



**ACVIM CERTIFICATION AND RESIDENCY TRAINING MANUAL**

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**Effective July 1, 2025 – June 30, 2026**

The [ACVIM Certification and Residency Training Manual \(CM\)](#), referred to throughout this document as this Manual, is intended as a resource for residents, Candidates, Sponsoring Institutions (SIs), training sites, Program Directors (PDs), Supervising Diplomates (SDs), Secondary Supervising Diplomates (SSDs), Secondary Supervising non-Diplomates (SSNDs), Residency Advisors (RAs), and other institutional officials and personnel involved in the certification processes of the American College of Veterinary Internal Medicine (synonyms: ACVIM or the College) and ACVIM-accredited Residency Training Programs (RPTs).

This Manual represents the current policies, general procedures, and common requirements and standards for individuals seeking certification by the ACVIM and those involved in ACVIM-accredited RTPs.

Additional policies, procedures, requirements and standards, unique and specific to each ACVIM specialty, exist. These are not detailed in this Manual and should be identified in the relevant specialty-specific manual(s).

Current implementational information, specifying deadline dates, fees, form / document versions, registration procedures, credentials submission, and examination content and procedures, is maintained on the [ACVIM website](#), and not in this Manual. Candidates should regularly check the [ACVIM website](#) for any updates and/or changes to deadlines, fees, form / document versions, registration procedures, credentials submission, examination content and procedures, and other matters that may impact the successful completion of the ACVIM certification process. It is the responsibility of Candidates and mentors to verify and maintain access to the [ACVIM website](#), [Candidate dashboards](#), and all relevant [ACVIM listservs](#). The [ACVIM office](#) does not send out individual notices to Candidates and/or mentors regarding approaching deadline dates, as that information is maintained and kept current on the [ACVIM website](#).

ACVIM policies, procedures, requirements and standards are subject to periodic review and change. If referring to a previously downloaded or printed version of this Manual, the [ACVIM website](#) should be checked for updates.

While a concerted effort has been made to ensure the comprehensive nature and accuracy of this Manual, if there are questions for clarification, feedback or comments, interested parties should contact the ACVIM certification and accreditation staff at the [ACVIM office](#), preferably by email at [certification@acvim.org](mailto:certification@acvim.org), or by mail or phone, as referenced on the following page.

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## 1 ACVIM VISION, MISSION, AND VALUE STATEMENTS

### **ACVIM vision**

Improving the lives of animals and people globally.

### **ACVIM mission**

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

### **ACVIM values**

Inclusion – creating a diverse community where everyone is equal and belongs

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 vision and mission, and upholding our values, the ACVIM advances the knowledge of animal health and diseases, and fosters the continued development of specialty veterinary care, specifically in cardiology, large animal internal medicine (LAIM), neurology, nutrition, oncology, and small animal internal medicine (SAIM).

To achieve these purposes, the ACVIM:

- Certifies Diplomates by guiding and overseeing 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, LAIM, neurology, nutrition, oncology, and SAIM through the ACVIM Forum, the Journal of Veterinary Internal Medicine (JVIM), 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 ACVIM KEY POLICY STATEMENTS

### 2.A STATEMENT OF NON-DISCRIMINATION

The ACVIM adheres to principles of fairness and due process. The ACVIM endorses the principles of equal opportunity. In administering the certification processes and Residency Training Programs (RTPs) of the ACVIM, the organization does not discriminate, nor 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, Diplomates applying for Maintenance of Credentials (MOC), and RTPs, will be evaluated solely on the ACVIM's published and publicly stated criteria.

The ACVIM also endorses and requires adherence to local, state, and federal employment laws, or the international equivalents thereof, including but not limited to Equal Employment Opportunity, Non-Harassment, Workplace Violence Prevention, Family and Medical Leave, Health and Safety, and Workplace Conduct policies. All ACVIM staff, volunteers, residents, Candidates, Sponsoring Institutions (SIs), training sites, Program Directors (PDs), Supervising Diplomates (SDs), Secondary Specialty Supervising Diplomates (SSSDs), Secondary Supervising non-Diplomates (SSNDs), Residency Advisors (RAs), and other institutional officials and personnel involved in the certification processes of the American College of Veterinary Internal Medicine (synonyms: ACVIM or the College) and ACVIM-accredited RTPs must have access to these policies.

### 2.B STATEMENT OF CONFIDENTIALITY

The ACVIM is committed to protecting confidential and/or proprietary information related to Diplomates and Candidates, as well as the development, maintenance and administration of the ACVIM certification and examination processes.

Confidential and proprietary information includes examination development documentation, including job task analysis reports, technical reports, cut score studies, examination forms, examination items and answers, and item banks. 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.

Individual confidential information includes, but is not limited to, an individual's personal information, registration status, and examination score(s). Personal information submitted by Diplomates or Candidates through the certification process, or maintenance of credentials process, is considered confidential. Specifically, examination results are confidential. Examination results will be released only to the individual Candidate, unless a signed release is provided.

The ACVIM will not disclose confidential information regarding the Diplomate or Candidate unless authorized in writing by the individual, or as required by law. If information is released due to a legal matter, the ACVIM will inform the individual.

The ACVIM can disclose / verify that a Diplomate is indeed certified as a Diplomate of the ACVIM in response to an inquiry from an outside party.

## **2.C STATEMENT OF VERIFICATION**

The ACVIM maintains a database of all Diplomates and Candidates, their certification status and membership standing.

Verification of a Diplomate, and their certification status, is possible via the [ACVIM website](#), or by contacting the [ACVIM office](#) in writing or by phone.

The names of ACVIM Diplomates, and their certification status, are not considered confidential, and are published in a directory by the ACVIM for verification purposes. Diplomates may opt-out of inclusion in the directory by contacting the ACVIM in writing. Written verification of certification status may still then be obtained, by an outside party, upon written request to the [ACVIM office](#). Only A Diplomate's name, and their certification status, may be shared by the ACVIM. No other information may be shared without written permission from the Diplomate.

Candidate status, and any other information pertaining to a Candidate, will not be released to those requesting verification.

### **3 GLOSSARY OF IMPORTANT TERMS AND DEFINITIONS**

#### **AMERICAN ASSOCIATION OF VETERINARY CLINICIANS (AAVC)**

The American Association of Veterinary Clinicians (or AAVC) is an association of veterinary clinicians that focuses on teaching and research in Veterinary Sciences.

#### **AMERICAN ASSOCIATION OF VETERINARY MEDICAL COLLEGES (AAVMC)**

The American Association of Veterinary Medical Colleges (AAVMC) represents the global academic veterinary medical community. AAVMC members promote and protect the health and wellbeing of people, animals and the environment by advancing the veterinary medical profession and preparing new generations of veterinarians to meet the evolving needs of a changing world.

