

American College of Veterinary Sports Medicine and Rehabilitation



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and Rehabilitation

Residency Program Guidelines
July 1, 2014 - June 30, 2015

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RESIDENCY TRAINING PROGRAM GUIDELINES

1. INTRODUCTION

Definition of Veterinary Sports Medicine and Rehabilitation

Sports medicine is defined as the investigation, preservation, and restoration of animal body systems that are affected by athletic, service, work or recreational activity through medicine, surgery, and rehabilitation. Veterinary rehabilitation is designed to facilitate the process of recovery from injury, illness or disease to as normal a condition as possible by reducing pain and restoring function.

Sports medicine and rehabilitation specialists are expected to be proficient in the following areas:

- a. Conditioning, training, and fitness as they relate to athletic performance.
- b. Athletic performance and the impact of nutrition, nutraceuticals, and pharmaceuticals on athletes' short- and long-term health and performance.
- c. Coordination of a team approach to veterinary medical care and rehabilitation of injured animal athletes involving board-certified veterinarians in other specialty areas (e.g. surgery, internal medicine, imaging, and critical care), allied health care professionals (e.g. physical therapists, farriers), owners, and trainers.
- d. Evaluation, diagnosis, management, and rehabilitation of sports medicine-related illnesses and injuries with detailed knowledge of sports-specific injuries and medical problems.
- e. The principles of functional anatomy, biomechanics, exercise physiology and pathology; and the mechanisms of tissue adaptation, aging, injury, healing, and repair.
- f. Integrative treatment options and pain management as they relate to rehabilitation of sports-specific injuries and performance.
- g. Principles and techniques of rehabilitation (e.g. physical medicine, therapeutic exercise, physiotherapeutic modalities) that return an animal to optimal function as quickly and safely as possible, including the geriatric patient.
- h. Knowledge of athletic equipment, assistive devices, orthotics and prosthetics in prevention and management of athletic injuries and disabilities.

A residency training program in sports medicine and rehabilitation is the joint responsibility of the American College of Veterinary Sports Medicine and Rehabilitation (the College) and an active diplomate acting as a representative of the College and as a resident supervisor for the resident. A residency training program also requires the support of other board-certified specialists that act as mentors and who participate in training the resident. A residency training program is an intense, intimate partnership in learning that can only be accomplished with frequent and regular interactions and communication between a resident supervisor and his or her resident.

In addition to completing the core curriculum and other residency training program requirements listed within this document, it is the responsibility of the resident, under the guidance of the active diplomate resident supervisor, to achieve the following goals:

- a. Develop a high level of clinical skills and expertise in the field of veterinary sports medicine and rehabilitation.

- b. Develop a critical understanding and working knowledge of the current veterinary and human literature related to sports medicine and rehabilitation and proficiency in literature review and the synthesis and clinical application of new information.
- c. Develop critical thought processes and the use of a problem-based approach to patient care.
- d. Demonstrate an ability to teach, communicate and effectively present information.
- e. Demonstrate exceptional ethical standards and the ability to act as a professional role model.

Working to achieve these goals supports the spirit of the residency standards and the excellence that is expected of a residency training program.

Applicants will pursue board certification in either canine or equine practice. It is the goal of the College to assure a well-rounded experience for the resident. As the American College of Veterinary Sports Medicine and Rehabilitation represents two different but highly interrelated areas of expertise, each resident will be required to have sufficient clinical exposure to both the sports medicine and rehabilitation aspects of practice. To accomplish this, residents will be encouraged to log time in both canine and equine practices managing both sports medicine and rehabilitation cases. In addition, all residents will be encouraged to log time in human physical therapy practice or with a licensed physical therapist certified in animal rehabilitation.

Residents wishing to pursue board certification in both canine and equine practice should contact the chairperson of the Credentials and Residency Committee to discuss dual-residency training program options and feasibility.

There is no guarantee, expressed or implied that a resident having completed the minimum requirements listed in this document will have completed both the letter and the spirit of their residency training program. Nor is there a guarantee, expressed or implied that the residents will be able to pass the board-certification examinations. It is the responsibility of the resident, under the guidance of their resident supervisor, to recognize their strengths and weaknesses and to expand upon the core curriculum to attain the knowledge, experience, and skills needed to qualify as a Diplomate of the American College of Veterinary Sports Medicine and Rehabilitation.

2. RESIDENCY TRAINING PROGRAM

Residency training programs are the foundation for training of future diplomates in the American College of Veterinary Sports Medicine and Rehabilitation. The components of a residency training program include the following:

- a. Resident
- b. Resident Supervisor
- c. Mentor
- d. Residency Facility
- e. A residency training program that conforms to the requirements listed in this document.
(See checklist-**Appendix 7**)

The resident supervisor is defined as an active diplomate of the College that is in good standing, to be responsible for oversight of the residency training program. The residency training program includes the minimum training requirements established by the College in this document and any additional requirements that the resident supervisor and residency facility may judge to be relevant to include in a specific residency training program.

A mentor is defined as a board-certified diplomate in a specialty recognized by the American Board of Veterinary Specialties (ABVS) or the European Board of Veterinary Specialization (EBVS) and designated by the College for training residents in clinical rotations within their specialty. The resident and mentor must work together in managing clinical cases where the mentor is providing frequent consultation and in-depth case review of those clinical cases.

The standards contained in this document are the minimum requirements for facilities, resident supervisors, mentors, residents and the educational and experience components of the residency training program. However, a residency training program is more than simply logging the requirements that are the letter of this document. It also embodies the spirit within these standards, which is to train highly capable residents rather than just minimally qualified residents. The College expects residency training programs to become cohesive, integrated, stable, ongoing, institutionalized programs that demonstrate the ability to exemplify standards of the American College of Veterinary Sports Medicine and Rehabilitation.

This residency is designed to fulfill the requirements of the American College of Sports Medicine and Rehabilitation and as such concurrent residencies in other specialty colleges are not allowed. Furthermore the requirements of this residency cannot be fulfilled by counting specific areas that were obtained in a previous specialty college residency. The only item that is useable from a previous residency is the peer reviewed manuscript as long as it is directly related to sports medicine or rehabilitation and was accepted within 5 years of credential submission.

Changes to Residency Training Program

The resident supervisor is responsible for immediately reporting any major change in the residency training program to the Credentials and Residency Committee. This includes:

- Loss or change of a resident supervisor
- Termination of a resident
- Any major interruption to the ongoing progress or advancement of a resident within the residency training program

The residency training program may be placed on probationary status, if there is a change in the training program that may cause it to fall below the minimum established standards of the College, the ABVS or EBVS, until the Credentials and Residency Committee can review any proposed remedies.

3. RESIDENCY TRAINING PROGRAM FACILITIES

Sports medicine and rehabilitation immersion time is supervised by active diplomates only and has the highest training requirements for resident participation. The spirit of this requirement is to train residents to the highest standard possible by providing a culture of specialist-level sports medicine and rehabilitation practice. This is to be provided by a residency facility through the sustained presence and significant influence of one or more active diplomates. All College diplomates who are involved in the training of residents at a residency facility are required to act as representatives of the College to ensure these standards are maintained.

A residency facility is expected to participate in the research mission of the College. This may include contributions to the sports medicine and rehabilitation literature, participation in multi-center clinical trials, or other educational projects as recommended or required by the institutional residency committee and the College.

Facilities, Services and Equipment Required for a Veterinary Sports Medicine and Rehabilitation Residency Training Program

- a. **Medical library:** Access to appropriate textbooks and printed or electronic copies of current journals relating to veterinary sports medicine and rehabilitation and its supporting disciplines must be accessible.
- b. **Medical records:** A complete medical record must be maintained for each individual clinical case and records must be retrievable.
- c. **Imaging services:** Appropriate equipment for comprehensive diagnostic imaging and image processing must be available. At a minimum radiographic and ultrasonographic should be available on site with accessibility to advanced imaging techniques such as MRI, CT and Fluoroscopy.
- d. **Surgical facilities:** Operating suite and associated anesthetic and critical care equipment, surgical instrumentation and sterilization equipment must be available.
- e. **Rehabilitation facilities:** Appropriate rehabilitation and physical therapeutic equipment must be available for clinical use.
- f. **Biodiagnostic services:** Access to diagnostic services such as, but not limited to, anatomic pathology, clinical pathology, microbiology, virology, immunology, parasitology and endocrinology must be available. Reports must be retained and retrievable.

Changes To or Within the Residency Training Facility

The resident supervisor is responsible for immediately reporting any major change in the training facility that may cause it to fall below the minimum standards. The Credentials and Residency Committee must be notified as soon as any potential changes are identified. The residency facility may be placed on probationary status, if there is a change in the facility that may cause it to fall below the minimum standards of the College, the ABVS or EBVS, until the changes and the Credentials and Residency Committee can review any proposed remedies.

4. RESIDENT SUPERVISOR

The resident supervisor is defined as the College diplomate embedded in the residency training program. A resident supervisor must be an active diplomate specializing in the same species as the resident (i.e., canine or equine) and must be a member in good standing of the College for the duration of the resident's training. The resident supervisor has a fiduciary responsibility for representing the interests of the College within the residency training program. Supervision is a privilege granted by the College to all diplomates who meet the requirements established by the College and who maintain excellence in training residents.

The resident supervisor is responsible for oversight of all aspects of the residency training program, including design of the program and monitoring the resident's progress in the program. A resident supervisor must be available to the resident and must coordinate all clinical and educational aspects of the residency. The resident supervisor is responsible for ensuring that both the core curriculum (minimum requirements) and the high standards of the residency are accomplished. The resident supervisor is also responsible for reviewing sports medicine and rehabilitation immersion, experience, and skills logs and for reviewing and critiquing progress reports with the resident.

A diplomate may supervise a maximum of three residents at any one time. The resident supervisor must maintain a one-to-one relationship and responsibility for each resident. The limit of three residents per resident supervisor does not include candidates who have completed their residency training programs but have not yet achieved diplomate status and continue working with a resident supervisor until the next examination.

Supervision may be transferred to another active diplomate within the College. A **Change of Resident Supervisor Form (Appendix 1)** must be submitted to the College within 30 days of the change.

A resident supervisor may be involved in the training of any number of residents at any time when acting in the role of mentor. The resident supervisor will be asked to sign an annual report detailing the satisfactory progress for each of their residents. When a resident applies to have their final credentials accepted and to sit for examination, the resident supervisor will be asked to attest that the resident has successfully completed both the letter and the spirit of the residency training program requirements. Residents are trained at will by the resident supervisor and nothing in these guidelines shall prevent a resident supervisor from terminating their supervision of a resident at any time.

The College and the Credentials and Residency Committee reserves the right to establish and monitor standards for resident supervisors and to review and report their performance and success in training residents, to place them on probation, and to withdraw their privileges, if necessary. The College and the Credentials and Residency Committee reserve the right to withdraw resident supervisor privileges from any diplomate who, upon review and request for corrective action, continues to fail to meet these requirements.

5. MENTOR

A mentor must be a board-certified diplomate in a specialty recognized by the ABVS or EBVS and may oversee only clinical rotations within their specialty. When a resident trains with a mentor that is board certified in two or more specialties, they may log a training week in only one of the specialties.

Acting as a mentor for a resident is a privilege granted by the College to Diplomates of the American College of Veterinary Sports Medicine and Rehabilitation and other specialties that meet the requirements of the residency training program guidelines and maintain the standards for training residents. A mentor must be legally authorized (e.g., veterinary medical license and other state or federal requirements) or locally authorized to practice within the residency facility where supervision takes place. A mentor must be approved by and remain in good standing with the College.

