or impairment is identified after the registration deadline, the Candidate must notify the ACVIM within 30 days of the diagnosis or recognition of the disability or impairment.

Accommodation will not be granted retroactively. Therefore, if a Candidate informs the ACVIM of impairment or disability after an examination has been completed, no changes can be made to that Candidate’s examination results or to how that Candidate’s examination is graded in comparison to other Candidates.

3.E.3 SCHEDULING THE EXAMINATIONS

A Candidate may elect to take the General Examination and Specialty Examination in the same year or may elect to take the General Examination and Specialty Examination in separate years, provided the Candidate is in good standing (see Appendix A) at the time of taking either or both the General Examination and the Specialty Examination.

If a Candidate leaves an RTP, either temporarily (e.g., a leave of absence) or permanently (e.g., dismissal) before completing the RTP, the Candidate is ineligible to take any examination until that individual resumes an RTP and the appropriate specialty’s RTC approves the Candidate’s current status as an ACVIM Candidate in good standing (see Appendix A).

Dates for each examination, examination registration deadlines, and the steps required to submit credentials, are maintained in the Candidate pages on the ACVIM website.

- A Candidate may take the General Examination for the first time provided that they will have completed at least 18 months (72 weeks) of an approved RTP before the examination date and have fulfilled all additional requirements as specified by the relevant specialty as outlined in the relevant specialty’s manual available on the ACVIM website.

- A Candidate intending to take the Specialty Examination must satisfy the specialty’s examination prerequisites first as outlined in the relevant specialty’s manual available on the ACVIM website.

- A Candidate may elect to take the General and Specialty examinations at the same time. To do so, the Candidate generally must have completed at least 108 weeks of an approved RTP before the examination date. Specialty requirements on credentialing vary but eligibility to take the ACVIM General Examination is the same for all specialties. Review relevant specialty specific Manual(s) available on the ACVIM website.

3.E.4 EXAMINATION FEES

Separate fees are associated with 1) Candidate registration, 2) the ACVIM General Examination, 3) specialty credentials submission, and 4) the ACVIM specialty examinations. There are also retake fees applicable for Candidates who are repeating all or a portion of an examination, whether the General Examination or a Specialty Examination. The ACVIM website contains details regarding payment of the various fees, including deadlines. Fees must be paid online, or by other means set forth by the ACVIM.

The BOR reviews the examination fee amounts annually.
Documentation of receipt of the Candidate’s examination registration, receipt of the paid fee, and documentation of credentials approval (where applicable), with the Candidate’s unique identification number, must be maintained by the Candidate as part of their essential documentation.

Separate receipts for each ACVIM fee paid will be provided by the ACVIM and must be maintained by the Candidate as part of their essential documentation.

3.E.5 THE ACVIM GENERAL EXAMINATION

***Always check the Candidate exam webpage(s) on the ACVIM website for the most up-to-date information pertaining to ACVIM Examinations. Examination format/design, item types and standard setting/cut score determination method(s) are subject to change, as necessary to continue to align the examination with best practice and industry standards. Any changes will be reflected in the current examination blueprint and/or information provided to Candidates.***

All ACVIM Candidates must pass the General Examination in order to be eligible to attain Diplomate status (synonym: Board-certification). The ACVIM General Examination covers all aspects of veterinary internal medicine and must be taken and passed by all Candidates seeking certification by any specialty within the ACVIM.

To take the ACVIM General Examination, Candidates must have completed at least 18 months of an ACVIM-approved RTP by the time the ACVIM General Examination is taken. A Candidate intending to take the General Examination must register and pay the associated fee by the deadline published on the ACVIM website. A list of confirmed registrants via Candidate ID# will be posted on the ACVIM website after the registration deadline has passed. A Candidate who fails the ACVIM General Examination may re-take the examination when it is next offered. A Candidate intending to re-take the General Examination must register and pay the associated fee by the deadline published on the ACVIM website.

Documentation of receipt of the Candidate’s General Examination registration, receipt of the paid fee, and documentation of approval of eligibility, with the Candidate’s unique identification number, must be maintained by the Candidate as part of their essential documentation.

Separate receipts for each ACVIM fee paid will be provided by the ACVIM and must be maintained by the Candidate as part of their essential documentation.

3.E.6 ACVIM SPECIALTY EXAMINATIONS

***Always check the Candidate exam webpage(s) on the ACVIM website for the most up-to-date information pertaining to ACVIM Examinations. Examination format/design, item types and standard setting/cut score determination method(s) are subject to change, as necessary to continue to align the examination with best practice and industry standards. Any changes will be reflected in the current examination blueprint and/or information provided to Candidates.***

A Candidate intending to take a Specialty Examination must submit their credentials by the credentials submission deadline established by each specialty each year and published on the ACVIM website. Each Candidate receives notification no later than 60 days after the submission deadline as to the acceptability of the submitted credentials and their eligibility to register and take the Specialty Examination. Review the relevant specialty specific Manual(s)
available on the ACVIM website for specific information. Candidates retaking the Specialty Examination, or a portion thereof, are not required to resubmit credentials, but must pay another fee to retake the Specialty Examination.