#### **ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION (ACGME)**

The Accreditation Council for Graduate Medical Education (ACGME) is an independent, 501(c)(3), not-for-profit organization, that sets and monitors voluntary professional educational standards essential in preparing physicians to deliver safe, high-quality medical care to all Americans. Graduate medical education (GME) refers to the period of education in a particular specialty (residency) or subspecialty (fellowship) following medical school. The ACGME oversees the accreditation of residency and fellowship programs in the United States.

#### **AMERICAN BOARD OF VETERINARY SPECIALTIES (ABVS)**

The American Board of Veterinary Specialties (ABVS) is the organization tasked with 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 each ACVIM specialty is an RVS.

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 American Veterinary Medical Association (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 United States' 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 advocates 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.

## **APPEAL**

The process by which an adverse decision handed down by an ACVIM Board of Regents, Certification Council or committee may be independently reviewed and arbitrated.

## **AUTHORIZED AGENT (AA)**

The authorized agent (AA) is the individual with appropriate administrative responsibility at the SI who must verify that the named PD has the authority needed, and will receive the support necessary, for the RTP to succeed. For example, the AA may be a dean, department head / chief, section head / chief, owner, administrator and/or other delegated institutional official engaged or employed at the SI. Each year, upon renewal of the RTP, the AA must attest to the authority of the PD and provide signed support for the RTP, in the form of a completed AA letter.

## **BOARD-CERTIFICATION**

In the context of this Manual, Board-Certification is the process by which a Diplomate, recognized by an ABVS- or EBVS- registered veterinary specialty and/or registered veterinary specialty organization, became Board-Certified.

## **BOARD-CERTIFIED**

In the context of this Manual, Board-Certified is terminology that refers to a veterinary specialist that is recognized as a Diplomate of an ABVS or EBVS RVS and/or RVSO.

## 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 (SPs), Immediate Past Chair of the BOR, Treasurer, and Members At-Large. Nonvoting members of the BOR include the ACVIM Chief Executive Officer (CEO) and Certification Liaison (CL). 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.

## CANDIDATE

An ACVIM Candidate is a veterinarian who is actively seeking Diplomate status (synonym: ACVIM Board-Certification) from the ACVIM, is registered with the ACVIM as a Candidate, is enrolled in, or has completed, an ACVIM-approved RTP, and is making satisfactory progress toward attaining Diplomate status.

Individuals remain Candidates until one of the following happens:

- The Candidate obtains Diplomate status (Note: the candidacy period may include a period of time between completion of the ACVIM-approved RTP and achieving Diplomate status, as the two are not invariably immediately synonymous).
- The Candidate fails to achieve Diplomate status within the specified allowable candidacy period, as defined in this Manual, or General Information Guide (GIG), specifically applicable to the Candidate.
- The Candidate withdraws from the ACVIM-approved RTP before satisfactory completion of the program.
- The Candidate is excused from the ACVIM-approved RTP before satisfactory completion of the program.
- The Candidate formally indicates, in writing, that they no longer wish to pursue Diplomate status.

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.

Candidates are governed by the policies, procedures and requirements as outlined in the ACVIM CM, or GIG, and relevant specialty-special manual(s), in effect at the commencement of their ACVIM-approved RTP, with the following exceptions:

If an amendment to the CM or a specialty-specific manual eliminates or lessens a certification or RTP requirement or standard, that lessened requirement or standard may be applied to

current Candidates governed by a previous CM or specialty-specific manual; limitations and exceptions to any amendment will be stated at the time of any rule change.

If an amendment to a policy, procedure, requirement or standard is purely procedural and does not impact certification or RTP requirements, such as the date of an examination or the format of an examination, that amendment becomes effective for all Candidates at the time the amendment is implemented, regardless of the start date of a Candidate's RTP; limitations and exceptions to this will be stated at the time of any requirement change.

## **CERTIFICATION**

The process leading to official attestation by the ACVIM of an individual veterinarian's knowledge and skills relative to the provision of high-quality care in a particular specialty, generally following successful completion of one or more examinations and fulfilling criteria as specified.

The ACVIM certification process includes, but may not be limited to, the Candidate 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 RTP policies, procedures, requirements and standards are established in this Manual and the specialty-specific manual(s), and include common requirements shared by Candidates in all ACVIM specialties, as well as the additional requirements and standards specific to each specialty. It is incumbent on the Candidate to be familiar with and fulfill all requirements and standards established in this Manual, as well as those of their specific specialty as established in the applicable specialty specific manual(s). Supplemental implementational information, policies and procedures essential to the process of certification, including but not limited to deadline dates, fees, form / document versions, registration procedures, credentials submission, and examination content and procedures, are provided on the [ACVIM website](#). It is critical that Candidates and their mentors monitor the [ACVIM website](#) to ensure compliance with all candidacy and residency training policies, procedures, requirements and standards, including but not limited to deadline dates, fees, form / document versions, registration procedures, credentials submission procedures, and examination processes.

Candidates, as well as PDs, RAs, SDs, SSSDs and SNDs must all be familiar with the policies, procedures, requirements and standards associated with ACVIM candidacy and the residency training process, as established in this Manual, the specialty specific manual(s) and supplemented by information on the [ACVIM website](#), to ensure the Candidate's certification success.

## **CERTIFICATION COUNCIL (COUNCIL)**

The Certification Council independently governs the certification programs of the ACVIM. The 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 (CL)**

The ACVIM's Certification Liaison is appointed by the BOR and serves as a non-voting member of the BOR and EC and Ex-officio to the Council and Appeals Committee. The CL provides subject matter expertise and professional guidance to ACVIM Diplomates, Candidates and Certification staff in the creation, maintenance, execution and communication of sound certification policy. The CL also performs other tasks as assigned by the CEO, at the request of the EC, and/or at the request of the BOR.

### **CERTIFICATION MANUAL (CM)**

The present document is the ACVIM Certification and Residency Training Manual (CM), previously referred to as simply the Certification Manual, and prior to that the General Information Guide (GIG), and otherwise referred to in the present document as “this Manual”. The CM is intended as a resource for residents, Candidates, SIs training sites, PDs, SDs, SSSDs, SNDs, RAs, and other institutional officials and personnel involved in the certification processes of the ACVIM and ACVIM-accredited RTPs. This Manual represents the current policies, general procedures, and common requirements and standards for individuals seeking certification by the ACVIM and those involved in ACVIM-RTPs. Additional policies, procedures, requirements and standards, unique and specific to each ACVIM specialty, exist. These are not detailed in this Manual and should be identified in the relevant specialty-specific manual(s).

### **CREDENTIALS**

Documentation submitted to a specialty's Credentials Committee (specialty CC) to enable evaluation of a Candidate's clinical and didactic progress throughout the ACVIM certification candidacy period, and to ascertain the Candidate meets all the requirements and standards for becoming a Diplomate of the ACVIM in their chosen specialty.