During the mentorship period, the resident and mentor work together in clinical practice in which the resident is on duty and managing clinical cases and the mentor is providing frequent consultation and in-depth case review of those clinical cases that can contribute to the progress of the resident's academic and clinical education. The resident must have a significant role in clinical case management as either primary clinician or consultant. The resident must not be restricted to the role of an observer.

A mentor need not personally examine each patient seen by the resident, but must provide frequent consultation and in-depth case review of those clinical cases that contribute to the progress of the resident's academic and clinical education. A mentor may work with any number of residents as long as he or she does not dilute resident oversight and mentoring. It is up to the mentor to ensure that supervision is quality time for each individual resident in training.

It is expected that during the 40 hours of time logged by the resident as a training week the mentor is on site and immediately available to the resident for at least 20 hours of that time.

During periods of mentorship for which the resident is logging immersion time, they may also log experience requirements or skills requirements when appropriate.

Mentors train residents at will, and nothing in these guidelines shall prevent a mentor from terminating their training of a resident at any time. The College and the Credentials and Residency Committee reserves the right to establish and monitor standards for mentors and to review and report their performance and success in training, to place them on probation and to withdraw their privileges if necessary. The College and the Credentials and Residency Committee reserves the right to withdraw mentor privileges from any diplomate who, upon review and request for corrective action, continues to fail to meet these requirements.

6. STEPS TO BECOMING AN ACTIVE DIPLOMATE

Definitions

Residency Applicant – A veterinarian who is in the process of applying for a residency training program until the time he or she is accepted by an active diplomate resident supervisor and receives notification that the residency training program has been reviewed and accepted by the Credentials and Residency Committee.

Resident – An applicant who has been accepted into a residency training program and has been registered with the Credentials and Residency Committee until the time at which he or she has completed all requirements of the residency training program and has received both a certificate of completion from the residency facility and a signed letter from their resident supervisor that they have completed all of the residency training program requirements.

Candidate – A resident who has had their credentials accepted for the board-certification examination, until they have passed the board-certification examination, and have been granted diplomate status by the Board of Directors.

Diplomate – An individual who has completed all requirements, has passed the examination, and has been granted diplomate status by the Board of Directors.

Residency Applicant

A residency applicant must:

- a. Be a graduate of a college of veterinary medicine accredited or approved by the American Veterinary Medical Association (AVMA), or hold a certificate from the Educational Commission for Foreign Veterinary Graduates (ECFVG), or be licensed to practice in some State or Province of the United States, Canada, or other country.
- b. Complete a one-year rotating internship or equivalent practice experience.
- c. Be accepted by a residency training program.
- d. Be accepted by an active diplomate who will serve as a resident supervisor and will direct their residency training program.
- e. Be legally able to practice at the residency facility (e.g., veterinary medical license and other state or federal requirements) and have a veterinary license in good standing with no past record of license revocation.
- f. Review the residency requirements and verify the ability to comply with these requirements.
- g. Register (**Appendix 2** – Resident Registration Form) with the Credentials and Residency Committee within 30 days of program initiation.

An applicant who cannot comply with all requirements must apply to the Credentials and

Residency Committee for exception prior to beginning their residency training program. The Credentials and Residency Committee reserves the rights to review the registration materials, to ask for supporting documentation and to possibly withdraw approval of the residency if all requirements have not been met.

Registration of a New Resident

A residency training program may begin at any time, however the deadline for credentials submission will be August 1 each year. Residency applicants apply to a residency training program at a residency facility, either directly to the facility administrator or through a future resident supervisor. Once the applicant has been accepted, the resident must register with the Credentials and Residency Committee within 30 days of the start of the training program using the **Resident Registration Form (Appendix 2)**.

Within 60 days of the applicant's registration, the Credentials and Residency Committee will acknowledge the start of the residency training program, and will notify the Board of Directors of all newly registered residents.

If a resident supervisor anticipates that the new resident applicant cannot comply fully with the residency training program guidelines, they may apply to the Credentials and Residency Committee for an exception.

Resident

A resident must be legally authorized (e.g., veterinary medical license and other state or federal requirements) or locally authorized (i.e., by the appropriate residency facility) to practice in the facility where supervision takes place. Residents are trained at will by resident supervisors and nothing in these guidelines shall prevent a resident supervisor or mentor from terminating their training of a resident at any time. The College and the Credentials and Residency Committee reserves the right to withdraw resident privileges from any resident who, upon review and request for corrective action, continues to fail to meet these requirements.

Active Status

A resident is considered to be active if he or she is making satisfactory progress toward the completion of the residency training program requirements. To remain active a resident must:

- a. Complete at least 10 training weeks per year (except in the final year when the resident may have fewer than 10 weeks to complete their requirements) and continue to log any outstanding experience or skills requirements until all training weeks and log requirements are completed.
- b. Maintain the most current knowledge requirements.
- c. Maintain the most current experience and skills requirements and complete any incomplete requirements.
- d. Submit and receive approval for biannual reports to the Credentials and Residency Committee.

Inactive Status

A resident is considered to be inactive when, by choice or by action, he or she is not making satisfactory progress toward completion of the residency training program requirements. A resident may be placed on inactive status by action of the Credentials and Residency Committee upon determination that the resident is not continuing to make satisfactory progress toward completion of the residency training program or that the resident is failing to meet

deadlines and other reporting requirements for their residency training program. A resident may also be placed on inactive status by applying to and receiving approval from the Credentials and Residency Committee.

The Credentials and Residency Committee must also approve the resident if they choose to restart their training program. To be reinstated to active status, residents must apply in writing to the Credentials and Residency Committee. The Credentials and Residency Committee will determine what requirements (e.g., skills, experience, etc.) must be fulfilled for reinstatement to active status, depending on the circumstances that caused the resident to be placed on inactive status. The amount of time a resident may be on inactive status is limited by the requirement that the residency must be completed within 6 years of the original program start date.

Term of the Residency Training Program

The residency shall consist of a total of 156 weeks of training over a 3- to 6-year period. A resident must complete all training requirements and submit final credentials for the board-certification examination within five years of successfully completing their residency training program. At the end of that time, the resident must either start over (i.e., receive no credit for the previous residency training) or apply to the Credentials and Residency Committee for an extension of their program. Extensions may be granted at the discretion of the Credentials and Residency Committee. The *Ad hoc* Appeals Committee will review any appeals regarding disallowing extensions to a residency training program.

Applicants, residents, and candidates may not claim any affiliation with the College, in print or in any other format, until they have successfully met all requirements and are board certified by the College. They may only claim affiliation with their residency training facility (i.e. “resident in sports medicine and rehabilitation at ABC institution,” or “residency training program completed at ABC institution”). The term “board eligible” is not to be used.

Training Week

A training week is defined as a minimum of forty hours of logged immersion time that occur in no less than three calendar days of one continuous seven day period (i.e., a calendar week). The start day for a resident’s training week will remain the same day of the week as the first day of their residency.

7. CORE CURRICULUM

The core curriculum is the foundation of the training requirements that the College mandates for the residency training program. The core curriculum is established and revised from time to time by the Examination Committee. The core curriculum represents the *minimum* requirements to be achieved for each of the training components.

Knowledge Requirements

Knowledge requirements include a list of required reference materials that comprise a body of information that the resident must learn with retention and comprehension. The Examination Committee establishes the required reading list annually.

All residents are accountable for having a working knowledge of the material within the most current reading list of required articles and references. Residency training facilities must provide, on site, the required reference materials specified by the Examination Committee. Residency training facilities are also required to provide computer access to common veterinary and human medical databases.

Immersion Requirements (156 weeks)

The immersion requirement is one of time to be immersed in a clinical culture. Immersion is logged as blocks of training weeks under supervision by an active diplomate of the College, mentoring by a diplomate of another specialty, or independent study. All of the requirements listed under this section must be recorded and submitted to the Credentials and Residency Committee. Activities related to all requirements must be logged by the resident in an electronic master log (available as a downloadable Excel spread sheet).

A. Sports Medicine and Rehabilitation Immersion with College Supervision

This requirement consists of **72 weeks** of immersion in sports medicine and rehabilitation practice that is supervised by an active diplomate of the College. Supervision for sports medicine and rehabilitation immersion must be undertaken as part of an approved residency training program and overseen by an active diplomate of the College, however the resident may spend up to 36 weeks of this immersion under the mentorship of a diplomate of a board-certified diplomate within a specialty designated by the College for training residents. Mentors must be board-certified diplomates in an ABVS or EBVS Recognized Veterinary Specialty Organization (RVSO).

B. Immersion in Specialty Practice with Specialist Mentoring

Mentoring for the specialty practice rotations must be done by a board-certified diplomate within a specialty designated by the College for training residents. Mentors must be board-certified diplomates in a RVSO recognized by the ABVS or EBVS and supervise residents only within their specialty.

This requirement consists of **22 weeks** of immersion in specialty veterinary practice within the following five areas:

i. Diagnostic imaging – 8 weeks (minimum)

With required exposure to radiology, diagnostic ultrasound, nuclear scintigraphy, and MRI and CT modalities.

ii. Surgery – 6 weeks (minimum)

With suggested exposure to regenerative medicine, gait analysis, lameness examinations, and arthroscopy.

iii. Internal medicine – 3 weeks (minimum)

With suggested exposure to nutrition, gastrointestinal disorders, upper and lower respiratory disease, exercise physiology, and cardiology.

iv. Neurology – 3 weeks (minimum)

With suggested exposure to neurologic examinations, diagnostic tools, and post-mortem evaluation.

v. Pain management – 2 weeks (minimum)

With suggested exposure to both acute and chronic pain conditions, pharmaceutical and non-pharmaceutical approaches (e.g., acupuncture, cryotherapy, etc.) and multimodal pain management approaches.

Activities related to special practice requirements must be logged by the resident. When a resident trains with a mentor that is board certified in two or more specialties, they may log a training week in only one of those specialties. During periods of mentoring for which the resident is logging immersion time, they may also log experience requirements or skills requirements, when appropriate.

C. Sports Medicine/Rehabilitation Study or Practice

This requirement consists of **36 weeks** of independent study of topics related to sports medicine and rehabilitation or independent immersion in sports medicine and rehabilitation practice. Independent study or practice is intended to allow development of independent thought, staff mentoring and teaching skills, focused study in specialized facets of sports medicine and rehabilitation, further elective rotations, further supervised or independent rotations in sports medicine and rehabilitation, cross species training or human physical therapist interactions.

The resident supervisor is responsible for designing this requirement to meet the needs of the individual resident and is responsible for ensuring that the resident is receiving adequate training during this time. Continuing education that is intensely focused on a specialized facet of sports medicine and rehabilitation may be logged concurrent with the independent study requirement on an individual basis at the discretion of the Credentials and Residency Committee; however, general continuing education requirements may not be logged concurrently with independent study time.

D. Special Rotations

This requirement consists of **26 weeks** in any or all of the following rotations, with a minimum of one week suggested in any rotation:

- Research or clinical investigation
- Preparation of scientific manuscripts
- National or international level continuing education courses
- Rotation with the alternate species (e.g., an equine resident spending time with a canine rehabilitation practice and vice versa) with the approval of the resident's supervisor
- Special rotation at a human sports medicine or rehabilitation facility
- Special rotation with a human physical therapist trained in veterinary rehabilitation
- Up to two weeks per year of vacation time may be counted toward this requirement.