Documentation of receipt of the Candidate’s Specialty Examination registration, receipt of the paid fee, and documentation of credentials approval, with the Candidate’s unique identification number, must be maintained by the Candidate as part of their essential documentation.

Separate receipts for each ACVIM fee paid will be provided by the ACVIM and must be maintained by the Candidate as part of their essential documentation.

Failure to register to take the Specialty Examination by the deadline on the ACVIM website renders the Candidate ineligible to take the Specialty Examination at its next offering. A Candidate not on the list(s) of Candidates registered to take the Specialty Examination will not be admitted to the examination.

3.E.7 NOTIFICATION OF ACVIM EXAMINATION RESULTS

The examination cut score (score required to pass the examination) is recommended by an ACVIM-appointed committee of subject matter experts, who are trained to evaluate and rate exam questions, using a rigorous, psychometrically sound standard setting process. The cut score is determined based on the minimal level of competence required to perform the job of a certified individual in the selected specialty, as determined by Diplomates using a psychometrically vetted process and is not based on the curve of the Candidate’s performance. The ACVIM Certification Council will approve the final cut score from a range of possible cut scores based on the results of the standard setting process that is facilitated by the psychometricians, and the recommendations of the standard setting committee.

Candidates in all ACVIM specialties are identified only by the unique identification numbers assigned to them by the ACVIM office at the time of initial registration as an ACVIM Candidate. The notification process is the same for the ACVIM General Examination and all the Specialty Examinations. Examination results are provided in letters that are uploaded to the Candidates’ Dashboard on the ACVIM website. Once the result letters are prepared, a message is posted on the ACVIM website providing instructions to Candidates on how they may obtain their results. Candidates receive this written notification of their examination results within 45 days from the last date of examination administration.

3.E.8 PROCEDURE FOR REAPPLICATION FOLLOWING ACVIM EXAMINATION FAILURE

A Candidate intending to retake a previously failed examination, whether the ACVIM General Examination, the Specialty Examination, or both, must register online and pay the appropriate fee(s) by the deadline dates specified on the ACVIM website. Review the relevant specialty’s manual available on the ACVIM website for specific information and deadlines.

Documentation of receipt of the Candidate’s retake Specialty Examination registration, receipt of the paid fee, and documentation of credentials approval, with the Candidate’s unique identification number, must be maintained by the Candidate as part of their essential documentation.

Separate receipts for each ACVIM fee paid will be provided by the ACVIM and must be maintained by the Candidate as part of their essential documentation.
3.F APPEALS

The chair of the Certification Council appoints one ACVIM Diplomate from each specialty to serve as a voting member on the ACVIM Certification Appeals Committee. The ACVIM certification liaison serves as an ex-officio member of this committee. When an appeal is submitted, the certification liaison organizes a virtual conference call for the committee membership, led by the committee chair, to review the appeal and to render a decision. The Certification Appeals Committee is charged solely with determining whether the applicable specialty committee followed proper administrative policy and procedure in the decisions made. The Certification Appeals Committee decides whether the committee(s) acted erroneously by:

- Disregarding established criteria for certification or approval of a submission.
- Failing to follow stated policies and/or procedures.
- Failing to consider relevant evidence and documentation presented by the appellant.

3.F.1 APPEALS PROCESS

If a Candidate or a Diplomate who has received a negative decision and believes that a specialty’s Maintenance of Credentials Committee (MOCC), Credentials Committee (CC), or Form Review Committee (FRC) failed to follow proper procedures in making their decision, they may appeal the decision. There is a standalone appeals process and committee that is specific to the MOC program. The process of filing an appeal for MOC is, however, the same as for a general appeal.

Appeals must be submitted to the ACVIM certification department in writing by email within 30 calendar days of receipt of the decision being appealed.

- Appeals should consist of a brief letter summarizing the reason for the appeal, along with any supporting documents.
- When an appeal is received, the ACVIM’s certification liaison notifies the Certification Council, the chair of the appropriate specialty CC, MOCC, or FRC, and the members of the Certification Appeals Committee (or the MOC Appeals Committee) that an appeal has been submitted, maintaining the anonymity of the appellant(s).
- The chair of the appropriate specialty CC, MOCC, or FRC and ACVIM staff submits all data relevant to the appeal and a letter summarizing the reasons for the committee’s decision to the Appeals Committee as soon as practical so that the Certification Appeals Committee (or the MOC Appeals Committee) can meet within its deadline.
- The chair of the appropriate Appeals Committee calls a meeting, organized by the certification liaison, within 30 calendar days of the appeal deadline to review an appeal.
- The certification liaison notifies the Certification Council and the appropriate committee chair(s) of the results of that review, maintaining the anonymity of the appellant(s).
- The ACVIM certification liaison notifies the appellant of the applicable Appeals Committee’s decision within 30 days after the appeal submission deadline.
Decisions of the ACVIM Certification Appeals Committee and the ACVIM MOC Appeals Committee are final and cannot be appealed within the ACVIM.