### **CREDENTIALS COMMITTEE (CC)**

A specialty's Credentials Committee's primary task is to review and determine the status of the Candidates' credentials submissions to determine eligibility for the Specialty Examination.

### **DIPLOMATE**

An ACVIM Diplomate meets all the requirements of Diplomate status as outlined in section 5.1 of the [ACVIM Bylaws](#).

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 PD, 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 policies and procedures as outlined and referenced in the [ACVIM Bylaws](#), 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.

## **EMERITUS DIPLOMATE**

Emeritus Diplomate, also referred to as a retired member, is a Diplomate who has either been a Diplomate of the ACVIM for at least 25 years or has 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 vote or 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 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 specialty 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 VETERINARY AND COMPARATIVE NUTRITION (ECVCN)**

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.

### **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 DIAGNOSTIC IMAGING (ECVDI)**

The European College of Veterinary Diagnostic Imaging (ECVDI) certifies veterinarians as specialists in diagnostic imaging. The objective(s) of the organization are to provide robust guidelines for specialization in veterinary diagnostic imaging, conduct meticulous examinations leading to specialization in veterinary diagnostic imaging, to stimulate an environment of continual learning, and to emphasize research, innovation, and refining methodologies, thus enhancing the proficiency of veterinarians in this specialization. The ECVDI 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.

## **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.

## **GENERAL INFORMATION GUIDE (GIG)**

The present document was previously titled the General Information Guide (GIG), prior to significant reformatting and redevelopment for the 2018-2019 version. Versions of the GIG are still considered relevant and applicable to those residents, Candidates, SIs, PDs, RAs, SDs, SSSDs and SNDs involved in ACVIM-approved RTPs prior to June 30, 2018.

## **GOOD STANDING**

### **CANDIDATE IN GOOD STANDING**

Good standing refers to a Candidate that is enrolled in an ACVIM-approved RTP, or has completed an ACVIM-approved RTP, 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 program, 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 program, 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 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., AA 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 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 Diplomat certified before January 1, 2016, who volunteered to participate in the MOC program. Every Diplomat who completed credentials and became a Diplomat on or after January 1, 2016, is awarded a Diplomat certificate that is valid for 10 years. By the end of this 10-year period, the Diplomat must have met the criteria established to maintain credentials to remain a Diplomat. If the Diplomat fails to meet the criteria, the certificate becomes inactive, and the Diplomat is no longer recognized as a Diplomat by the ACVIM. The general criteria for maintaining credentials and the specialty-specific criteria for maintaining credentials can be found on the ACVIM website.

### **MEMBER**

An ACVIM member is an individual who receives approval for ACVIM membership status designation from the ACVIM office and 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 Diplomat, 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.

## 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

Each ACVIM specialty has an ombudsperson, appointed by the relevant specialty president, who is available to Candidates to provide advice and serve as a liaison during conflicts involving a Candidate, an RTP, and/or the ACVIM, or representative thereof. The ombudsperson provides guidance in resolving concerns, conflicts, or complaints in a confidential and informal manner. These concerns may be regarding a Residency Training Program (RTP) and/or training officer (i.e., PD, RA or SD) or with the ACVIM Board-certification process (i.e., change in status, communications with the Central Office). All communications are held in strict confidence. The role of the ombudsperson is to liaise, advise, and offer options toward resolution of a problem, as the ombudsperson deems appropriate. The ombudsperson cannot offer legal advice, does not actively engage in any formal arbitration process, and does not impose sanctions on individual Candidates or RTPs. The scope of the ombudsperson's role excludes matters relating to examinations and/or denial of credentials, which are addressed by the ACVIM appeals committee. If an ombudsperson is personally involved in a dispute with a Candidate, RTP, the ACVIM, or representative thereof, the ombudsperson must recuse themselves. In such a case, the ACVIM certification liaison or another specialty ombudsperson may serve as ombudsperson during that dispute.

## ONCOLOGIST

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 SD or SSSD in an ACVIM-approved RTP.

## PROGRAM DIRECTOR (PD)

The 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 RTP must be an ACVIM Diplomate and member in good standing. The PD may not necessarily be a Diplomate in the specialty of the RTP, when this exception is specified by the specialty. Moreover, ACVIM specialties may stipulate additional prerequisites for PDs.

## **RESIDENCY TRAINING COMMITTEE (RTC)**

The RTC specifies the RTP criteria that must be met for an individual to be eligible to achieve ACVIM Diplomate status, as then established in the relevant Certification and Residency Training Manual(s). The specialty's RTC is tasked with ensuring compliance with the Residency Training and Certification Manual's and the specialty-specific Manual's policies, procedures, requirements and standards for the specialty's RTPs. The RTC reviews documentation for all RTPs submitted by PDs for 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)**

The ACVIM RTP, otherwise referred to in this Manual as "a/the program", is a combined clinical training and didactic educational experience that is provided to a resident in the context of a SI, and one in which a Candidate must fully engage as part of the ACVIM certification process. Completion of an RTP is an essential step in becoming an ACVIM Diplomate. The SI, PD, RA, SDs, SSSDs, SNDs and residents collectively contribute to a successful RTP.

## **RESIDENT**

The ACVIM resident is an ACVIM Candidate who is enrolled in an ACVIM-approved RTP. All residents registered with the ACVIM and enrolled in ACVIM-approved RTPs are also regarded as ACVIM Candidates. However, the terms are not interchangeable. An individual is a resident only while enrolled in an ACVIM-approved RTP. ACVIM candidacy may continue after an RTP is completed, and after the Candidate is no longer a resident, if the additional requirements of the certification process are yet to be completed. An individual remains a Candidate until they become an ACVIM Diplomate, exceed the total time allowed to become an ACVIM Diplomate, withdraw or are dismissed from an RTP, or voluntarily terminate their candidacy.

## **RESIDENT ADVISOR (RA)**

The RA is the individual at the SI who is primarily responsible for overseeing the resident's progress during the RTP. The RA may not perform this role on behalf of multiple SIs. The RA must be an ACVIM Diplomate and member in good standing, in the chosen specialty in which the resident is training, unless otherwise specified by the relevant ACVIM specialty. The RA must be actively participating in the field of specialty that is the primary specialty of the RTP, maintaining clinical competency in the field, substantially engaged as an SD for assigned residents, and significantly involved in the clinical supervision and didactic education of assigned residents. Individual ACVIM specialties may stipulate additional prerequisites for, and expectations of, the RA.

## **SECONDARY-SPECIALTY SUPERVISING DIPLOMATE (SSSD)**

The 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. The 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. Individual ACVIM specialties may stipulate additional prerequisites for, and expectations of, the SSSD.