The resident, along with the support of their resident supervisor, must ensure that all independent study requirements are met and logged within the required term of the residency training program. Residents are expected to make regular progress in completing these requirements. The biannual report should reflect this progress.

Experience Requirements

The experience requirement is for the observation and participation in specific clinical problems, procedures, or cases. Experience is achieved by the resident's direct observation and participation in the experience. The list of required clinical problems, procedures and cases to be experienced and logged for either canine- or equine-related experience requirements is included in the electronic Master Log for each species.

The resident supervisor and the residency facility must provide the clinical caseload for the resident to receive adequate exposure to specific clinical problems, procedures, and cases that can be logged under the experience requirement. The resident must be the primary resident responsible for each logged clinical case (i.e., be responsible for diagnostic and therapeutic decisions) and must log 400 clinical cases during a canine residency and 300 clinical cases during an equine residency. The resident must not be restricted to the role of an observer or consultant. Clinical case logs must include case identification, dates, diagnosis, treatment plan, and follow up.

Specific skills and procedures that the resident must learn represent a higher level of training and are logged under the skills requirement below. However, direct hands-on participation

(rather than simple observation) when meeting the experience requirements is expected whenever possible and is highly encouraged.

Skill Requirements

The skills requirements, a list of skills critical to the practice of canine - or equine-related sports medicine and rehabilitation, are included in the Master Log for each species. Skills are required clinical procedures or other aspects of patient management that must be:

- Taught through discussion and demonstration by a resident supervisor or mentor
- Demonstrated to meet or exceed a minimum level of competency by the resident
- Graded as acceptable by the resident supervisor or mentor
- Logged by the resident with the signature of the resident supervisor or mentor to verify competency

The resident, along with the support of their resident supervisor, must ensure that all experience and skills requirements are met and logged within the duration of the residency training program. Residents are expected to make regular progress in completing these requirements. The biannual report should reflect this progress. If a particular residency training program facility does not have the caseload to meet a certain skills requirement, the resident will have to meet this requirement at another residency training program facility.

Seminar Requirements

The resident must log that the following criteria have been satisfied. The resident must actively participate in medical seminars, literature reviews (i.e., journal clubs), clinical case rounds conferences, and board review sessions on a wide range of topics related to sports medicine and rehabilitation medicine. There should be substantial input into the seminar series by individuals other than the resident. This training experience may be received at a veterinary or human teaching hospital.

This experience must include at least 200 hours of seminars or didactic graduate level courses accrued over the residency. All seminars, rounds and reviews conferences must be clearly documented (i.e., seminar, date, location, topics, and credit hours).

Continuing Education Requirements

The resident must log that the following criteria have been satisfied. The resident must participate in a minimum of **50 hours of continuing education** related to sports medicine or rehabilitation sponsored by local, state, and national veterinary or human medical organizations. These continuing education requirements are differentiated from seminar requirements in that seminars are defined as regularly scheduled, ongoing series in a hospital setting while continuing education is defined as sporadically offered veterinary or human conferences. Monthly local veterinary association meetings would, however, fall into the continuing education requirement if the subject matter were related to sports medicine and rehabilitation. Topics should cover a wide range of issues in sports medicine and rehabilitation. The continuing education requirements can be fulfilled by a one-time enrollment in a comprehensive continuing education program. The intent of the requirement is to ensure that there is a continuum of active participation in formal continuing education. All continuing education must be clearly documented on the seminar and continuing education requirements log (i.e., conference, date, location, topics, and credit hours).

Continuing education that is focused on a specialized facet of sports medicine or rehabilitation (e.g., orthotics and prosthetics) may be logged concurrent with the independent study

requirement on an individual basis and at the discretion of the Credentials and Residency Committee; however, general continuing education requirements may not be logged concurrently with independent study immersion time.

8. PEER-REVIEWED PUBLICATION

The resident will be required to be first author on at least one peer-reviewed, hypothesis-driven publication on the subject of veterinary sports medicine or rehabilitation. The publication must be accepted before credentials submission and must not be more than five years old at the time of credentials submission.

The manuscript must follow a scientific approach, containing:

- A. an introductory statement which summarizes the reason for the study,
- B. a clearly stated hypothesis or objective,
- C. an appropriate description of techniques used to satisfy the hypothesis or objective,
- D. a report of the results appropriate to the study,
- E. a discussion which interprets the results and their relation to the original hypothesis or objective, and
- F. a conclusion which summarizes the importance of the study.

Items A-F above need not be set apart under separate headers (i.e., Introduction, Materials and Methods, etc.) within the manuscript; some journals do not have such headers. However, these items must be clearly identifiable by the reviewers to constitute an acceptable publication.

A manuscript is considered accepted when the author receives a letter of unconditional acceptance from the journal editor. A copy of the accepted version of the manuscript (including the title page with author information and all images, tables and figures) or, if in print, a copy of the published manuscript showing the date of publication must be included in the credentials submission.

An e-mailed letter of acceptance from the editor of any journal can be submitted in lieu of a hard copy letter from the journal, provided that the following conditions are met:

- a. The e-mail must contain the date of acceptance within the body of the message (not simply within the header).
- b. The e-mail must indicate the name of the manuscript.
- c. The e-mail must show all routing information within the message header.

The material within the publication must not have been published previously other than in an abstract or proceedings format. Clinical studies that fulfill the above criteria are acceptable to meet this publication requirement. The publication must be written in or fully translated to the English language. Non peer-reviewed publications such as book chapters, proceedings, review articles and clinical case reports are not acceptable material to meet this publication requirement.

9. PROGRESS REPORTS

All residents and candidates are required to notify the College Secretary and the Credentials and Residency Committee whenever a change in contact information (e.g., address, telephone number, e-mail address, etc.) occurs during or after their training program, up to the time that the resident achieves board certification.

There are two progress reports due each year. The first is the Semi-annual report which is due February 1. The primary report is the Annual Report and is due on August 1.

Semi-annual Progress Report (due February 1)

All residents must submit a Semi-annual Progress Report. The Credentials and Residency Committee will evaluate the Semi-annual Progress Report and recommendations and requirements will be forwarded to the resident and their resident supervisor.

The Semi-annual Progress Report must use the format provided by the Credentials and Residency Committee and must include the following items:

- a. A completed progress report.
- b. The resident supervisor and all mentors must sign attesting to satisfactory completion of individual immersion training weeks, experience, and skills requirements in order for credit to be granted.
- c. The resident and the resident supervisor are responsible for ensuring that the report is complete.

Annual Progress Report (due August 1)

All residents must file an Annual Progress Report. The report must include the resident's Master Log and progress report. The Credentials and Residency Committee will evaluate the Annual Progress Report and recommendations and requirements will be forwarded to the resident and their resident supervisor.

The Annual Progress Report must use the format provided by the Credentials and Residency Committee and must include the following items:

- d. A completed progress report.
- e. The resident supervisor and all mentors must sign attesting to satisfactory completion of individual immersion training weeks, experience, and skills requirements in order for credit to be granted.
- f. The resident and the resident supervisor are responsible for ensuring that the report is complete.
- g. The electronic Master Log.

Credit may not be automatically granted for completed requirements. The Credentials and Residency Committee will review the quality and appropriateness of the submitted documents and their contents. Incomplete annual progress reports will not be reviewed and will be returned to the resident for resubmission at the next submission date. No credit will be granted for that reporting period.

One complete electronic copy of the annual progress report, including signatures, must be submitted to the Credentials and Residency Committee. The deadline for report submission is August 1st. All forms must be submitted by the deadline date. Late submissions will not be evaluated until the next submission date and the resident may be deemed inactive during that period. The College requires that the resident obtain and keep with their records written proof of electronic submission.

Residents will continue to submit both Semi-annual and Annual reports until they complete the required 156 training weeks. At this time they will submit their Credentials which are due on or before August 1st each year.

10. CREDENTIALS SUBMISSION (due on or before August 1st)

Eligibility

All residents must submit credentials to the Credentials and Residency Committee for review and approval for qualification to take the board-certification examination. All residents and candidates submitting credentials for examination must have completed their residency training program and be current on all training requirements as detailed in the residency training program guidelines that were in place at the start of their residency.

The resident must have published or have received final acceptance for publication of one first-authored, hypothesis-driven manuscript in a peer-reviewed journal. The topic of the article should be relevant to sports medicine or rehabilitation. If a resident or candidate is in doubt about the suitability of an article or journal, they should contact the chair of the Credentials and Residency Committee for a ruling at least 90 days prior to the deadline for receipt of the residency credentials application.

Credentials Submission

The candidate must include the following items in their residency credentials submission materials

- a. A completed and signed **Residency Credentials Submission Form (Appendix 5)**
- b. A credentials submission fee paid via the College website (<http://www.vsmr.org>).
- c. A copy of your Residency Training Program Master Log documenting successful completion of 72 weeks of sports medicine and rehabilitation, 22 weeks of specialty practice, 36 weeks of independent study, and 26 weeks of individual rotations. Documentation of management of 400 canine or 300 equine clinical cases and completion of all required clinical experiences and skills. Reporting of 250 hours of seminar and continuing education requirements.
- d. One original peer-reviewed, hypothesis-driven publication in the field of sports medicine or rehabilitation for which the applicant is first author. If the manuscript is not yet in print, then a letter indicating unconditional acceptance of the manuscript by the journal editor needs to be included together with an electronic copy of the manuscript. (Filename: Manuscript.pdf).
- e. One letter of recommendation from an active diplomate of the American College of Veterinary Sports Medicine and Rehabilitation who served as a resident supervisor or mentor for the applicant during their Residency Training Program that states a successful completion of the residency training program and the date of completion. The resident supervisor or mentor is required to verify the applicant's expertise and time commitment to clinical cases involving canine or equine sports medicine and rehabilitation.
- f. Two letters of recommendation from active diplomates of ABVS-recognized colleges who have sufficient experience working with the applicant to verify the applicant's expertise and time commitment to clinical cases involving canine or equine sports medicine and rehabilitation.

The completed Residency Credentials Submissions form, including signatures and the required fee, must be received by the College Secretary on or before August 1st of the year prior to that in which the resident plans to take the board-certification examination. All credentialing materials must be submitted electronically (in pdf format) to the College Secretary. Late, incomplete, or incorrectly formatted credentials submissions will not be reviewed and the resident will need to resubmit their credentials the following year. Credential submission fees

will not be refunded if the resident or candidate is determined not to be eligible or qualified to take the board-certification examination.

The Board of Directors upon recommendation by the Credentials and Residency Committee makes eligibility rulings. Candidates will be notified of the approval status to take the board-certification examination within 60 days after the deadline for credentials submission. The College requires that the candidate obtain and keep with their records written proof of electronic submission for use if any questions arise regarding credentials submission documents or dates.

Formal Appeal Procedures in Case of an Adverse Decision

In case of an adverse decision by the Credentials and Residency committee relative to denial of credentials, an appeals process has been established. An affected party desiring to appeal the adverse decision must adhere to the following procedures.

Grounds for Reconsideration or Review

The affected party may petition for reconsideration or review of the College's decision on the grounds that the College had ruled erroneously by:

- Failing to consider relevant evidence or documentation presented.
- Disregarding the established College criteria for achieving board certification.
- Failing to follow procedures as stated in the Policies and Procedures document.