3.G MAINTENANCE OF CREDENTIALS (MOC)

An MOC program is in effect for all ACVIM Diplomates certified after January 1, 2016, and for any Diplomate certified before January 1, 2016, who volunteered to participate in the MOC program. Every Diplomate who completed credentials and became a Diplomate on, or after, January 1, 2016, is awarded a Diplomate certificate that is valid for 10 years. By the conclusion of this 10-year period, the Diplomate must have met the criteria established to maintain credentials. If the Diplomate fails to meet the established criteria for MOC, the Diplomate certificate will be repossessed, the veterinarian is no longer recognized as an ACVIM Diplomate (Board-certified), and the veterinarian forfeits all associated privileges.

Reinstatement of an ACVIM Diplomate certificate is possible with the individual meeting all the requirements of the specialty’s MOC committee. Reinstatement is contingent upon the approval of the Certification Council, payment of all dues in arrears (to a maximum of 3 years), and payment of current dues in full.

The established criteria for MOC can be found on the ACVIM website. Individual specialties may stipulate their own MOC criteria. Review the relevant specialty specific Manual(s) available on the ACVIM website for specific information on maintenance of certification requirements. Each ACVIM specialty has an MOC committee that evaluates and scores activities submitted by Diplomates in that specialty toward meeting the established MOC criteria of the specialty.

3.H ACVIM DIPLOMATE CERTIFICATES

A Candidate becomes an ACVIM Diplomate immediately upon completion and acceptance by the ACVIM of all requirements established in this Manual. The ACVIM office notifies the Candidate of the decision. The Candidate is mailed an official ACVIM Diplomate certificate and recognized at the next ACVIM Forum. The ACVIM office prepares these certificates and publishes lists of new ACVIM Diplomates.

3.H.1 REPOSSESSION OF ACVIM DIPLOMATE CERTIFICATES

ACVIM Diplomate certificates always remain the property of the ACVIM, and may be repossessed when one or more of the following occurs:

- The issuance of the ACVIM Diplomate certificate or its receipt is contrary to, or in violation of, any provisions of the ACVIM Bylaws.

- An ACVIM Diplomate fails to maintain an acceptable degree of competence in the practice of veterinary internal medicine, one of its specialties, or both.

- An ACVIM Diplomate who earned their certificate during or after 2016 fails to meet the criteria required to maintain credentials.

- An ACVIM Diplomate is in breach of the ACVIM Bylaws and/or Code of Conduct.
3.H.2 REINSTATEMENT OF ACVIM DIPLOMATE CERTIFICATES

Reinstatement of an ACVIM Diplomate certificate is possible with the individual adequately addressing the reason(s) for repossession. Reinstatement is contingent upon the approval of the Certification Council, payment of all dues in arrears (to a maximum of 3 years), and payment of current dues in full.

3.I POLICY ON POST-RTP TERMINOLOGY AND SPECIALTY TITLE USAGE

The ACVIM’s Code of Conduct, the AVMA’s Principles of Veterinary Ethics, and the ABVS Policy Manual are quite clear that it is unethical for veterinarians to identify themselves as members of an ABVS recognized specialty or ABVS recognized specialty organization if such certification has not been awarded. Only those veterinarians who have been certified by an ABVS recognized specialty or ABVS recognized specialty organization may refer to themselves as veterinary specialists.

Only those veterinarians who are Board-certified may claim Diplomate status and/or associate themselves with the ACVIM. A Candidate who has not completed the credentialing process and who is not an ACVIM Diplomate may not use partial completion of the credentialing process as a qualification for self-promotion, nor can they use the name ACVIM, the letters ACVIM, the ACVIM logo, or any other implication of achievement of some degree of specialization. Such usage is unethical and in violation of the policies and procedures of the ACVIM.

In the opinion of the ACVIM and the ABVS, the terms “board eligible” and “board qualified” are outdated, inappropriate and misleading when referring to the certification process, and neither term should be used by any veterinarian. A veterinarian is either Board-certified, having met all of the criteria of a particular specialty college or board, or a veterinarian has no such Board-certification. Candidates who have completed an RTP and have received a residency certificate, but not completed all the relevant specialty’s criteria for certification, may identify themselves in one of two ways: 1) They may identify themselves as “practice limited to” the specialty in which they were trained (e.g., practice limited to oncology) and/or 2) They may identify themselves as “residency trained in” the specialty in which they were trained (e.g., residency trained in cardiology).

3.J POLICY ON CONFIDENTIALITY

ACVIM is committed to protecting confidential and/or proprietary information related to candidates and diplomates as well as the development, maintenance, and administration of ACVIM examinations. Confidential information includes but is not limited to an individual’s registration status, personal information, exam development documentation (including job analysis study reports, technical reports, and cut score studies), exam items and answers, exam forms, item banks, and individual exam scores. These materials, whether printed or electronic, will be kept in a secure and private location at all times until they are returned to ACVIM or are destroyed as directed.

ACVIM will not disclose confidential information regarding the candidate or diplomate unless authorized in writing by the individual or as required by law. If information is released due to a legal matter, ACVIM will inform the individual. Personal information submitted by candidates or diplomates through the certification process or maintenance of credentials process is considered confidential. Personal information retained within the ACVIM database will be kept confidential.

Examination results are considered confidential. Exam results will be released only to the individual candidate unless a signed release is provided. The ACVIM can disclose that a Diplomate is certified in responding to an inquiry from an outside party.
3.K VERIFICATION

ACVIM maintains a database of all active candidates and diplomates. The names of ACVIM Diplomates and their certification status are not considered confidential and are published by ACVIM for verification purposes. Verification will be accessible via the ACVIM’s website and by contacting ACVIM in writing or by phone.