## **SPECIALIST**

In the context of this Manual, a veterinary specialist is considered a veterinarian who has completed additional education and training in a specific area of veterinary medicine, satisfied all credentials requirements, has passed examination(s) evaluating their knowledge and skills in that specialty area, as is recognized as a Diplomate by the relevant ABVS or EVBS registered specialty or registered veterinary specialty organization. The ACVIM certifies veterinary specialists in the fields of veterinary cardiology, large animal internal medicine (LAIM), neurology, nutrition, oncology, and small animal internal medicine (SAIM).

## **SPECIALTY**

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

## **SPONSORING INSTITUTION (SI)**

The SI is the primary veterinary facility, hospital, practice, clinic, or institution that hosts the RTP.

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

Individual ACVIM specialties stipulate additional requirements of SIs. See specialty-specific manual(s) for each specialty for further clarification.

## **SUPERVISING DIPLOMATE (SD)**

The 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 field of specialty that is the primary specialty of the RTP. The SD must be an ACVIM Diplomate and member in

good standing of the chosen ACVIM specialty in which the resident is training, unless otherwise specified by the relevant ACVIM specialty. The SD must be actively participating in the field of specialty that is the primary specialty of the RTP, maintaining clinical competency in the field, and substantially involved in the clinical supervision and didactic education of assigned residents. Individual ACVIM specialties may stipulate additional prerequisites for, and expectations of, the SD(s).

### **SUPERVISING NON-DIPLOMATE (SND)**

The SND is the 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. The SND must hold a PhD or equivalent qualification, as well as expertise deemed applicable to the primary specialty of the RTP. The 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 specialty of nutrition.

### **VETERINARY SPECIALTY ORGANIZATIONS COMMITTEE (VSOC)**

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 RVSO or a 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.

## 4 COMMON CERTIFICATION AND RTP REQUIREMENTS FOR ALL SPECIALTIES

### 4.A ACHIEVING DIPLOMATE STATUS (SYNONYM: BOARD-CERTIFICATION)

An ACVIM Diplomate is a highly educated veterinary professional, who has undertaken supplementary veterinary education and training, beyond that of successfully graduating from a veterinary school or college, completed a rigorous residency training program, fulfilled additional credentialing requirements, passed exacting examinations, and is certified by the ACVIM as a veterinary specialist.

Common steps fulfilled by an individual in becoming an ACVIM Diplomate:

- Have a Doctor of Veterinary Medicine or its equivalent and be legally eligible to practice veterinary medicine in some state, province, territory or possession of the United States, Canada, or other country.
- Satisfactorily complete a one-year rotating internship in veterinary medicine and surgery or have acquired equivalent broad-based veterinary 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 and ethical behavior, and uphold the vision, mission and values of the ACVIM.

### 4.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:

<i>When:</i>	Within 90 days of beginning the RTP
<i>What:</i>	Online registration form and registration fee
<i>Reviewed:</i>	ACVIM office
<i>Response :</i>	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:* ACVIM office
- Response:* 30 days

Credentials for all specialties as a prerequisite 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:* Specialty CC
- Response:* 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:* ACVIM office
- Response:* 30 days

Appeals for rejection of credentials and/or examination results 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:* ACVIM Certification Appeals Committee
- Response:* ACVIM Certification Liaison, within 30 days of appeals deadline

## **4.C RESIDENCY TRAINING PROGRAM (RTP) EXPERIENCE**

An ACVIM-approved RTP is the foundation for the education and clinical training of 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. It requires committed enterprise, intellectual acumen, clinical prowess, professional discernment and personal discipline on the resident's part to master their chosen specialty.

The education and training of veterinary specialists is both experiential and didactic. It necessarily occurs within the context of an SI, with mentorship provided by the PDs, RA, SDs, SSSDs, SNDs, and other institutional officials and personnel.

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### ***4.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 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. A non-traditional RTP is a maximum of 5 years in duration.

Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for specialty-specific stipulations.

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

The maximum time allowed for completion of the ACVIM certification process is 7-8 years from the start date of the Candidate's RTP under typical circumstances; 7 years for those Candidates undertaking a 2-year RTP and 8 years for those undertaking a 3-year RTP. The maximum time allowed for completion of the ACVIM certification process is up to 10 years from the start date of the Candidate's RTP for those Candidates undertaking a non-traditional RTP. Specifically, the maximum time allowed for completion of the ACVIM certification process is 5 years from the completion date of the Candidate's RTP (i.e., the date on the Candidate's residency certificate of completion), with the RTP itself being 2-3

years under typical circumstances, and a maximum of 5 years for a non-traditional RTP. For those RTPs that do not provide dated and undersigned residency training program completion certificates, the RTP must provide the Candidate and ACVIM a letter attesting to successful completion of all components of the RTP and stipulating the date of completion of the RTP.

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#### **4.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 certified. Information pertaining to registration as an ACVIM Candidate is posted on the [ACVIM website](#). Responsibility for registration is ultimately incumbent on the resident, with support and guidance to be provided by the RTP's PD, RA, and other institutional officials and personnel.

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 certification and residency training 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 4.C.4](#)) also will not count toward completion of the Candidate's ACVIM RTP training time and 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 and standards, 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 the Candidate to regularly check the [ACVIM website](#).

If a Candidate wishes to become certified in more than 1 specialty simultaneously, the Candidate must indicate that multiple registration forms are being submitted and must pay a separate Candidate registration fee for each specialty. The Candidate must satisfy the requirements and stands for certification established by each specialty. Each candidacy and RTP component completed may count toward the requirements and standards of only 1 specialty.

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. Once again, the Candidate must satisfy the requirements and standards for certification established by both specialties. Each candidacy and RTP component completed may count toward the requirements and standards of only 1 specialty.

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 ACVIM-approved 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 will rule on the relevance of any RTP training requirements that the Candidate has already completed as it pertains to the certification process for the new specialty. Once again, the Candidate must satisfy the requirements and stands for certification established by 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 ACVIM-approved RTP, submit a relocation request to and receive approval from the applicable CC and RTC. 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.

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#### *4.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 if that resident is to be accepted as an ACVIM Candidate. 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 renewal 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 and are 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 4.C.3 of this Manual.

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#### *4.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.

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#### ***4.C.6 RESIDENCY TRAINING PROGRAM (RTP) TERMINATION***

The BOR may terminate a RTP upon the recommendation of the relevant specialty's RTC. Upon termination, the 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 a 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.

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#### ***4.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.

##### ***4.C.7.a PRIMARY EDUCATION AND TRAINING SITE***

The SI is the organization or entity that assumes ultimate responsibility for a residency training program, consistent with the ACVIM Sponsoring Institution (SI)

requirements. The primary educational and clinical training site for the RTP is most often considered the SI.

#### ***4.C.7.b SECONDARY SUPERVISION / TRAINING SITE(S)***

A secondary site is any organization or entity other than the SI that provides an educational and/or clinical training experience for residents. Examples might include a satellite clinic or hospital or educational provider 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 site, i.e., a site not the SI, the plan for such secondary site clinical training experiences, along with supporting letters from the relevant SD, SSSD or SND, would ideally be included by the PD in the RTP's initial application, and/or annual application for renewal, but this is not absolutely required. However, a proposal for the clinical training 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 commencement of the training experience at the secondary site. PDs should allow enough time from submission of the proposal to allow for approval by the relevant specialty RTC.