An appeal relating to the candidate's credentials must be filed within thirty (30) days of the date on which the adverse decision was announced to the candidate. In the event of an adverse decision by the College relative to credentials, the College shall advise the affected person of the procedures for appealing the adverse decision. The appeal will be reviewed by an Ad hoc Appeals Committee and their recommendation forwarded to the Board of Directors.

Members of the Credentials and Residency Committees will be recused from serving on the Ad hoc Appeals Committee when the appeal is related to credentialing. The candidate will be informed of the decision at least forty-five (45) days prior to the examination date.

Petition for Reconsideration

The following six (6) steps outline the process for an affected party needs to follow to address an adverse decision by the College relative to denial of credentials:

1. An affected party may, at his or her option, petition the College to reconsider its decision by filing with the College a written petition for reconsideration which shall include a statement of the grounds for reconsideration and documentation, if any, in support of the petition.
2. Such a petition must be received by the Secretary/Treasurer within thirty (30) days of the date on which the College announced its adverse decision.
3. The affected party may, at the discretion of the College, be invited to appear at the next regular meeting or an ad hoc meeting of the Board of Directors.
4. The Board of Directors will appoint an Ad hoc Appeals Committee to review appeals, consisting of three diplomates. The Ad hoc Appeals Committee will elect a Chair. An appointed member to the Ad hoc Appeals Committee may not be a member of the Board of Directors. If an appointed committee member should have a conflict of interest, then the President will appoint a replacement. Appointed members may not be a member of the initial committee that made the decision leading to the current appeal.

5. The Chair of the Ad hoc Appeals Committee will call a meeting to review an appeal and consider whether due process has been followed within thirty (30) days of notification of the appeal. The Chair will notify the Board of Directors of the results of the review and the final decision will be e-mailed to the affected person(s) not more than thirty (30) days after the decision has been made.
6. Upon the completion of Steps 1 through 5 above, if the affected party is not satisfied with the final decision, he or she may request assistance with mediation through the American Board of Veterinary Specialties (ABVS).

11. COLLEGE AFFILIATION

Active Status

To remain on active status, all candidates must maintain and complete the most current requirements for knowledge, experience and skills. Candidates may not claim affiliation with the College, in print or in any other format, until they are board certified in the College. They may only claim affiliation with their residency facility, i.e. "Residency training program completed at ABC institution". The term "College or Board eligible" is not to be used.

12. LIST OF IMPORTANT TIMELINES AND DATES

Candidate

- Applicants must register with the Credentials and Residency Committee within 30 days after the start of their residency training program by submitting a **Resident Registration Form (Appendix 2)**.
- All residency training programs end on July 31st of a specified year.
- A resident must complete all training requirements and submit final credentials for the board-certification examination within six years of starting their residency training program.

Annual and Semi-annual Progress Reports for Residency Training Programs and Residents

- A completed semi-annual progress report form signed by the resident and the resident supervisor, documenting training weeks and other requirements completed by the resident, must be submitted by February 1st of each year.
- A completed annual progress report form signed by the resident and the resident supervisor, documenting training weeks and other requirements completed by the resident, as well as the resident's clinical case log must be submitted by August 1st of each year.
- All resident supervisors must sign attesting to satisfactory completion of individual training weeks, experience, and skills requirements for credit to be granted. The resident is responsible for ensuring that the semi-annual and annual progress reports are completed and submitted on time.

Credentials

- The Credentials and Residency Committee must receive the resident's credentials, detailing completion of all training requirements on or before August 1st of the year prior to that of the planned board-certification examination. When the deadline falls on a Saturday or Sunday, completed applications must arrive at the ACVSMR office no later than the following Monday. The Residency Credentials Submission Form and its required supporting documents are also due at this time.

Examination

- Notification of eligibility to sit the examination will be received at least 120 days prior to the exam date.

Credentials and Residency Committee

- Within 60 days of the applicant's registration, the Credentials and Residency Committee will acknowledge the start of the new residency, ask for further information, or refuse to approve the applicant as a new resident.

13. APPENDICES

A. Change of Resident Supervisor

Appendix 1. Change of Resident Supervisor Form

B. Registration

Appendix 2. Resident Registration Form

C. Reporting Forms for Residency Training Programs

Appendix 3. Semi - Annual resident progress report

Appendix 4. Annual resident progress report

Appendix 5. Residency Credentials Submission Form

Appendix 6C. Canine MasterLog

Appendix 6E. Equine MasterLog

D. Residency Program Checklist

Appendix 7. Program Checklist

Note: Canine MasterLog **and** Equine MasterLog may also be downloaded from the college website's residents' page.

Change of Resident Supervisor Form

This form must be submitted to the ACVSMR office within 30 days of the date that a change of Resident Supervisor becomes effective. The Resident Supervisor should give a copy of this completed form to the resident, which should be retained by the resident.

To be completed by the Resident Supervisor:

I have read the current ACVSMR Residency Program Guidelines as adopted by the American College of Veterinary Sports Medicine and Rehabilitation. I understand my role and agree to perform and oversee the training, resident logs, and evaluation of the resident, including ensuring that the resident not only meets the minimum requirements as outlined in the Guidelines, but also meets the criteria for acceptance into the College: has a satisfactory moral and ethical standing in the veterinary profession and a commitment to the constitutional objectives of the ACVSMR. I understand that it is my responsibility to ensure, to the best of my ability, that the information presented by the resident in the web based Resident Training Log documentation system is complete and accurate.

Effective _____ (mm/dd/yyyy), I have begun supervising _____
(Resident's name) at _____ (institution/practice).

Diplomate: _____

Signature: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Resident (print): _____

Address: _____

Phone: _____ Email: _____

Previous Resident Advisor (Print Name): _____

Date change becomes effective: _____

American College of Veterinary Sports Medicine and Rehabilitation RESIDENT REGISTRATION FORM

This form must be submitted by the resident to the American College of Veterinary Sports Medicine and Rehabilitation office within 30 days after the start of the program. The resident should give a copy of the form to their Resident Supervisor

Candidate's name/title(s): _____

I hereby register my residency with the American College of Veterinary Sports Medicine and Rehabilitation in accordance with its rules and guidelines, as published in the college's Constitution and Bylaws and Residency Guidelines.

I have read the current *Residency Program Guidelines* as adopted by the American College of Veterinary Sports Medicine and Rehabilitation. I understand that any false information that I provide or other evidence of fraud on my part will adversely affect my residency training and/or acceptance of my Credentials Application and may be reason for termination of my residency program and/or permanent disqualification of my application.

I further covenant and agree:

- (i) to indemnify and hold harmless the American College of Veterinary Sports Medicine and Rehabilitation and each and all of its members, regents, officers, examiners and agents from and against any liability whatsoever in respect of any act or omission in connection with this registration, applications, credentials, examinations, the grades on such examinations and/or the granting or issuance of or failure to grant or issue a certificate to me, and
- (ii) that any certificate, which may be granted and issued to me shall be and remain the property of the American College of Veterinary Sports Medicine and Rehabilitation.

This form should be **typed** in order to be processed in the college office. You are encouraged to register immediately; however, **registrations must be received by the college secretary within 30 days of beginning your residency program. Failure to register, or registration after the 30-day deadline, may jeopardize your certification process, as some of your training program may not be recognized or accepted.**

1. Candidate's name: _____
Last Name First Name Middle Name (or initial)

2. Your mailing address, telephone number, fax number and e-mail address:

Department

Hospital/University

Address

City, State/Province, Zip, COUNTRY

Work Phone Work Fax

E-mail

3. American College of Veterinary Sports Medicine and Rehabilitation Residency location and dates:

Hospital/University

Address

City, State/Province, Zip, COUNTRY

From: _____
Starting date (month/date/year)

To: _____
Anticipated ending date (month/date/year)

4. Indicate the Specialty in which you wish to become Board-certified:

Canine Sports Medicine and Rehabilitation

Equine Sports Medicine and Rehabilitation

10. Name and contact information of your American College of Veterinary Sports Medicine and Rehabilitation Resident Supervisor for your residency training:

Name of Resident Supervisor

Department

Hospital/University

Address

City, State/Province, Zip, COUNTRY

Work Phone

Work Fax

E-mail

Resident Supervisor's Verification:

I hereby certify that I am personally supervising the clinical training program of the above applicant and that this training program meets the standards established by the American College of Veterinary Sports Medicine and Rehabilitation.

Signature of Resident Supervisor

Date (Month/Date/Year)

Mail this completed and signed Registration Form (three pages) to:

**American College of Veterinary Sports Medicine and Rehabilitation Secretary
P.O. Box F
Fort Collins, CO 80522**

RETAIN A COPY OF THIS REGISTRATION FORM FOR YOUR RECORDS.

You should receive a letter from the college within 8 weeks acknowledging receipt of your registration and your acceptance into the American College of Veterinary Sports Medicine and Rehabilitation candidate program. If you wish to receive confirmation that your registration has arrived (prior to the 8 weeks), it is your responsibility to provide for confirmation (eg, return receipt, overnight service, etc.) Please be sure to keep all receipts for guaranteed delivery in the event your package does not arrive as scheduled. The American College of Veterinary Sports Medicine and Rehabilitation is not responsible for late, lost or misdirected mail, and we will not accept materials after the deadline for any reason without proof of guaranteed delivery.

****Please note, any candidate that significantly changes or alters their residency training program before completion must notify the college, in writing, before the changes are made to ensure that the proposed changes are approved. Significant changes could include, but are not limited to, transferring from one program to another, alterations in program duration, switching to a 'dual board' program, or enrolling in an institutional graduate program, etc.****

Questions?

E-mail: info@vsmr.org

Website: www.vsmr.org

American College of Veterinary Sports Medicine and Rehabilitation

Resident Training Progress Evaluation Form

Please meet with your residency supervisor to complete this progress evaluation form. This evaluation is due every February 1st during the duration of your residency training program. All contained information will be held in strict confidence.

The resident supervisor is responsible for oversight of all aspects of the residency training program, including design of the program and monitoring the resident's progress in the program. A resident supervisor must be available to the resident and must coordinate all clinical and educational aspects of the residency. The resident supervisor is responsible for ensuring that both the core curriculum (minimum requirements) and the high standards of the residency are accomplished. The resident supervisor is also responsible for reviewing sports medicine and rehabilitation immersion, experience, and skills logs and for reviewing and critiquing progress reports with the resident.

A. PERSONNEL INFORMATION

Date:

Resident's Contact Information

Name:	
Practice or University:	
Address:	
City, State, Zip:	
Country:	
Phone:	
E-mail:	

Current year of residency training:	<input type="checkbox"/> 1 st year	<input type="checkbox"/> 2 nd year	<input type="checkbox"/> 3 rd year	<input type="checkbox"/> Other:
Projected Date of Training Program Completion:				

Resident Supervisor (Diplomate; Oversees resident's daily activities) Contact Information

Name:	
Practice or University:	
Address:	
City, State, Zip:	
Country:	
Phone:	
E-mail:	

Program Supervisor (ACVSMR Diplomate; Oversees Residency Program) Contact Information

Name:	
Practice or University:	
Address:	

City, State, Zip:	
Country:	
Phone:	
E-mail:	

Instructions: Mark the box at the appropriate level of resident progression or accomplishment in their training program for each of the listed items below.