Diplomates may opt-out of inclusion in the directory by contacting ACVIM in writing. Written verification of credentialed status may be obtained by providing the name in writing to the ACVIM staff. Only the certification status may be shared. No other data may be shared without written permission from the candidate or diplomate.

Registration or Candidate status, information about whether an individual has taken the examination, and score information will not be released to those requesting verification.

3.L STATEMENT OF NON-DISCRIMINATION

The ACVIM adheres to principles of fairness and due process. ACVIM endorses the principles of equal opportunity. In administering the certification program, ACVIM does not discriminate or deny opportunity to anyone on the basis of race, color, creed, age, gender, national origin, religion, disability, marital status, parental status, ancestry, sexual orientation, military discharge status, source of income, or any other status protected by applicable law. All candidates for certification will be judged solely on the published criteria for ACVIM Board-certification.
APPENDIX A: IMPORTANT DEFINITIONS

ACVIM CANDIDATE

An ACVIM Candidate is a veterinarian who is actively seeking Diplomate status (synonym: ACVIM Board-certification) from the ACVIM, who is/has been enrolled in an ACVIM-approved RTP, is registered with the ACVIM as a Candidate, and is making satisfactory progress toward attaining Board-certification. Individuals remain Candidates until one of the following happens:

- They obtain Diplomate status (the candidacy period includes the time between completion of the RTP and achieving Diplomate status).
- They withdraw from the RTP before the satisfactory completion of the program.
- They are excused from an RTP before the satisfactory completion of the program.
- They fail to achieve Board-certification within the specified allowable candidacy period as defined in the ACVIM Certification Manual (or General Information Guide (GIG)) applicable to that Candidate.
- They indicate they no longer wish to pursue Board-certification post-residency.

Candidates are governed by the requirements in the Certification Manual (or GIG) in effect at the start of their RTP with the following exceptions:

- If a rule eliminates or lessens an RTP or certification requirement, that lessened requirement may be applied to current Candidates (limitations and exceptions to this will be stated at the time of any rule change).
- If a rule is purely procedural and does not impact RTP or certification requirements, such as the date of an examination or the format of an examination, that rule becomes effective for all Candidates at the time the rule is implemented, regardless of the start date of a Candidate’s RTP.

If a Candidate fails to achieve active Diplomate status within the timeframe specified by the ACVIM specialty under which the Candidate is registered, they are no longer considered a Candidate of the ACVIM, may not resubmit credentials or participate in additional examination attempts, and are ineligible to become a Diplomate of the ACVIM.

ACVIM DIPLOMATE

An ACVIM Diplomate is an individual belonging to one of the ACVIM specialties who receives approval for Diplomate status designation from the Board of Regents (BOR) having fulfilled all of the criteria to become an ACVIM Diplomate (synonym: ACVIM Board-Certified), including completing an approved residency training program (RTP), successful submission of credentials, and passing both the General and Specialty Examinations, as well as remaining current on annual dues and/or fees and, for Diplomates certified in 2016 and later, continuing to fulfill the requirements for maintenance of credentials (MOC).

In the context of ACVIM-related activities, including residency training, the terms “cardiologist,” “large animal internist,” “neurologist,” “nutritionist,” “oncologist,” and “small animal internist” apply only to an individual who is an ACVIM Diplomate in that respective specialty, or to a Diplomate in an equivalent EBVS-recognized veterinary specialty who is acting as an authorized supervising Diplomate (SD) or secondary-specialty supervising Diplomate (SSSD) in an ACVIM-approved residency training program (RTP).

An ACVIM Diplomate who does not remain current on payment of certification fees, or who is certified on or after January 1, 2016, and fails to meet established MOC program criteria, is subject to the following limitations:
• They may not use the name American College of Veterinary Internal Medicine in association with their title, work, and/or associated institution.
• They may not use the letters “ACVIM” or the “DACVIM” credential in association with their title, work, and/or associated institution.
• They may not use the ACVIM logo in association with their title, work, and/or associated institution.
• They may not claim to be a Board-certified specialist or otherwise imply that they are a Diplomate, per ABVS guidelines.

An ACVIM Diplomate who does not remain current on payment of all annual dues and fees, or who is certified on or after January 1, 2016, and fails to meet MOC program criteria, immediately loses the following benefits:

• The ability to serve as an ACVIM program director (PD), resident advisor (RA), SD, or SSSD (where relevant).
• The right to actively and meaningfully contribute to ACVIM RTP activities.
• The right to vote, to hold office, to serve on committees, and to attend business meetings of the ACVIM and their respective specialty or specialties.
• Access to the ACVIM Diplomate discount on ACVIM Forum registration and all other ACVIM discounts.
• Access to the ACVIM’s website, along with access to all ACVIM updates and other member communications.
• Their listing as an ACVIM Diplomate in the ACVIM Diplomate directory and on VetSpecialists.com.
• Other privileges as deemed appropriate by the BOR and the ACVIM’s legal representation.