Moreover, if the resident completes any clinical training portion of the RTP at a secondary site, i.e., a site not the SI, the resident must obtain written confirmation documentation that the training experience took place, undersigned by the SD(s), SSSD(s) or SND(s), to be maintained as part of the resident's essential documentation and included with the credentials packet.

If the resident is to complete any on-site educational experience at, or via, a secondary site, i.e., a site not the SI, the plan for such educational experiences, along with supporting letters from the relevant SD, SSSD or SND, where relevant, would ideally be included by the PD in the RTP application, and/or annual renewal, but this is not absolutely required. However, a proposal for the educational experience, along with supporting letters from the SD, SSSD or SND, where relevant, must be submitted by the PD, and approval obtained from the relevant specialty RTC before the commencement of the educational experience at the secondary site. PDs should allow enough time from submission of the proposal to allow for approval by the relevant specialty RTC.

#### ***4.C.7.c REMOTE SUPERVISION, REMOTE EDUCATION AND REMOTE TRAINING***

As described below, remote supervision (4.C.8.c) and remote educational and/or training experiences (4.C.8.d) involve the use of wireless/wired network communication technology, such as the Internet, television, telephone, or other communication media, to facilitate some level of resident supervision, education and/or training. Online rounds, journal clubs, seminars and conferences are those RTP requirements 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 supervision and remote education and/or training experiences, may be further elaborated by each individual specialty. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further elaboration of this both remote supervision and remote educational and/or training experiences.

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### ***4.C.8 SUPERVISION OF RESIDENTS***

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

#### ***4.C.8.a DIRECT SUPERVISION***

Direct supervision is defined by the ACVIM as training circumstances wherein the SD(s), SSSD(s) or SND(s) and resident are physically present together, with interactive and concurrent management of cases. The SD(s), SSSD(s) or SND(s) is expected to be physically present and immediately available to the resident, throughout the day, for face-to-face reciprocal case management discussion, advice, direction, and assistance, as required/ requested by the resident and indicated by their level of training.

Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further elaboration of this definition.

#### ***4.C.8.b INDIRECT SUPERVISION***

Indirect supervision is defined by the ACVIM as training circumstances wherein the SD(s), SSSD(s) or SND(s) and resident, are not physically present together, and are not interactively and concurrently managing cases (E.g., "chief" weeks). The SD(s),

SSSD(s) or SND(s) must be on-site and immediately available (E.g., telephone, text, email, Zoom, MS Teams, Skype, etc.) for reciprocal case discussion, advice, and direction, as well as immediately available for direct supervision (4.C.8.a), as required and/or requested by the resident. Indirect supervision does mandate a level of daily case management oversight by the SD(s), SSSD(s) or SND(s).

Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further elaboration of this definition.

#### ***4.C.8.c REMOTE SUPERVISION***

Remote supervision is defined by the ACVIM as the use of specific wireless/wired network communication technologies, namely tele- or video-conferencing platforms (E.g., telephone, Zoom, MS Teams, Skype, etc.), to facilitate some level of interactive resident education and/or training. The key component of remote supervision, as defined by the ACVIM, is that it involves live active reciprocal dialogue between the supervisor(s) and resident. Remote supervision is best suited to rounds, journal clubs and select 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, and not immediately available for direct supervision.

The utilization and availability of such technologies, and the application of remote supervision, is further elaborated by each individual specialty. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further elaboration of this definition.

#### ***4.C.8.d REMOTE EDUCATIONAL EXPERIENCES***

In contrast to the ACVIM's definition of remote supervision, remote educational experiences are defined by the ACVIM as those provided via the use of wireless/wired network communication technology, internet, television, telephone, or other communication media, to fulfill some requirements of resident education. Remote educational experiences, as defined by the ACVIM, might include on-line classes, seminars and conferences, where there is minimal to no interaction. The type and extent of remote educational experiences must be defined in the RTP application and/or annual renewal.

The utilization and availability of such technologies, and the application of remote educational experiences, is further elaborated by each individual specialty. Please refer to the specialty-specific manual(s), available on the ACVIM website, for further elaboration of this definition.

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#### ***4.C.9 CLINICAL TRAINING WEEKS***

The ACVIM defines 1 week of education or clinical training as a minimum of 40 hours accrued during a contiguous 7-day period, typically a calendar work week (i.e., Monday through Sunday).

A resident cannot claim more than 1 week of clinical training in any contiguous 7-day period, typically a calendar work week (i.e., Monday through Sunday).

Please refer to the specialty-specific manual(s) available on the ACVIM website for further elaboration of this definition of the 40-hour week, and an explanation of any exception(s) to the contiguous day stipulation.

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#### ***4.C.10 CLINICAL TRAINING HOURS***

The ACVIM acknowledges that specific residency training educational and clinical experiences are, or may be, better suited to being completed through training hours, rather than in training weeks. The ACVIM defines 1 training hour as 1 continuous hour (i.e., 60 minutes) of contact time with a SD(s), SSSD(s) or SND(s), undertaking the specified educational or training activity.

Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for specialty-specific requirements and clarification of the application of training hours.

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#### ***4.C.11 CLINICAL TRAINING MINUTES***

The ACVIM acknowledges that specific residency training educational and clinical 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 of contact time with an SD, SSSD or SND, undertaking the specified educational or training activity, will total 1 training hour.

Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for specialty-specific requirements and clarification of the application of training minutes.

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#### ***4.C.12 RESEARCH AND CREATIVE SCHOLARLY ACTIVITY***

Scientific discovery is critical to the mission of the ACVIM. In recognition of this, all ACVIM RTPs must include an assessable period of instruction and/or participation in research and creative scholarship that fosters an appreciation of, competency in, and contribution to the knowledge base of the Candidate's respective specialty. This instruction and/or participation in research and creative scholarship is intended to support the development of Candidates as clinician-scientists. Demonstration of research and

creative scholarly activity is an essential certification requirement of all ACVIM specialties, which the Candidate must fulfill before Diplomate status is granted.

Individual specialties may stipulate specific requirements for research and scholarly activity. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

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#### ***4.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-approved 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 resident, 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 documentation from the RTP if there are questions during a RTP's annual review.

Individual specialties may stipulate specific requirements for journal club. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

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#### ***4.C.14 DIDACTIC EDUCATIONAL EXPERIENCES***

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

Individual specialties may stipulate specific requirements for didactic educational experiences. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

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#### ***4.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 the 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 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.