1. Program Requirements

	Unacceptable	Needs Improvement	Average	Above Average	Excellent	N/A
Clinic schedule						
Participation in rounds or journal club						
Progress in resident project						
Progress towards publications						

Comments:

--

2. Knowledge Base

	Unacceptable	Needs Improvement	Average	Above Average	Excellent	N/A
Basic science knowledge						
General knowledge of specialty						
Awareness of current literature						
Clinical knowledge of specialty						
Feedback from other departments						
Feedback from external rotations						

Comments:

--

3. Clinical Abilities

	Unacceptable	Needs Improvement	Average	Above Average	Excellent	N/A
History taking						
Physical examination skills						
Patient assessment						
Formulating differential diagnoses						
Identifying relevant rehabilitation issues						
Development of treatment plans						
Patient care and compassion						
Attention to detail						
Patient follow up						
Technical skills						
Procedural competence						

Comments:

--

4. Clerical and Managerial Skills

	Unacceptable	Needs Improvement	Average	Above Average	Excellent	N/A
Support of hospital procedures and policies						
Completeness of medical records						
Responding to correspondence or contacts						
Availability						
Meets deadlines						

Comments:

--

5. Interpersonal skills

	Unacceptable	Needs Improvement	Average	Above Average	Excellent	N/A
Attitude and communication with in-house veterinarians						
Attitude and communication with RDVMs						
Attitude, communication and ability to relate to clients						
Attitude and communication with staff						
Attitude, communication and interaction with other departments						
Ability to handle emergencies or stressful situations						
Professional behavior and appearance						
Leadership qualities						
Recognizes limitations						
Willingness to ask for help						
Self confidence						
Teamwork						
Receptive to feedback						
Ability to multitask						

Comments:

--

6. Positive aspects of resident's performance, including improvements since last evaluation (if applicable).

7. Comments or suggestions for improvement in the resident's performance or progress towards completion of their training program.

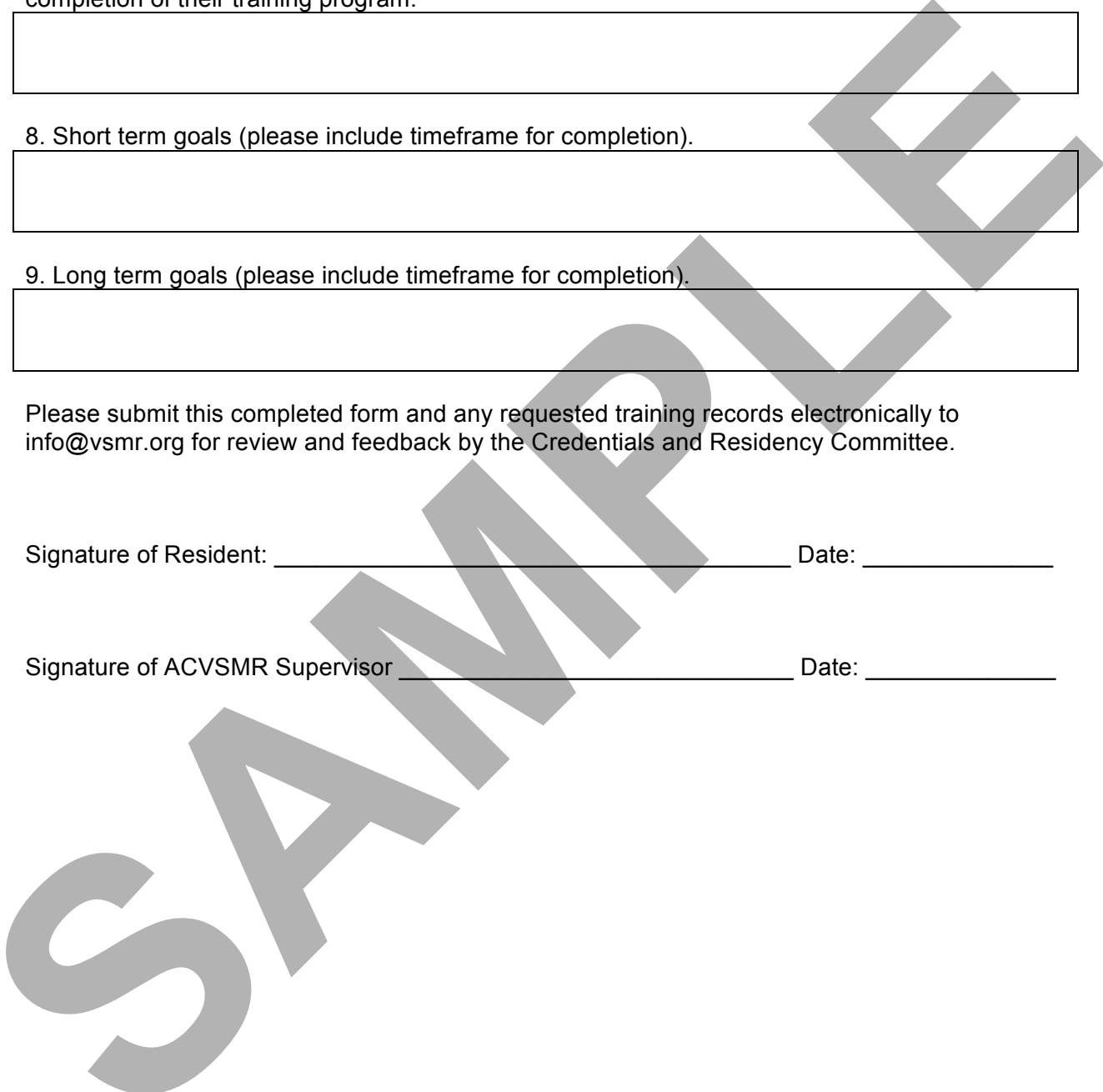
8. Short term goals (please include timeframe for completion).

9. Long term goals (please include timeframe for completion).

Please submit this completed form and any requested training records electronically to info@vsmr.org for review and feedback by the Credentials and Residency Committee.

Signature of Resident: _____ Date: _____

Signature of ACVSMR Supervisor _____ Date: _____



ANNUAL PROGRESS REPORT FOR RESIDENTS ENROLLED IN AMERICAN COLLEGE OF VETERINARY SPORTS MEDICINE AND REHABILITATION PROGRAMS

Instructions and Check list for annual progress reports due by August 1:

To all American College of Veterinary Sports Medicine and Rehabilitation Supervisors and their Residents:

The following serves as a reminder that *all* residents in Veterinary Sports Medicine and Rehabilitation training programs are required to submit annual reports to the Credentials and Residency Committee (CRC) in accordance with the current Guidelines. Progress reports are due by August 1st each year and should include the entire previous year of training. ***All residents must follow the instructions detailed below***, which are based on the Residency Guidelines (2014 version) and must utilize the format provided in the Progress Report Forms which are attached with this reminder. **Reports must be typed and must be complete or they will not be reviewed.**

The following are recommended to ensure a successful annual report review:

- Include a signed and dated Progress Report Certification Statement. Please ensure that your Resident Supervisor certifies your report.
- Ensure that all rotation mentors have signed the mentor signature page of the MasterLog. If more than one individual acted as mentor for any particular week, all names and signatures must be provided.
- Check that your final tabulations match the number of immersion weeks and seminar/continuing education hours submitted.
- All weeks should be listed in the order that they were performed.
- Immersion requirements:** Specify each weekly rotation as either: Sports Medicine/Rehabilitation Immersion with American College of Veterinary Sports Medicine and Rehabilitation supervision, Immersion in Specialty Practice with Specialist Mentoring, Independent Study or Practice, or Individualized Rotations or Vacation. Credit can only be granted for one category for any given week. The total number of reported weeks will be 52. See the college residency guidelines for more information.
- Seminars Requirements:** List all seminars by date, subject, speaker or moderator, location, format, and hours attended, and include an annual seminar schedule with your submission. Please note that clinical student, 'cage-side' or other informal rounds do not meet these requirements and nor do non-sports medicine/rehabilitation topics.
- Continuing Education Requirements:** List all CE lectures attended individually by date, meeting, location, subject/title, speaker, and hours attended. Please note that non-sports medicine/rehabilitation topics do not meet these requirements.
- Publication Requirements:** List all any publications submitted and their status (in review or accepted, published) and include citation information.
- If you have fulfilled a requirement, and received verification in a previous annual report letter, you may indicate this in the area provided.

- Example: Publication Requirement: Requirement fulfilled per CRC 11/1/12.
- If you are resubmitting material from prior reporting periods for credit not previously granted, please ensure that this is clearly stated in a cover letter and include specific details such as dates, location, etc. on the forms provided. Ensure that you also include a copy of the letter from the CRC that pertains to the credits in question. Remember that the CRC may not have access to materials previously submitted.
- Please include a copy of the most recent letter from the CRC that pertains to your residency (the last progress report letter received).
- Please submit only the Progress Report Forms; do not include the instruction pages with your submission.
- **Please give yourself and your Mentor enough time to review your progress report and make any necessary corrections prior to submission.**

The progress report (including signatures) should be submitted as a single word or pdf document and submitted by email to the CRC at info@ysmr.org. Please do not submit multiple individual files on your electronic copy. The due date is 12 pm August 1, each year. Late submissions will not be reviewed.

Please don't hesitate to contact the Credentials and Residency Committee with any questions or concerns:

AMERICAN COLLEGE OF VETERINARY SPORTS MEDICINE AND REHABILITATION RESIDENCY ANNUAL TRAINING PROGRAM PROGRESS REPORT CERTIFICATION STATEMENT

This form must be completed and submitted to the Credentials and Residency Committee along with the completed progress report forms.

I hereby attest that I have satisfactorily completed all of the requirements for the stated reporting period, according to the training program approved by the Credentials and Residency Committee. All information contained within this report is accurate, complete, and truthful.

Resident Name

Reporting Period

Resident Signature

Date (month/day/year)

Resident Supervisor Certification

I hereby attest that the above resident has satisfactorily completed all of his/her requirements for the reporting period, according to the training program approved by the Credentials and Residency Committee. I have reviewed and approved the resident's progress report, including Mentor signatures and documentation of immersion, seminar, and continuing education requirements. I have also reviewed and approved any required procedures performed checklists and any necessary case logs.

Resident Supervisor Name

Resident Supervisor Signature

Date (month/day/year)

**Residency Credentials Submission Form
2015 Board Certification Examination**



American College of
Veterinary Sports Medicine
and Rehabilitation

An electronic copy of this credentials submission form and all supporting documents (in pdf format) plus the non-refundable credentials submission fee (\$350.00USD) must be received by the Secretary no later than **August 1, 2014**. Application materials received after this date will not be accepted for the January 2015 board-certification examination. All application materials will become the property of the American College of Veterinary Sports Medicine and Rehabilitation.

The preferred method of payment is via PayPal on our website (<http://www.vsmr.org>). Alternatively, a check drawn on a U.S. bank or money order will also be accepted if sent via mail to ACVSMR, P.O. Box F, Fort Collins, CO 80522.

Upon approval of your credentials, you will be asked to submit an examination application form and the examination fee (\$1000.00USD). The next scheduled examination date is January ____, 2015, and it will be held in Orlando, Florida.

PLEASE TYPE OR PRINT CLEARLY

Today's Date:

Applicant's Contact Information

Name:	
Practice or University:	
Address:	
City, State, Zip:	
Country:	
Phone:	
E-mail:	

Species Track Selection: Please indicate the species track for which you are applying:

- Canine Equine

Veterinary Education and Licensure

Graduate of (Veterinary medical school)	
Degree:	
Year:	
Veterinary medical license (State or Province):	
License number:	

Residency Credentials Submission Checklist

Please submit all of the below documents electronically (in pdf format and with the correct file names) to the College Secretary at secretary@vsmr.org.