Reinstatement to Diplomate status is contingent upon approval by the BOR, payment of all dues and fees in arrears (to a maximum of 3 years), and payment of current dues and fees in full. Reinstatement of an ACVIM Diplomate certificate after failure to meet MOC criteria is possible by meeting all of the requirements of the specialty’s MOC committee, in addition to the requirements stated above.

ACVIM MEMBER
An ACVIM member is an individual who receives approval for ACVIM membership status designation from the ACVIM office and Board of Regents (BOR), having fulfilled all the applicable criteria as set forth in the Bylaws, as well as remaining current on the applicable membership category dues. Categories of ACVIM membership include Diplomate, Emeritus, and Honorary. Emeritus and Honorary members cannot serve as a PD, RA, SD or SSSD (where relevant). Additional privileges may apply, however, as determined by the BOR.

ACVIM SPECIALTY
The ACVIM is the umbrella registered veterinary specialty organization (RVSO) for several registered veterinary specialties (RVSs), currently including the specialties of cardiology, large animal internal medicine (LAIM), neurology, nutrition, oncology, and small animal internal medicine (SAIM).

AMERICAN BOARD OF VETERINARY SPECIALTIES (ABVS)
The American Board of Veterinary Specialties (ABVS) is the umbrella organization for accrediting veterinary specialties within the United States. An ABVS-accredited specialty organization is identified as a recognized veterinary specialty organization (RVSO), and an accredited specialty is identified as a recognized veterinary specialty (RVS). The ACVIM is an RVSO, and all ACVIM specialties are RVSs.
The ABVS is composed of the following:

- Four voting representatives from AVMA-recognized veterinary specialty organizations, chosen by the Veterinary Specialty Organizations Committee (VSOC) (section 3.AK).
- Four voting representatives representing non-specialty AVMA members (section 3.F).
- One voting liaison from the Association of American Veterinary Medical Colleges (AAVMC).
- One voting liaison from the American Association of Veterinary State Boards (AAVSB).
- One voting psychometrician.
- One voting public member.

AMERICAN VETERINARY MEDICAL ASSOCIATION (AVMA)

The American Veterinary Medical Association (AVMA) is the USA's leading advocacy organization for the veterinary profession, striving to improve the health and well-being of animals, humans and the environment we share. The AVMA:

- Develops positions on key issues and advocate for veterinarians, advancing their ability to provide crucial veterinary services.
- Provides educational accreditation and certification programs that protect and elevate the quality of veterinary care.
- Provides timely and relevant products and services that enhance AVMA members’ opportunities for success and service and supports them in protecting the health and welfare of animals in their care.
- Educates the public on the important and varied types of work that veterinarians do to advance both animal and human health.

AUTHORIZED AGENT (AA)

The authorized agent (AA) is the individual with administrative responsibility at a sponsoring institution (SI) that must verify that the named program director (PD) has the authority needed and will receive the support necessary for the residency training program (RTP) to succeed. The AA may be the department head if the RTP is in a university or an owner or officer of the company if the RTP is in a private practice. Each year, upon renewal of the RTP, the AA must provide signed support in the form of a completed AA letter that documents the ongoing support of each RTP.

BOARD OF REGENTS (BOR)

The Board of Regents (BOR) is the governing body of the ACVIM. Voting members of the BOR are the Chair of the BOR, President, President-elect, Specialty Presidents, Immediate Past Chair of the BOR, Treasurer, and Members At-Large. Nonvoting members of the BOR include the ACVIM Chief Executive Officer and Certification Liaison. The exact composition of the BOR and the Executive Committee (EC), along with the duties and responsibilities of the BOR and ACVIM officers, are stipulated in the ACVIM’s Bylaws available on the governance page of the ACVIM website.

BOARD-CERTIFIED / BOARD-CERTIFICATION

In the context of this Manual, Board-Certified refers to a veterinary specialist that is a Diplomate and member in good standing of an ABVS or European Board of Veterinary Specialties (EBVS) registered veterinary specialty and/or registered veterinary specialty organization. In the context of this Manual, Board-certification is the process by which said Diplomate and member of the ABVS or EBVS registered veterinary specialty and/or registered veterinary specialty organization became Board-Certified.
The Certification Council independently governs the certification programs of the ACVIM. The Certification Council is solely responsible for all decisions relevant to the core aspects of the ACVIM certification programs as well as the oversight of committees and task forces related to certification, including but not limited to the Maintenance of Credentials Committees, Credentials Committees, and the various examination committees and task forces.

CERTIFICATION LIAISON

The ACVIM’s certification liaison is a nonvoting member of the BOR, Certification Council, and the Executive Committee of the BOR, who serves as the ACVIM’s representative to the Veterinary Specialty Organizations Committee (VSOC) and to the ABVS, as well as overseeing the activities of the ACVIM Appeals Committee. The certification liaison also performs other tasks as assigned by the chief executive officer, at the request of the Executive Committee, and/or at the request of the voting BOR.

CERTIFICATION MANUAL (CM)

The present document is the Certification Manual (CM), otherwise referred to in the present document as “this Manual”. The CM informs residents, Candidates, sponsoring institutions (SIs), program directors (PDs), resident advisors (RAs), supervising Diplomates (SDs), secondary-specialty supervising Diplomates (SSSDs) and supervising non-Diplomates (SNDs) of the ACVIM’s residency training program (RTP) requirements and of the steps required for certification for all ACVIM specialties. Additional specialty specific requirements may exist and are outlined in the applicable specialty specific Manual(s).