Individual specialties describe differing clinical milestones. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

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#### *4.C.16 STUDY TIME*

A period of protected and uninterrupted study time, during which the resident is relieved of all clinical training responsibilities, where practicable and reasonable, including the responsibility for client communications, must be allocated to the resident to prepare for the ACVIM General Examination. Study time should be scheduled to immediately precede the General Examination date as much as is practical. During study time, residents should still attend journal club and didactic learning opportunities as they arise.

A further additional period of protected and uninterrupted study time, during which the resident is relieved of all clinic responsibilities, where practicable and reasonable, including the responsibility for client communications, must be allocated to the resident to prepare for the ACVIM Specialty Examination. Study time should be scheduled to immediately precede the Specialty Examination date as much as it is practical. During study time, residents should still attend journal club and didactic learning opportunities as they arise.

Study time allocated for ACVIM General Examination and Specialty Examination preparation should not overlap with the required weeks of intensive clinical training in the primary discipline, nor additional weeks of intensive clinical training in other ACVIM and non-ACVIM veterinary specialties, nor should it overlap with time allocated to research and scholarly activity, nor required attendance and participation at a state, regional, national, or international veterinary or human medical continuing education conference, nor vacation time.

Individual specialties may stipulate differing minimum allowances for study time. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

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#### 4.C.17 UNSUPERVISED TIME, VACATION AND PERSONAL LEAVE

##### 4.C.17.a UNSUPERVISED TIME

Unsupervised time may contribute to the ACVIM RTP. Allowable unsupervised time and activities might include attendance and participation at a state, regional, national, or international veterinary or human medical continuing education conference in addition to the stipulated requirement(s) of the individual specialty, or independent study in addition to the minimum stipulated requirements of the individual specialty, or vacation time in addition to the minimum stipulated expectations of the individual specialty, and/or personal leave.

Maximum allowable unsupervised time (weeks) and activities that may count towards ACVIM RTP duration will be stipulated by the individual specialty, where relevant. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

##### 4.C.17.b VACATION TIME

The resident should take vacation during the RTP that is separate and independent from other RTP requirements and activities.

A minimum of 2 weeks' vacation per year of the RTP is suggested by the ACVIM.

The ACVIM, however, does not establish minimum allowances for vacation time, recognizing that leave policies and procedures will vary between SIs and training sites. Employers must abide by workplace laws and requirements defined on both a federal and state level.

Additionally, individual specialties may stipulate differing minimum allowances for vacation time. Vacation time may count towards unsupervised time, as stipulated by the individual specialty. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

##### 4.C.17.c PERSONAL LEAVE

An ACVIM RTP is expected to provide reasonable and practicable accommodation for the resident's medical and personal needs (e.g., healthcare appointments, medical leave, carer's leave, jury duty, etc.).

The ACVIM does not establish minimum or maximum allowances for personal leave, recognizing that leave policies and procedures will vary between SIs and training sites, across US states, and countries.

Having said that, RTPs and training site(s) must comply with all applicable employment policies required by the SI's / RTP's local, state, and federal employment laws, or the international equivalents thereof, including but not limited to Equal Employment Opportunity, Non-Harassment, Workplace Violence Prevention, Family and Medical Leave, Health and Safety, and Workplace Conduct policies. All residents must have access to these policies.

The ACVIM does stipulate that, for extended personal leave, typically leave exceeding 5 weeks, which impacts the resident's ability to satisfy the common and specialty-specific RTP requirements and standards, as well as any additional RTP requirements as described in the RTP's approval / annual re-approval documentation in place at the time the resident commenced the RTP, the relevant specialty RTC must be petitioned by the PD for an individual variance, and written approval must be granted. The petition should adequately explicate the reason(s) necessitating the leave, anticipated duration of leave, and plan to fulfill any omitted RTP requirements. Documentation of the RTC's approval of the individual variance must be maintained by the resident as part of their essential documentation and submitted with the credentials packet.

RTP requirements omitted as a result of extended personal leave, must be fulfilled upon recommencing the RTP. All common / core and specialty-specific RTP requirements and standards, as well as any additional RTP requirements as described in the RTP's approval / annual re-approval documentation in place at the time the resident commenced the RTP, must still be met.

Upon returning from extended personal leave, the resident must recommence the RTP full-time. The residency must be completed in training blocks of a minimum of 2 weeks and cumulating in no less than 20 weeks per year of the RTP with each year (12 months dating from the day of RTP recommencement).

When an extended personal leave is necessary and approved by the relevant specialty RTC, the resident then has a revised maximum of 5 years from the start date of the RTP to complete the RTP requirements, and a maximum of 5 years from the end of the RTP to achieve board-certification.

Additionally, individual specialties may stipulate differing cumulative leave allowances, criteria, policies and procedures around personal leave. Personal leave may count towards unsupervised time, as stipulated by the individual specialty. Please refer to the specialty-specific manual(s), available on the [ACVIM website](#), for further detail.

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#### **4.C.18 RTP INTERRUPTION**

As described above, in some circumstances, a resident may need to take an extended personal leave from the RTP. Please refer to section [4.C.17.c](#) of this Manual for the ACVIM's policies, procedures, requirements and standards around personal leave.

Furthermore, RTP interruptions may be unavoidable in circumstances where a resident must switch from one RTP to another to fulfill all RTP, credentials and certification requirements and standards. In such cases, the following steps must be taken:

- A new RTP must be identified.
- The relevant specialty RTC must approve the new RTP before clinical training commences.
- The resident must re-register with the ACVIM in the new RTP.
- The resident must complete training in continuous blocks of time once training resumes.

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#### **4.C.19 RTP VARIANCES**

The RTP that is approved for the SI at the time the resident commences RTP training is that which must be fulfilled by the resident, in order to obtain a residency certification of completion, for approval of credentials, and for board-certification.

Substantial variances to individual RTPs may be approved at the discretion of the relevant specialty's RTC, for a spectrum of potential reasons, including but not limited to medical, personal, change in staffing. Written petition for a variance addressed to the relevant specialty RTC will require a description of the scope of the variance and adequate explanation. Written approval must be granted, and documentation relating to approved variances must be submitted with the Candidate's credentials packet.

Under exception circumstances, the ACVIM BOR and Certification Council may consider and approve variances applicable to aspect(s) of all contemporaneous ACVIM RTPs (E.g., COVID).

### **4.D ROLES AND RESPONSIBILITIES**

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#### **4.D.1 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 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.
- Make available all necessary professional, technical, and clerical personnel to best support the RTP.
- Ensure that the human resources policies and systems established to support both physical and psychological well-being of the resident are maintained and upheld.
- Provide residents ready access to appropriate reference materials, including those required textbooks and journals specifically listed in the examination preparation documents for the specialty, in either print and/or electronic format.
- Provide ready access to 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 journals that the specialty stipulates.
- Possess a medical records system that allows the resident to maintain a medical record for each patient under the resident's care, archived, searchable and retrievable.
- Ensure access to clinical pathology services, including hematology, clinical chemistry, microbiology and cytology diagnostic capabilities, and ensure that all clinical pathology reports are archived, searchable and retrievable.
- Ensure access to anatomic pathology services, and ensure that all anatomic pathology reports are archived, searchable and retrievable.
- Ensure the availability of all necessary equipment for specialty-appropriate comprehensive imaging and diagnostic studies. 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.
- Facilitate and ensure attendance of residents, supervisors and appropriate mentors at journal club and didactic educational

opportunities as required by the specialty. The RA or PD must be able to provide documentation of these teaching events upon request of the RTC and/or specialty CC.