- This completed and signed Residency Credentials Submission form (Filename: Application.pdf).
- A credentials submission fee payable via PayPal on the College website (<http://www.vsmr.org>)
- A copy of your Residency Training Program MasterLog documenting successful completion of 72 weeks of sports medicine and rehabilitation, 22 weeks of specialty practice, 36 weeks of independent study, and 26 weeks of individual rotations. Documentation of management of 400 canine or 300 equine clinical cases and completion of all required clinical experiences and skills. Reporting of 250 hours of seminar and continuing education requirements. (Filename: Master Log.xls).
- One original peer-reviewed, hypothesis-driven publication in the field of sports medicine or rehabilitation for which the applicant is first author. If the manuscript is not yet in print, then a letter indicating unconditional acceptance of the manuscript by the journal editor needs to be included together with an electronic copy of the manuscript. (Filename: Manuscript.pdf).
- One letter of recommendation from an active diplomate of the American College of Veterinary Sports Medicine and Rehabilitation who served as a program supervisor or mentor for the applicant during their Residency Training Program and is able to verify the applicant's expertise and time commitment to clinical cases involving canine or equine sports medicine and rehabilitation. This letter of recommendation should be addressed to the "Credentials Committee" and forwarded electronically (in pdf format) to the College Secretary at secretary@vsmr.org.
- Two letters of recommendation from active diplomates of ABVS-recognized colleges who have sufficient experience working with the applicant to verify the applicant's expertise and time commitment to clinical cases involving canine or equine sports medicine and rehabilitation.

You will receive acknowledgement of receipt of your submitted credential materials from the College Secretary within 14 days of submission. You will then be notified by the Credentials and Residency Committee regarding the acceptance of your credential materials for the College board-certification examination at least 120 days prior to the examination.

All candidates are required to sign the following agreement at the time of credentials submission: I hereby apply to the American College of Veterinary Sports Medicine and Rehabilitation for examination in accordance with its rules and herewith enclose the application fee. I also hereby agree that, prior to or subsequent to my sitting the board-certification examination, the Board of Directors may investigate my standing as a veterinarian, including my reputation for complying with the standards and ethics of the profession.

Signature

Date (month/day/year)

1. Canine Residency Training Requirements

Updated: 5-9-2014

	1. Sports medicine and rehabilitation	2. Specialty practice	3. Independent study	4. Individual rotations	5. Experience	6. Skills	7. Seminar & Continuing Education	8. Publication	9. Case reports
Requirements	72 weeks (400 cases)	22 weeks	36 weeks	26 weeks	Logged	Logged	250 hours	One	Three

1. Sports Medicine and Rehabilitation immersion with ACVSMR diplomate supervision. This requirement consists of a total of 72 weeks in specific sports medicine and rehabilitation activities. A total of 400 canine cases must be reported in a clinical case log.

2. Specialty Practice with board specialist mentoring. This requirement consists of 22 weeks for academic and nontraditional residency training programs in specific specialty activities in the following areas:

a. Diagnostic imaging – 8 weeks (minimum)

With required exposure to radiology, diagnostic ultrasound, nuclear scintigraphy, and MR/CT modalities.

b. Surgery – 6 weeks (minimum)

With suggested exposure to regenerative medicine, gait analysis, lameness examinations, and arthroscopy.

c. Internal medicine – 3 weeks (minimum)

With suggested exposure to nutrition, gastrointestinal disorders, upper and lower respiratory disease, exercise physiology, and cardiology.

d. Neurology – 3 weeks (minimum)

With suggested exposure to neurologic examinations, diagnostic tools, and post-mortem evaluation.

e. Pain management – 2 weeks (minimum)

With suggested exposure to both acute and chronic pain conditions, pharmaceutical and non-pharmaceutical approaches (e.g., acupuncture, cryotherapy, etc.) and multimodal pain management approaches.

3. Independent Study. This requirement consists of 36 weeks that is intended to allow development of independent thought, staff mentoring and teaching skills, focused study in specialized facets of sports medicine and rehabilitation, further elective rotations, further supervised or independent rotations in sports medicine and rehabilitation, cross species training or human physical therapist interactions.

4. Individualized Rotations. This requirement consists of 26 weeks in any or all of the following rotations (with a minimum of one week suggested in any rotation):

- Research or clinical investigation
- Preparation of scientific manuscripts
- National or international level continuing education courses
- Rotation with the alternate species (e.g., canine resident spending time with a equine rehabilitation practice and vice versa) with the approval of the resident's supervisor
- Special rotation at a human sports medicine/rehabilitation facility
- Special rotation with a human physical therapist trained in veterinary rehabilitation
- Up to six weeks of vacation time over the course of the program may be counted toward this requirement.

5. Experience Requirement. This requirement is for observation and participation in specific clinical problems, procedures, or cases. Each experience is logged. Experience is achieved by the resident's direct observation and participation. Direct hands-on participation (rather than simple observation) is expected whenever possible and is highly encouraged.

6. Skills Requirement. This requirement is for the development of specific skills and procedures that the resident must learn. These skills represent a higher level of training and include a list of skills critical to the practice of canine sports medicine and rehabilitation. The skills must be taught to the resident through discussion and demonstration by the supervisor and mentor(s).

7. Seminar and Continuing Education Requirements. This requirement consists of **250 hours** didactic training in sports medicine and rehabilitation.

The resident must provide written documentation that the following criteria have been satisfied. The resident must actively participate in medical seminars, literature reviews (i.e., journal clubs), clinical case rounds conferences, and board review sessions on a wide range of topics related to sports medicine and rehabilitation medicine. There should be substantial input into the seminar series by individuals other than the resident. This training experience may be received at a veterinary or human teaching hospital. This experience must include at least 200 hours of seminars or didactic graduate level courses accrued over the residency.

The resident must provide written documentation that the following criteria have been satisfied. The resident must participate in a minimum of 50 hours of continuing education related to sports medicine or rehabilitation sponsored by local, state, and national veterinary or human medical organizations. These continuing education requirements are differentiated from seminar requirements in that seminars are defined as regularly scheduled, ongoing series in a hospital setting while continuing education is defined as sporadically offered veterinary or human conferences. Monthly local veterinary association meetings would, however, fall into the continuing education requirement if the subject matter were related to sports medicine and rehabilitation. Topics should cover a wide range of issues in sports medicine and rehabilitation. The continuing education requirements can be fulfilled by a one-time enrollment in a comprehensive continuing education program. The intent of the requirement is to ensure that there is a continuum of active participation in formal continuing education.

8. Peer-reviewed Publication. The resident is required to be first author on one peer-reviewed, hypothesis-driven publication on the subject of veterinary sports medicine or rehabilitation. The publication must be accepted by October 1st of the year prior to the certification exam that the resident plans to sit, and must not be more than five years old at the time of application. The material within the publication must not have been published previously other than in an abstract or proceedings format. The publication must be written in or fully translated to the English language. Non peer-reviewed publications such as book chapters, proceedings, review articles and clinical case reports are not acceptable material to meet this publication requirement.

9. Clinical case reports. This requirement consists of three high-quality clinical case reports for which the resident is first author. The case reports must describe the diagnosis and treatment of medical and surgical conditions in animal athletes and rehabilitation of performance or non-performance animals. The clinical case reports must be written to the standard format acceptable for publication by appropriate journals such as the Journal of the American Veterinary Medical Association. Case reports will be evaluated on satisfactory case management with attention to logical thought processes, clinical knowledge and appropriate management. One of these studies is suggested (but not required) to be a clinical case series of similar diagnoses and treatment.

SAMPLE

2. Residency Course Requirements

Updated: 5-9-2014

	Total course credits	Didactic credits	Didactic courses over 500 level
Required			
Completed			

Year 1

Fall semester Credits

Total 0

Spring semester Credits

Total 0

Year 2

Fall semester Credits

Total 0

Spring semester Credits

Total

Year 3

Fall semester Credits

Total

Spring semester Credits

Total

3. Clinical and Research Activities

Updated: 5-9-14

	Total
Required	156 weeks
Completed	

Sport Med Rehab	Specialty Practice	Independent Study	Individual Rotations
72 weeks	22 weeks	36 weeks	26 weeks
0	0	0	0

Year 1

Week	Date	Activity	Sport Med Rehab	Specialty Practice	Independent Study	Individual Rotations
1						
2						
3						
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52						
Year 1 - Totals			0	0	0	0

SAMPLE

4. Case Log

Updated: 9/29/2013

	Total	Case Log	Case Log	Case Log
Required	400 Cases	Year 1	Year 2	Year 3
Initial Examinations	0	0	0	0
Follow Up Exams	0	0	0	0

Year 1

Date Initial Exam	Christian	Patient Name	Owner Name	Breed	Age	Sex	Diagnosis	Diagnostic	Imaging	Affected limbs	Treatment	Follow Up #1 (Date; Status)	Follow Up #2 (Date; Status)	Follow Up #3 (Date; Status)	Follow Up #4 (Date; Status)	Follow Up #5 (Date; Status)	Follow Up #6 (Date; Status)	Follow Up #7 (Date; Status)	Follow Up #8 (Date; Status)
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SAMPLE

5. Canine Sports Medicine and

Updated: 5-9-14

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Collaborative Requirements

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and Rehabilitation Experience Requirements

Patient care

Demonstrate proper dog handling techniques
Provide sufficient restraint in different environmental settings
Provide adequate safety measures for personnel and dogs

Relevant medical history

Collect and interpret a relevant medical history
Be able to interpret performance records (e.g., agility records)

Working knowledge of specific athletic disciplines and training environments

Activities and athletic requirements of diverse canine sporting events
Training techniques and associated equipment
Conditioning requirements and competition schedules
Veterinary care, rules and regulations at sporting events
Performance characteristics and biomechanical features of ground or obstacle surfaces
Epidemiology of musculoskeletal injuries

Triage and emergency care

Stabilization and emergency care of musculoskeletal, ocular and dental injuries
Treatment of hyperthermia, dehydration and possible toxin exposure

Pain management

Have a working knowledge and clinical application of acute, subacute, and chronic pain management strategies

Pharmaceuticals

Have a working knowledge of legal and illegal drug use
Drug testing and common ergogenic agents
Drug withdrawal times

Nutraaceuticals

Have a working knowledge of the indications and efficacy of nutritional supplements routinely used in canine practice

Nutritional requirements of the canine athlete

Have a working knowledge of the roles of protein, fats and carbohydrates in various athletic disciplines
Analyze and design sport-specific nutritional programs for canine athletes

Animal welfare

Knowledge of animal welfare issues as they relate to various sporting events
Awareness of ongoing controversies within different canine racing sports (e.g., management and husbandry issues)
Awareness of controversial issues related to training techniques within canine sports

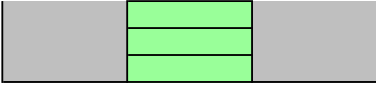
Multidisciplinary interactions

Demonstrate the ability to work effectively within a multidisciplinary setting to provide optimal care and performance enhancement for the athletic dog with colleagues, referring veterinarians, regulatory veterinarians, other licensed professionals, owners, and trainers
Build productive and educational relationships with clients, students, interns, residents, technicians and physical therapists

Adjunctive therapies

Canine behavior and training
Therapeutic massage
Acupuncture
Chiropractic

There is not a requirement for applicants to have specific training or certification in the application of these techniques. However, there is a need to be aware of evidence-based support, techniques, mechanisms of action, indications, contraindications, and when referral to a qualified practitioner may be indicated.