CERTIFICATION PROCESS

The ACVIM certification process includes, but may not be limited to, the Candidate’s registering with the ACVIM, completing an ACVIM-approved RTP, passing the General and Specialty Examinations, paying all associated fees, and meeting all other credentialing requirements of a specialty. Certification and residency training program (RTP) requirements are defined in this Manual and include certain requirements applicable to all Candidates in all ACVIM specialties, as well as requirements specific to each specialty. It is incumbent on each Candidate to be familiar with and fulfill all requirements in this Manual, as well as those of their specific specialty outlined in the applicable specialty specific Manual(s). Supplemental information, policies and procedures essential to the process of certification, such as registration, examination dates, deadlines, standard logs, standard forms, and the like, are provided on the resources for Candidates pages on the ACVIM website. It is critical that Candidates and their mentors monitor the ACVIM website to ensure compliance with published deadlines, current candidacy and residency guidelines and forms.

Candidates, as well as program directors (PDs), resident advisors (RAs), supervising Diplomates (SDs), secondary-specialty supervising Diplomates (SSSDs) and supervising non-Diplomates (SNDs) must all be familiar with both the residency training requirements and details of the certification process, as outlined in this Manual, the specialty specific Manual(s) and supplemented by information on the ACVIM website, to ensure a Candidate’s certification success.

CREDENTIALS COMMITTEE (SPECIALTY CC)

A specialty’s credentials committee (specialty CC) evaluates a Candidate’s progress during the ACVIM certification candidacy period, including completion of RTP requirements, General and Specialty Examination results, and fulfillment of any additional credentials requirements, such as logs and the publication requirement. A specialty’s CC is responsible for certifying that a Candidate meets all the requirements for becoming a Diplomate of the ACVIM in their chosen specialty.
As described in the ACVIM’s bylaws section 1.1, an ACVIM Diplomate experiencing substantial financial hardship or disability may apply to the BOR for a partial or total waiver of membership dues and/or fees, which may be approved at the sole discretion of the BOR.

EMERITUS DIPLOMATE

Emeriti Diplomates, also referred to as retired members, are Diplomates who have either been Diplomates of ACVIM for at least 25 years or have reached the age 65; and have retired from full-time employment in which ACVIM credentials are a requirement for that Diplomate’s employment, excluding income generation resulting from activities associated with the fact that the Emeriti Diplomate possesses ACVIM credentials such as part-time consulting, teaching, writing, or continuing education. Emeriti Diplomates cannot serve as a PD, RA, SD or SSSD (where relevant).

EUROPEAN BOARD OF VETERINARY SPECIALISATION (EBVS)

The European Board of Veterinary Specialisation (EBVS) is the umbrella organization for veterinary specialties within Europe and is registered with the Chamber of Commerce (Kamer van Koophandel) in Utrecht, the Netherlands. The EBVS is composed of one voting representative from each of the 27 EBVS-recognized veterinary specialist colleges, consisting of more than 38 distinct specialties, with more than 4,000 veterinarians active as European veterinary specialists.

EUROPEAN COLLEGE OF BOVINE HEALTH MANAGEMENT (ECBHM)

The European College of Bovine Health Management (ECBHM) advances herd-health-oriented bovine production management in Europe and increases the competency of those who practice in this field of veterinary medicine. ECBHM guidelines and training standards for postgraduate education and experience establish prerequisites for an individual to specialize in bovine health management, to take the examination related to bovine health management, and to receive authentication as a specialist in bovine health management. The ECBHM has received full recognition from the EBVS.

EUROPEAN COLLEGE OF EQUINE INTERNAL MEDICINE (ECEIM)

The European College of Equine Internal Medicine (ECEIM) advances equine internal medicine in Europe and increases the competency of those who practice in this field of veterinary medicine. The ECEIM has received full recognition from the EBVS.

EUROPEAN COLLEGE OF VETERINARY NEUROLOGY (ECVN)

The European College of Veterinary Neurology (ECVN) certifies veterinarians as specialists in veterinary neurology. The organization furthers knowledge related to the pathogenesis, diagnosis, therapy, and control of diseases affecting the nervous system of animals. The ECVN has received full recognition from the EBVS.

EUROPEAN COLLEGE OF VETERINARY INTERNAL MEDICINE–COMPANION ANIMAL (ECVIM-CA)

The European College of Veterinary Internal Medicine – Companion Animal (ECVIM-CA) represents companion animal internal medicine specialists in Europe. The organization’s mission is similar to the ACVIM. It sets standards for residency training and examines Candidates. It certifies individuals post-residency and on completion of all certification requirements. Specialty groups within ECVIM-CA are cardiology, internal medicine, and oncology. The ECVIM-CA has received full recognition from the EBVS.
The European College of Veterinary and Comparative Nutrition (ECVCN) certifies veterinarians as specialists in veterinary and comparative nutrition. The organization’s objective is to advance the quality of animal health care in Europe and worldwide by increasing the competency of those who are active in the field of veterinary nutrition. The ECVCN has received full recognition from the EBVS.