- Facilitate and ensure completion and approval 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.

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#### *4.D.2 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 promotes resident professional advancement, as well as psychological, emotional, and physical well-being.

To this end, the PD's responsibilities include, but are not limited to, the following:

- 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 begins 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.

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#### *4.D.3 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 include, but are not limited to, the following:

- 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.

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#### *4.D.4 RESPONSIBILITIES OF THE 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 include, but are not limited to, the following:

- 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.

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#### *4.D.5 RESPONSIBILITIES OF THE 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 include, but are not limited to, the following:

- Provide appropriate mentoring in that supporting discipline as required by the specialty.
- Contribute to a fair, respectful, and courteous atmosphere within the RTP.

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#### *4.D.6 RESPONSIBILITIES OF THE SUPERVISING NON-DIPLOMATE (SND)*

The SND must contribute to ensuring a healthy and safe learning and working environment that promotes the resident's education, clinical training and professional advancement, as well as psychological, emotional, and physical well-being.

To this end, the SND's specific responsibilities include, but are not limited to, the following:

- 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 specialty.
- Support and attend resident journal club meetings.
- Contribute to a fair, respectful, and courteous atmosphere within the RTP.

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#### **4.D.7 RESPONSIBILITIES OF THE RESIDENT**

The resident must contribute to ensuring a healthy and safe learning and working environment, reasonably participate in and contribute to their own education, clinical training and professional development, as well as endeavor to maintain their own psychological, emotional, and physical well-being.

To this end, the resident's specific responsibilities include, but are not limited to, the following:

- Register as an ACVIM Candidate within 90 days of commencing their RTP.
- Reasonably participate in and contribute to their own education, clinical training and professional development.
- Reasonably undertake activities to maintain psychological, emotional, and physical well-being.
- Provide competent and compassionate veterinary care.
- Be responsive to patient and/or client and/or colleague needs.
- Communicate effectively and honestly with clients, colleagues, all members of the supporting veterinary medical and administration staff, referring veterinarians, and the general public.
- Respect the privacy interests of owners and patients.
- Maintain timely and accurate medical records.
- Progress satisfactorily in the RTP as defined by the RTP.
- Comply with the RTP schedule provided by the RA, including primary clinic duties, emergency duties, research and creative scholarly activity, educational activities, study time, and vacation.
- Participate in activities contributing to research and creative scholarship.
- Participate in educational activities, such as journal club, rounds, seminars, and conference.
- Contribute to a fair, respectful, and courteous atmosphere within the RTP.
- Invariably demonstrate the highest professional and ethical behavior, adhering to the [ACVIM's Code of Conduct](#), and upholding the vision, mission and values of the ACVIM. Residents that fail to maintain ethical standards of conduct will be subject to disciplinary actions as described in section [4.D.3](#) and section [4.E.1](#) of this Manual, and in the "[Academic](#)

[Misconduct Statement](#)” located on the Candidate pages of the [ACVIM website](#).

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#### **4.D.8 RESPONSIBILITIES OF THE CANDIDATE**

- Read this Manual, and any applicable specialty-specific manual(s), and understand the policies, procedures, and requirements and standards for individuals seeking certification by the ACVIM, which must be met prior to the granting of Diplomate status (board-certification).
- Reasonably work towards fulfilling the requirements of the ACVIM certification process in the specialty in which they wish to become board-certified.
- Reasonably participate in and contribute to their own education, clinical training, and professional development, as well as psychological, emotional, and physical well-being.
- Maintain a record of all communication(s) with the ACVIM, receipts and essential documentation.
- Remain informed of up-to-date implementational information, including, but not limited to, deadline dates, fees, and forms.
- Invariably demonstrate the highest professional and ethical behavior, adhering to the [ACVIM's Code of Conduct](#), and upholding the vision, mission and values of the ACVIM. Candidates that fail to maintain ethical standards of conduct will be subject to disciplinary actions as described in section 4.D.3 and section 4.E.1 of this Manual, and in the [“Academic Misconduct Statement”](#) located on the Candidate pages of the [ACVIM website](#).

### **4.E CREDENTIALS**

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#### **4.E.1 CREDENTIALS ELIGIBILITY, REQUIREMENTS AND SUBMISSION**

Candidates must submit a credentials packet, meeting the relevant specialty’s criteria for conditional approval, and pay the associated fee, to the ACVIM office by the deadline date, before the Candidate becomes eligible to register for and sit their respective Specialty Examination(s). **Failure to submit credentials will render a Candidate ineligible to register for and sit their respective Specialty Examination.**

The relevant specialty CC reviews, approves, conditionally approves, or rejects, the Candidate’s credentials packet. Approval, or conditional approval, is required before the Candidate may register for and sit their respective Specialty Examination(s).

Each specialty has established credentials requirements and standards, some or all of which must be satisfied before the Candidate may register to take their respective Specialty Examination(s), and all of which must be satisfied before a Candidate can attain ACVIM Diplomate status.

Candidates can access each specialty's credentials eligibility and submission policies, procedures, requirements and standards on the [ACVIM website](#). Candidates should always check the ACVIM website for the most up-to-date information regarding credentials eligibility, policies, procedures, requirements, standards and submission.

Deadline dates for credentials packet submission, and/or the credentials fee, may vary between specialties. Deadline dates can be found on the [ACVIM website](#), and within the credentials materials to be submitted. **There are no exceptions to the deadline date.** Credentials packets must be submitted by the deadline date to allow adequate time for review by the relevant specialty CC.

It is each Candidate's responsibility to review and comply with all requirements and standards for credentials packet eligibility and submission.

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#### **4.E.2 CREDENTIALS FEES**

Separate fees are associated with; 1) Candidate registration, 2) the ACVIM General Examination, 3) specialty credentials submission, and 4) the ACVIM Specialty Examination(s).

Candidates must pay a fee associated with credentials packet submission.

Candidates whose credentials were not previously approved, and who are resubmitting credentials, do not pay an additional credentials fee associated with the resubmission.

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.

**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.**

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### 4.E.3 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:
- Misrepresenting any portion of their credentials.
- Having behaved unethically in any other way during the credentialing process.

The following disciplinary action may be taken regarding the Candidate:

- Rejection of credentials.
- Forfeiture of fees.
- Denial of permission to retake the Specialty 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.