SAMPLE

Clinical examination

Musculoskeletal evaluation: including the axial skeleton
Lameness examination: including interpreting force platform and pressure mat data
Neurologic examination
Cardiac examination
Respiratory examination
Ophthalmologic examination
Oral and dental examination

Diagnostic procedures

Venipuncture: hematology and serum biochemistry
Arterial blood gases (resting and exercising)
Cystocentesis: cytology and biochemistry
Synovial fluid collection
Cerebrospinal fluid analysis
Electrocardiogram
Muscle biopsy

Diagnostic imaging (with a specific focus on the musculoskeletal system)

Whole body radiography
Ultrasonography: including muscles, tendons, ligaments and joints
Nuclear scintigraphy
Magnetic resonance imaging
Computed tomography
Thermography
Arthroscopy
Endoscopy: including gastroscopy and the upper respiratory tract

Treatment procedures

Acute, subacute and chronic pain management
Intraarticular injections
Treatment of tendon and ligament injuries: including ultrasound-guided injections
Autologous blood product collection, processing and injection (e.g., platelet rich plasma, IRAP)
Mesenchymal stem cell collection, processing and injection: bone marrow- and adipose-derived
Arthroscopy
Apply support wraps, protective bandages and splints
Apply orthotics and prosthetics

Functional assessments

Subjective and objective measures to capture musculoskeletal and neurological functional impairments
Assess signs of acute, subacute, and chronic pain
Assess function as it relates to daily activities and sporting activities (i.e. Sit-to-stand in a geriatric animal or jumping in an athlete)
Measures of proprioception and balance
Assess lameness during all phases of the gait cycle
Measures of active and passive joint range of motion at each appendicular articulation and within regions of the axial skeleton
Measures of joint play at each appendicular articulation
Assess muscle development, tone and function across each appendicular articulation and within regions of the axial skeleton
Measures of motor timing and control for coordination and locomotion
Assess strength of muscle groups
Measures of aerobic capabilities and endurance

Outcome measures

Correctly apply and interpret pertinent subjective and objective outcome measures of both qualitative and quantitative characteristics of functional impairment related to sports medicine and rehabilitation issues.
Acute, subacute and chronic pain measures
Skin lesion dimensions and characteristics (e.g., redness, granulation)
Swelling and effusion
Superficial skin temperature
Proprioception
Balance and postural stability
Flexibility
Conformation and posture

Muscle development (e.g., limb circumference, DEXA)
Muscle tone
Lameness scales
Gait analysis: force platforms, joint kinematics, electromyography, inertial sensors
Distance traveled (e.g., pedometer)
Speed and location (e.g., GPS)
Strength
Aerobic and anaerobic capacity

Soft tissue and joint mobilization

Apply soft tissue mobilization techniques to skin, fascia, muscle, tendon and ligaments
Apply appropriate joint mobilization techniques at each appendicular articulation and within regions of the axial skeleton
Apply and assess the response to primary, secondary, and tertiary directions and types of joint motion at each appendicular articulation and within regions of the axial skeleton
Apply and assess the response to different grades of joint mobilization at each appendicular articulation and within regions of the axial skeleton
Assess and characterize types of joint end-feel at each appendicular articulation and within regions of the axial skeleton

Physical modalities

modalities.
Cryotherapy
Heat therapy
Neuromuscular electrical stimulation (including inferential electrical stimulation)
Transcutaneous electrical nerve stimulation (TENS)
Direct current (iontophoresis)
Pulsed electromagnetic therapy
Therapeutic ultrasound (including phonophoresis)
Extracorporeal shockwave therapy (focused high-energy sound waves)

Therapeutic exercises

Design and implement effective therapeutic exercise programs with passive and active components to address functional or structural impairments with appropriate outcome measures for monitoring the response to treatment.

Balance:

- Proprioceptive training
- Development of motor timing skills
- Functional balance exercises, including PNF patterns

Flexibility:

- Active and passive stretching exercises

Strength:

- Core stability exercises
- Development of motor control skills
- Strengthening exercises
- Plyometric exercises

Endurance:

- Aerobic exercises and endurance training
- Anaerobic exercise and endurance training

Aquatic therapy: (e.g., underwater treadmill exercise, swimming)

Therapeutic exercise equipment

Use and appropriately modify specific therapeutic exercise equipment to meet individual-based needs and to facilitate achieving desired treatment or rehabilitation goals.

Have a working knowledge of exercise equipment maintenance and safety

- Proprioceptive training equipment
- Balance and coordination equipment
- Flexibility and stretching equipment
- Core stability training equipment
- Motor control training equipment
- Strength training equipment
- Aerobic exercise training equipment
- Anaerobic exercise and endurance training equipment
- Aquatic therapy equipment and water quality (e.g., underwater treadmill exercise, swimming)

Treatment goals and planning

Demonstrate the ability to identify key rehabilitation or sports medicine issues that are influencing the health or performance status of an individual patient
Demonstrate the ability to create and justify physiologically, anatomically and biomechanically sound appropriate short (1 month), medium (2-3 months) and long-term (> 4 months) sports medicine and rehabilitation objectives and treatment plans that are specific, measurable, attainable, realistic and timely
Demonstrate the ability to implement and readily modify a logical and progressive sports medicine and rehabilitation plan based on the current health and functional performance characteristics of an individual patient

7. Seminars & Continuing Education

Updated: 5-9-14

	Total	Clinical Case Rounds	Journal Club	Seminars	Didactic Courses	Sports Med Rehab Continuing Education
Required	250 hours	200 hours				50 hours
Completed	0	0	0	0	0	0

Year 1

Week	Date	Clinical Case Rounds	Journal Club	Seminars	Continuing Education
1					
2					
3					
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Year 1 - Totals		0	0	0	0



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SAMPLE

1. ACVSMR Academic Residency 3-year Requirements

Updated: 3-29-2013

	1. Sports medicine and rehabilitation	2. Specialty practice	3. Independent study	4. Individual rotations	5. Experience	6. Skills	7. Seminar & Continuing Education	8. Publication	9. Case reports
Requirements	72 weeks (300 cases)	22 weeks	36 weeks	26 weeks	Logged	Logged	250 hours	One	Three

1. Sports Medicine and Rehabilitation immersion with ACVSMR diplomate supervision. This requirement consists of a total of 72 weeks in specific sports medicine and rehabilitation activities. A total of 300 equine cases or 400 canine cases must be reported in a clinical case log.

2. Specialty Practice with board specialist mentoring. This requirement consists of 22 weeks for academic and nontraditional residency training programs in specific specialty activities in the following areas:

a. Diagnostic imaging – 8 weeks

Required exposure to radiology, diagnostic ultrasound, nuclear scintigraphy, and MR/CT modalities.

b. Surgery – 6 weeks

Suggested exposure to regenerative medicine, gait analysis, lameness examinations, and arthroscopy.

c. Internal medicine – 3 weeks

Suggested exposure to nutrition, gastrointestinal disorders, upper and lower respiratory disease, and cardiology.

d. Neurology – 3 weeks

Suggested exposure to neurologic examinations, diagnostic tools, and post-mortem evaluation.

e. Pain management – 2 weeks

Suggested exposure to both acute and chronic pain conditions, pharmaceutical and non-pharmaceutical approaches (e.g., acupuncture, cryotherapy, etc.) and multimodal pain management approaches.

3. Independent Study. This requirement consists of 36 weeks that is intended to allow development of independent thought, staff mentoring and teaching skills, focused study in specialized facets of sports medicine and rehabilitation, further elective rotations, further supervised or independent rotations in sports medicine and rehabilitation, cross species training or human physical therapist interactions.

4. Individualized Rotations. This requirement consists of 26 weeks in any or all of the following rotations (with a minimum of one week suggested in any rotation):

- Research or clinical investigation
- Preparation of scientific manuscripts
- National or international level continuing education courses
- Rotation with the alternate species (e.g., equine resident spending time with a canine rehabilitation practice and vice versa) with the approval of the resident's supervisor
- Special rotation at a human sports medicine/rehabilitation facility
- Special rotation with a human physical therapist trained in veterinary rehabilitation
- Up to six weeks of vacation time over the course of the program may be counted toward this requirement.

5. Experience Requirement. This requirement is for observation and participation in specific clinical problems, procedures, or cases. Each experience is logged. Experience is achieved by the resident's direct observation and participation. Direct hands-on participation (rather than simple observation) is expected whenever possible and is highly encouraged.

6. Skills Requirement. This requirement is for the development of specific skills and procedures that the resident must learn. These skills represent a higher level of training and include a list of skills critical to the practice of sports medicine and rehabilitation. The skills must be taught to the resident through discussion and demonstration by the supervisor and mentor(s).

7. Seminar and Continuing Education Requirements. This requirement consists of 250 hours didactic training in sports medicine and rehabilitation.

The resident must provide written documentation that the following criteria have been satisfied. The resident must actively participate in medical seminars, literature reviews (i.e., journal clubs), clinical case rounds conferences, and board review sessions on a wide range of topics related to sports medicine and rehabilitation medicine. There should be substantial input into the seminar series by individuals other than the resident. This training experience may be received at a veterinary or human teaching hospital. This experience must include at least **200 hours of seminars** or didactic graduate level courses accrued over the residency. The resident must provide written documentation that the following criteria have been satisfied. The resident must participate in a minimum of 50 hours of continuing education related to sports medicine or rehabilitation sponsored by local, state, and national veterinary or human medical organizations. These continuing education requirements are differentiated from seminar requirements in that seminars are defined as regularly scheduled, ongoing series in a hospital setting while continuing education is defined as sporadically offered veterinary or human conferences. Monthly local veterinary association meetings would, however, fall into the continuing education requirement if the subject matter were related to sports medicine and rehabilitation. Topics should cover a wide range of issues in sports medicine and rehabilitation. The continuing education requirements can be fulfilled by a one-time enrollment in a comprehensive continuing education program. The intent of the requirement is to ensure that there is a continuum of active participation in formal continuing education.

8. Peer-Reviewed Publication. The resident is required to be first author on a peer-reviewed, hypothesis-driven publication on the subject of veterinary sports medicine or rehabilitation. The publication must be fully accepted by August 1st of the year prior to the certification exam and must not be more than 5 years old at the time of application. The material within the publication must not have been published previously other than in an abstract or proceedings format. The publication must be written in or fully translated to the English language. Non peer-reviewed publications such as book chapters, proceedings, review articles and clinical case reports are not acceptable material to meet this publication requirement.