GOOD STANDING

CANDIDATE IN GOOD STANDING

Good standing refers to a Candidate that is enrolled in an ACVIM-approved residency training program (RTP), or has completed an ACVIM-approved RTP, and is registered with the ACVIM, and is making satisfactory progress toward attaining Diplomate status (synonym: Board-certification). If a Candidate leaves an RTP, either temporarily (e.g., a leave of absence) or permanently (e.g., dismissal or permanent withdrawal) before completing the RTP, the PD must notify the ACVIM of that status change within 30 days of the change in status. If a Candidate leaves an RTP, either temporarily (e.g., a leave of absence) or permanently (e.g., dismissal or permanent withdrawal) before completing the RTP, the Candidate is no longer in good standing and is ineligible to take any examination until that individual resumes an ACVIM-approved RTP (either the original or a new program) and the appropriate specialty’s residency training committee (RTC) reinstates the Candidate’s status as an ACVIM Candidate.

DIPLOMATE IN GOOD STANDING

Good standing may occasionally be used to refer to a Diplomate of either an ABVS- or EBVS-registered veterinary specialty and/or registered veterinary specialty organization, who is current on all fees, and for ACVIM Diplomates certified in 2016 and later, continuing to fulfill the requirements for maintenance of credentials (MOC).

MEMBER IN GOOD STANDING

Good standing may occasionally be used to refer to a member of the ACVIM, who is current on all relevant voluntary membership dues.

RESIDENCY TRAINING PROGRAM (RTP) IN GOOD STANDING

Good standing refers to an ACVIM-approved RTP that has submitted all required documents (e.g., authorized agent letter, RTP application and/or annual renewal paperwork, etc.) to document that the RTP has the facilities and personnel required to provide residency training, has provided satisfactory evidence of compliance with ACVIM RTP requirements as stated in this Manual, and has its submissions reviewed and approved by the relevant specialty’s residency training committee (RTC).

Alternative RTP statuses include: 1) probation, and 2) termination. If deficiencies are identified in an RTP, the specialty’s RTC may place the RTP on probation. If the deficiencies are severe and/or not corrected by the RTP within the deadlines set by the RTC, the RTC may recommend termination of the RTP to the BOR. The BOR may terminate any RTP upon the recommendation of the relevant specialty’s RTC. Each RTP will be evaluated annually to determine whether it remains in good standing.
MAINTENANCE OF CREDENTIALS (MOC)

A maintenance of credentials (MOC) program is in effect for all ACVIM Diplomates certified after January 1, 2016, and for any Diplomate certified before January 1, 2016, who volunteered to participate in the MOC program. Every Diplomate who completed credentials and became a Diplomate on or after January 1, 2016, is awarded a Diplomate certificate that is valid for 10 years. By the end of this 10-year period, the Diplomate must have met the criteria established to maintain credentials to remain a Diplomate. If the Diplomate fails to meet the criteria, the certificate becomes inactive, and the Diplomate is no longer recognized as a Diplomate by the ACVIM. The general criteria for maintaining credentials and the specialty-specific criteria for maintaining credentials can be found on the ACVIM website.

NON-TRADITIONAL RESIDENCY TRAINING PROGRAM

A non-traditional RTP is a program that is approved by a specialty's RTC and that is intentionally non-continuous. A non-traditional RTP may be a maximum of 5 years in duration. All specialties stipulate that in a non-traditional residency, all the specialty's requirements for residency training must be met, and that all training must take place within clearly defined, continuous blocks of training time.

OMBUDSPERSON

The ombudsperson is the individual appointed by each specialty president, who is available to Candidates to serve as a liaison during conflicts between a Candidate and either an RTP and/or the ACVIM. The ombudsperson provides a neutral and confidential environment in which to voice concerns. All communications are held in strict confidence. The ombudsperson advises and offers options toward resolution of a problem as the ombudsperson deems appropriate. The scope of the ombudsperson's work excludes matters relating to examinations and/or denial of credentials, which are addressed by the ACVIM Appeals Committee (section 3.F). The ombudsperson cannot offer legal advice, does not actively engage in any arbitration process, and does not impose sanctions on individual Candidates or RTPs. If an ombudsperson is personally involved in a dispute with a Candidate, SI or RTP, the ombudsperson must recuse themselves. In such a case, the ACVIM certification liaison will serve as ombudsperson during that dispute. All specialties have an ombudsperson: Cardiology – LAIM – Neurology – Nutrition – Oncology – SAIM.

PROGRAM DIRECTOR (PD)

A program director (PD) is the individual at the SI who assumes overall responsibility for the conduct and integrity of that institution's RTP(s). The PD for any ACVIM-approved residency training program (RTP) must be an ACVIM Diplomate and member. However, a PD may not necessarily be a Diplomate in the specialty of the RTP, when this exception is specified by the specialty. Moreover, individual ACVIM specialties may stipulate additional prerequisites for PDs. See specialty-specific requirements later in this Manual for further clarification and specifications: Cardiology – LAIM – Neurology – Nutrition – Oncology – SAIM.