## 4.F GENERAL AND SPECIALTY EXAMINATIONS

**\*\*\*Always check the Candidate examination webpage(s) on the ACVIM website for the most up-to-date information pertaining to ACVIM General and Specialty 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 process with best practice and industry standards. Any changes will be reflected in the current examination blueprint and/or information provided to Candidates. \*\*\***

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### 4.F.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.

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#### 4.F.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 special accommodation application form, available on the Candidate pages of the [ACVIM website](#) or by request from the [ACVIM office](#), and return the completed form, via email, to [Certification@acvim.org](mailto:Certification@acvim.org), by the relevant examination registration deadline.

The ACVIM cannot guarantee the availability of accommodation(s) if a Candidate fails to request the accommodation(s) by the relevant examination 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.

Special accommodation(s) will not be granted retroactively. Therefore, if a Candidate informs the ACVIM of impairment or disability, and/or the need for special accommodation(s), after an examination has commenced, no changes can be made to that Candidate’s examination experience, nor results, nor to how that Candidate’s examination is graded relative to other Candidates.

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#### **4.F.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 at the time of taking the examinations.

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.

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-specific manual(s) 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-specific 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](#).

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#### **4.F.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.

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#### *4.F.5 THE ACVIM GENERAL EXAMINATION*

**\*\*\*Always check the Candidate examination 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. 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 retake 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.

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#### **4.F.6 ACVIM SPECIALTY EXAMINATIONS**

**\*\*\*Always check the Candidate examination 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 an ACVIM 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.

Candidates retaking the Specialty Examination, or a portion thereof, are not required to resubmit credentials, but must pay a fee to retake the Specialty Examination.

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.

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.

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#### **4.F.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. It is not based on the curve of the Candidates' performance. The 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.

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#### ***4.F.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.

#### **4.G MAINTENANCE OF CREDENTIALS (MOC)**

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

Reinstatement of an ACVIM Diplomat certificate is possible with the individual meeting all the requirements of the specialty's MOC committee. Reinstatement is contingent upon the approval of the 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 additional MOC criteria. Review the relevant specialty specific manual(s) available on the ACVIM website for specialty-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.

## **4.H ACVIM DIPLOMATE CERTIFICATES**

A Candidate becomes an ACVIM Diplomate immediately upon completion and acceptance by the ACVIM of all requirements for Board-Certification established in this Manual and the relevant specialty-specific 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.

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### *4.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 [ACVIM's Code of Conduct](#) and/or [AVMA's Principles of Veterinary Ethics](#).

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### *4.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.

## **4.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 have successfully completed the certification process and been recognized by the ACVIM may claim Diplomate status and/or associate themselves with the ACVIM.

A Candidate who has not completed the certification process and who is not an ACVIM Diplomate may not use partial completion of the certification 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 veterinary specialization, and neither term should be used by any veterinarian. A veterinarian is either a Diplomate of the ACVIM, having met all of the criteria for certification, or a veterinarian has no such qualification.

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).

## **4.J APPEALS**

Candidates, Diplomates and/or PDs / RTPs who have received a negative decision from their specialty's residency training (RTC), credentials (CC), form review (FRC) or maintenance of credentials (MOC) committee may submit an appeal of that decision to the Appeals Committee.

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### **4.J.1 RTP, CREDENTIALS AND EXAMINATION APPEALS**

#### **4.J.1.a APPEALS COMMITTEE**

There is an independent and autonomous appeals committee that is responsible for the review and adjudication of appeals of any certification or RTP related decisions.

The chair of the Certification Council appoints 1 ACVIM Diplomate from each ACVIM specialty to serve as a voting member on the ACVIM Appeals Committee.

The ACVIM Certification Liaison serves as an *ex-officio* member of the committee.

#### **4.J.1.b APPEALS COMMITTEE REMIT**

The Appeals Committee is charged with determining whether the applicable specialty committee and/or the organization followed proper administrative policies, procedures and standards in rendering the certification or RTP-related decision(s).

The Appeals Committee will determine whether the relevant committee's and/or organization's decision was based on established and approved ACVIM standard operating policies and procedures, requirements and standards as established in the applicable Certification Manual (CM) and/or Specialty Manual (SM) or General Information Guide (GIG).

The Appeals Committee decides whether the committee(s) and/or organization acted erroneously by:

- Disregard of established criteria for certification.
- Failure to follow stated ACVIM policies and procedures in reviewing the Candidate's credentials.
- Failing to follow ACVIM policies and procedures established for the registration, preparation, administration and grading of ACVIM General or Specialty Examinations.
- Failing to consider evidence and/or documentation presented by the appellant that would have supported a positive decision by the relevant committee.
- Disregard of established criteria for the initial approval, annual re-approval and evaluation of RTPs.

#### **4.J.1.c CREDENTIALS, EXAMINATION AND RTP APPEALS PROCESS**

The process of filing and adjudicating an appeal with the ACVIM is standardized, regardless of the appellant, i.e., Candidate, Diplomate, PD / RTP.

- Appeals must be submitted via email to the [ACVIM certification and accreditation staff](#) in writing within 30 calendar days of receipt of the certification-related decision being appealed.
- Appeals should consist of a concise letter explicating the reason for the appeal, accompanied by relevant supporting documentation.

- Upon receipt of the letter of appeal, ACVIM Certification and Accreditation staff ensure receipt by the deadline date, notify the appellant of receipt of the appeal, redact the letter and all accompanying documentation, and forward the appeal to the Certification Liaison (CL).
- The CL communicates with the Certification Council (Council), and/or Board of Regents (BOR), the chair of the relevant ACVIM committee(s) and the Appeals Committee, that an appeal has been received, maintaining the anonymity of the appellant(s).
- The ACVIM CL organizes a meeting of the Appeals Committee.
- The chair of the appropriate specialty RTC, CC or FRC and ACVIM staff submit all data relevant to the appeal and, where relevant, a letter summarizing the reasons for the committee's decision to the Appeals Committee as soon as practical so that the Appeals Committee can meet within its deadline.
- The chair of the Appeals Committee calls to order a meeting, organized by the CL, within 30 calendar days of the appeal deadline date, to review the appeal, and render a decision.
- The ACVIM CL notifies the appellant of the Appeal Committee's decision within 30 days of the appeal deadline date.
- The CL notifies the Council, and/or BOR, and the chair of the relevant ACVIM committee(s), of the committee's decision, maintaining the anonymity of the appellant(s).

Decisions of the ACVIM Appeals Committee are final and cannot be appealed within the ACVIM.

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#### *4.J.2 MOC APPEALS PROCESS*

The ACVIM MOCC, comprised of 1 representative from each of the Specialty MOCs, is responsible for reviewing and ruling on any denied MOC point submissions. All other formal appeals related to MOC will go through the ACVIM Appeals Committee, following the steps outlined above.