SAMPLE

2. Residency Course Requirements

Updated: 5/9/2014

	Total course credits	Didactic credits	Didactic courses over 500 level
Required			
Completed			

Year 1

Fall semester Credits

Total 0

Spring semester Credits

Total 0

Year 2

Fall semester Credits

Total 0

Spring semester Credits

Total

Year 3

Fall semester Credits

Total

Spring semester Credits

Total

3. Clinical and Research Activities

Updated: 3-29-2013

	Total
Required	156 weeks
Completed	

Sport Med Rehab	Specialty Practice	Independent Study	Individual Rotations
72 weeks	22 weeks	36 weeks	26 weeks
0	0	1	1

Year 1

Week	Date	Activity	Sport Med Rehab	Specialty Practice	Independent Study	Individual Rotations
1						
2						
3						
4						
5					1	
6						
7						
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Year 1 - Totals			0	0	1	1

SAMPLE

A. Case Log

Updated: 9-29-2011

	Total	Case Log	Case Log	Case Log
Required		Year 1	Year 2	Year 3
Initial Examinations	0	0	0	0
Follow Up Exams	0	0	0	0

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13	Year 14	Year 15	Year 16	Year 17	Year 18	Year 19	Year 20	
Date	Initial Exam	Clinician	Horse Name	Owner Name	Breed	Age	Sex	Diagnosis	Diagnosics	Imaging	Affected Limbs	Treatment	Follow Up #1 (Date; Status)	Follow Up #2 (Date; Status)	Follow Up #3 (Date; Status)	Follow Up #4 (Date; Status)	Follow Up #5 (Date; Status)	Follow Up #6 (Date; Status)	Follow Up #7 (Date; Status)	Follow Up #8 (Date; Status)

SAMPLE

5. Equine Sports Medicine

Updated: 3-29-2013

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Collaborative Requirement

SAMPLE

and Rehabilitation Experience Requirements

Patient care

Demonstrate proper horse handling techniques
Provide sufficient restraint in different environmental settings
Provide adequate safety measures for personnel and horses

Relevant medical history

Collect and interpret a relevant medical history
Be able to interpret performance records (e.g., racing records)

Requirements of specific athletic disciplines

Have a working knowledge of the activities and requirements of diverse equine sporting events
Knowledge of conditioning and competition schedules, veterinary care, rules and regulations
Have a working knowledge of various training techniques and equipment
Epidemiology of musculoskeletal injuries

Hoof care, shoes and ground surfaces

Have a working knowledge of therapeutic shoeing and the basics of hoof trimming and shoeing
Performance and biomechanical features of various track or arena surfaces
Ability to assess footing and track surfaces related to sports medicine and rehabilitation issues

Triage and emergency care

Design fluid therapy for the exhausted or dehydrated horse
Be able to stabilize catastrophic musculoskeletal injuries for transport

Pain management

Have a working knowledge and application of all forms of acute and chronic pain management strategies

Pharmaceuticals

Have a working knowledge of the legal and illegal drug use, drug withdrawal times, and drug testing
Knowledge of common ergogenic drugs and associated legal issues
Have a working knowledge and clinical application of all forms of intra-articular medications

Nutraceuticals

Have a working knowledge of the indications and efficacy of nutritional supplements routinely used in equine practice

Nutritional requirements of the equine athlete

Have a working knowledge of the roles of protein, fats and carbohydrates various athletic disciplines
Design sport-specific nutritional programs for equine athletes

Animal welfare

Knowledge of animal welfare issues as they relate to various sporting events
Controversies within different equine sporting events (e.g., soring, use of whips in racing)
Controversial training techniques in dressage, eventing and western performance horses

nts

Multidisciplinary interactions

Demonstrate the ability to work effectively within a multidisciplinary setting to provide optimal care and performance enhancement for the athletic horse with colleagues, referring veterinarians, regulatory veterinarians, other licensed professionals, farriers, equine dentists, owners, and trainers
Build productive and educational relationships with clients, students, interns, residents, and technicians

Adjunctive therapies

Equine behavior and training
Therapeutic massage
Acupuncture
Chiropractic

There is not a requirement for applicants to have specific training or certification in the application of these techniques. However, there is a need to be aware of evidence-based support, techniques, mechanisms of action, indications, contraindications, and when referral to a qualified practitioner may be indicated.

SAMPLE

6. Equine Sports Medicine Skills

Updated: 3-29-2013

Observe	Perform	Interpret

Observe	Perform	Interpret

Observe	Perform	Interpret

Observe	Perform	Interpret

Observe	Perform	Interpret

Equine Rehabilitation Skills

Observe	Perform	Interpret



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Observe	Perform	Interpret

Observe	Perform	Interpret

Observe	Perform	Interpret

Observe	Perform	Interpret

Observe	Perform	Interpret

SAMPLE

Observe	Perform	Interpret

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7. Seminars & Continuing Education

Updated: 3-29-2013

	Total	Clinical Case Rounds	Journal Club	Seminars	Didactic Courses	Sports Med Rehab Continuing Education
Required	250 hours	200 hours				50 hours
Completed	0	0	0	0	0	0

Year 1

Week	Date	Clinical Case Rounds	Journal Club	Seminars	Continuing Education
1					
2					
3					
4					
5					
6					
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Year 1 - Totals		0	0	0	0



**American College of Veterinary Sports Medicine and Rehabilitation
Residency Training Program Checklist**

The ACVSMR Residency Committee provides this checklist to assist Program Supervisors to determine that their proposed residency will meet the college's guidelines.

1. Program supervisor's contact information: (Note: The program supervisor must be an ACVSMR diplomate)

Name: _____

Department: _____

Hospital or University: _____

Street Address: _____

City, State, Zip, Country: _____

Phone: _____ Fax: _____

E-mail: _____

2. Is the program supervisor familiar with current standard training program requirements as outlined in the current ACVSMR traditional residency guidelines?

Yes _____ No _____

3. The species-focus of the traditional residency training program to be registered:

Canine _____ Equine _____

4. Physical location of the residency training program:

Primary site: _____

Secondary site: _____

Other sites: _____

List all existing diplomates of American or European specialty colleges that are available for supervision as boarded specialists in the areas of sports medicine and rehabilitation (ACVSMR), surgery (ACVS), internal medicine (ACVIM), cardiology, neurology, anesthesiology/pain management (ACVA), nutrition (ACVN), and radiology (ACVR). If any individuals are physically located off-site, please explain the situation and arrangements provided for contact with and supervision of the ACVSMR trainee.

Name	Board specialty	Comments

Internal medicine: 3 weeks
Pain management: 2 weeks

Yes _____ No _____
Yes _____ No _____

Radiology or imaging:

Supervisors: _____

Experience and training in reading (and obtaining) plain radiographs, CTs, nuclear scintigraphy, MRI, and ultrasonography will be obtained during this rotation. The resident will spend clinic hours under direct supervision of the respective supervisor(s).

Surgery:

Supervisors: _____

The resident will actively participate and guide the work-up of referred cases. Responsibilities include examination, diagnosis and development of a treatment plan for cases presented to the surgery service at. Patient monitoring, participation in surgery, surgical planning and preparation and follow-up as well as participation in daily rounds is also required. Reading and knowledge of current literature pertaining to areas of particular interest (orthopedic maladies treatment and outcomes) will be expected. Emphasis should be placed upon exposure to sports-related cases, minimally invasive procedures, and regenerative medicine.

Neurology:

Supervisors: _____

The resident will actively participate and guide the work-up of referred cases. Responsibilities include examination, diagnosis and development of a treatment plan for cases presented to the neurology service. Patient monitoring and follow-up as well as participation in daily rounds is also required. Reading and knowledge of current literature pertaining to rehabilitation will be expected.

Internal Medicine:

Supervisors: _____

The resident will actively participate and guide the work-up of referred cases. Responsibilities include examination, diagnosis and development of a treatment plan for cases presented to the internal medicine service. Patient monitoring and follow-up as well as participation in daily rounds is also required. Emphasis should be placed upon sports-related cases, exercise physiology, and nutrition.

Pain Management:

Supervisors: _____

The resident will be responsible for diagnosis, monitoring, and treatment of acute and chronic pain conditions in small animals. This rotation can be with the anesthesia service or with a veterinarian certified in veterinary pain management. Exposure to acupuncture and physical modalities should be emphasized.

3. Will the trainee spend an additional 36 weeks training in independent study-related activities in sport medicine and rehabilitation? This requirement will not necessarily be under direct supervision, in clinics, or in activities related to writing, teaching or obtaining experience with other required specialists, but it will be tailored to include areas relevant to professional development of the resident (i.e., stem cell therapy, human rehabilitation observation, etc.). This requirement is not intended to include personal vacations or professional meetings.

Yes _____ No _____

4. Is a complete medical record, using a problem-oriented (SOAP) veterinary medical record system maintained for each individual patient and is retrievable?

Yes _____ No _____

5. Will the trainee participate in clinical rounds on a daily basis while on clinical rotations? A clinical rotation consists of a supervising diplomate being available for direct supervision for minimally 20 hours out of a 40-hour training week. Training weeks begin on the same day of the week throughout the residency.

Yes _____ No _____

6. Please indicate the availability of the following equipment and facilities. Indicate if the equipment is available at the primary training site or at a different location.

Equipment or Facilities	Availability (Yes/No)	Location: On-site (Yes/No)	Location: Off-site (Yes/No)
Radiography			
Ultrasonography			
Surgical Facilities			
Magnetic resonance imaging			
Computed tomography			
Endoscopy			
Arthroscopy			
Clinical/Anatomic pathology			
Electrocardiology			
Blood pressure monitoring			
Electromyography			
Computerized medical records			
Veterinary or medical library			
Intensive care facility (24 hours)			
Rehabilitation facility			

Appropriate rehabilitation equipment must be available for clinical use by the trainee. Please provide a list of available equipment to which the trainee will have access.

If training is to take place at a different location is there an ACVSMR boarded specialist or other qualified individual available at this location for mentorship?

7. Will the residents see approximately 400 canine cases or 300 equine cases during 3 years of the traditional residency training program under the guidelines of the canine and equine sub-specialties?

Yes _____ No _____

8. Will the trainee spend 200 hours during the 3 years of the traditional residency attending journal clubs, continuing education, audited classes, or seminars?

Yes _____ No _____

9. Is the trainee required to give one or more formal presentations at a national or international conference or in an educational setting on a yearly basis?

Yes _____ No _____

10. Will the resident attend major veterinary medical, rehabilitation, sports medicine, or medical meetings during their training?

Yes _____ No _____

11. Does the training program require a research project?

Yes _____ No _____

12. Will one or more publications be required as part of the training program? Residents are required to be first author on at least one a peer-reviewed, hypothesis-driven publication related to veterinary sports medicine or rehabilitation.

Yes _____ No _____

13. Will the program be sufficient for the resident to generate three high-quality clinical case reports? One of these studies is suggested (but not required) to be a clinical case series of similar diagnoses and treatment.

Yes _____ No _____

14. Will the trainee meet at least twice per year with their mentor to evaluate their performance, review their progress in the program, and to assess whether or not their training program is proceeding as described in this document?

Yes _____ No _____

15. Will a dated, written summary of this evaluation (i.e., progress report) be available for the ACVSMR Residency Committee to review if needed?

Yes _____ No _____

16. Please provide a general description of the structure of the traditional residency training program provided for trainees in sports medicine and rehabilitation. This should include: the length and number of clinical rotations per year; distribution of time allocated for research, writing, exam preparation, other scholarly activity and vacation; and distribution of time allocated to external rotations, if this is a multi-site program. Please list the approximate time spent in each activity in weeks per year. If the time changes from year to year during the program, please specify.

Activity	Approximate time (weeks/year)
Teaching - Lectures	
Teaching - Laboratories	
Clinical rotations (on site)	
External clinical rotations	
Research activities	
Writing case reports or manuscripts	
Continuing education	
Other scholarly activities	
Board examination preparation	
Vacation	

17. Please list the trainees currently participating in your traditional or nontraditional residency training programs, the beginning date of the program, expected ending date and the designated ACVSMR program supervisor.

Residents must register the start date of their traditional residency training program with the ACVSMR Residency Committee within 90 days of the actual start date. Failure to register or registration after the 90-day deadline may jeopardize the certification process as the resident training program may not be recognized or accepted.

Signature of Trainee: _____ Date: _____

Signature of Program Supervisor: _____ Date: _____
(ACVSMR diplomate)