RESIDENCY TRAINING COMMITTEE (RTC)

A residency training committee (RTC) specifies the residency training program (RTP) criteria that must be met for an individual to achieve ACVIM Diplomate status (Board-certification). An RTC reviews documentation for all RTPs submitted by sponsoring institutions (SIs) and determines their acceptability. Approvals are reviewed annually. The RTC will assign RTPs one of three designations: 1) approved, 2) probationary, or 3) terminated.
RESIDENCY TRAINING PROGRAM (RTP)

An ACVIM residency training program (RTP) is a combined clinical training and didactic educational experience that is provided to a resident at a sponsoring institution (SI), and one in which a resident must fully engage, as part of the process towards becoming an ACVIM Diplomate (Board-Certified). The PD, RA, SDs, SSSDs, SNDs and residents collectively contribute to a successful RTP.

RESIDENT

An ACVIM resident is an ACVIM Candidate who is enrolled in an ACVIM-approved residency training program (RTP). All residents registered with the ACVIM in approved ACVIM RTPs are also regarded as ACVIM Candidates. However, the terms are not interchangeable. ACVIM candidacy may continue after an RTP is completed, although the Candidate is no longer a resident. Individuals remain Candidates until they become ACVIM Diplomates, exceed the total time allowed to become ACVIM Diplomates, withdraw or are dismissed from an RTP, or voluntarily terminate their candidacy. Individuals are residents only while participating in an ACVIM-approved RTP.

RESIDENT ADVISOR (RA)

The resident advisor (RA) is the individual at the sponsoring institution (SI) who is primarily responsible for overseeing the resident’s progress during the RTP. An RA must be an ACVIM Diplomate and member in the chosen specialty in which the resident is training, unless otherwise specified by the relevant ACVIM specialty. An RA must be actively involved as an SD for assigned residents and be substantially involved in the clinical supervision and didactic education of assigned residents. Moreover, an RA may not perform this role on behalf of multiple SIs. Finally, individual ACVIM specialties may stipulate additional prerequisites for RAs. See specialty-specific requirements later in the specialty manual for each specialty for further clarification.

SECONDARY-SPECIALTY SUPERVISING DIPLOMATE (SSSD)

A secondary-specialty supervising Diplomate (SSSD) is a Board-Certified individual at the SI, or a secondary RTP clinical training site, who is actively contributing to the clinical training and didactic education of the resident in an area of specialty that is not the primary specialty of the RTP. Here “Board-Certified” refers to both Diplomates of both ABVS- or EBVS-registered veterinary specialties and/or registered veterinary specialty organizations. An SSSD must be a Diplomate, and where relevant member, in good standing within that SSSD’s registered veterinary specialty and/or registered veterinary specialty organization. Moreover, individual ACVIM specialties may stipulate additional prerequisites for SDDDs. See specialty-specific requirements later in the specialty manual for each specialty for further clarification.

SPONSORING INSTITUTION (SI)

The sponsoring institution (SI) is the primary veterinary facility, hospital, practice, clinic, or institution that hosts the RTP. Individual ACVIM specialties stipulate additional requirements of SIs. See specialty-specific requirements later in the specialty manual for each specialty for further clarification.

It is best practice for every SI to have human resources policies that address issues of physical and psychological well-being, discrimination, and harassment. These policies should provide adequate pathways for residents to resolve concerns regarding physical and psychological well-being, discrimination, and/or harassment, if and when problems are perceived.
SUPERVISING DIPLOMATE (SD)

The supervising Diplomate (SD) is the individual at the SI, or a secondary RTP clinical training site, who is actively contributing to the clinical training and didactic education of the resident in the area of specialty that is the primary specialty of the RTP. An SD must be an ACVIM Diplomate and member in the chosen specialty in which the resident is training, unless otherwise specified by the relevant ACVIM specialty. Moreover, individual ACVIM specialties may stipulate additional prerequisites for SDs. See specialty-specific requirements later in the specialty manual for each specialty for further clarification.

The SD evaluates the resident or Candidate and provides context and perspectives for those patient/client interactions to ensure safe, timely, and appropriate medical care.

SUPERVISING NON-DIPLOMATE (SND)

A supervising non-Diplomate is an individual at the SI, or a secondary RTP training site, who is actively contributing to the clinical training and didactic education of the resident in the area of specialty that is the primary specialty of the RTP. A SND must hold a PhD or equivalent qualification, as well as expertise deemed applicable to the primary specialty of the RTP. A SND must be in good standing with any relevant professional bodies, actively involved in their area of expertise, maintain competency in the field, and be substantially involved in the training and education of assigned residents. This role is currently specific to the nutrition specialty.

VETERINARY SPECIALTY ORGANIZATIONS COMMITTEE (VSOC)

The Veterinary Specialty Organizations Committee (VSOC) is a committee of the AVMA that serves in an advisory role to the ABVS, and works to advance specialization in veterinary medicine. VSOC helps to establish the standards required to become recognized as a veterinary specialty organization (RVSO) or a registered veterinary specialty (RVS). The voting membership of the committee consists of one representative appointed by each AVMA RVSO, who must be an AVMA member in good standing. Terms are 4 years and can be renewed for successive terms, as determined by each RVSO. Each RVS within an RVSO is permitted to have one nonvoting member attend all VSOC meetings, either in-person or via electronic means. A liaison from the AVMA will attend all VSOC meetings as a non-voting representative.