RESIDENCY IN EQUINE SURGERY

Louisiana State University
School of Veterinary Medicine
Department of Veterinary Clinical Sciences
Veterinary Teaching Hospital

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RESIDENCY PROGRAM IN EQUINE SURGERY

Louisiana State University School of Veterinary Medicine Department of Veterinary Clinical Sciences Veterinary Teaching Hospital

1.0 INTRODUCTION

1.1 The equine surgery residency program at Louisiana State University, School of Veterinary Medicine (SVM) is designed to provide three year post-DVM training in surgical treatment of large animals with an emphasis on the horse. This program complies with the Large Animal Residency Program as printed in the current information brochure of the American College of Veterinary Surgeons (ACVS). Successful completion of this program will partially fulfill the requirements for board eligibility by the ACVS. The training program will utilize faculty of the Department of Veterinary Clinical Sciences (VCS) as mentors. Clinical facilities of the Veterinary Teaching Hospital (VTH) will be the primary training location for the LSU portion of the residency.

2.0 OBJECTIVES

- **2.1** To satisfy the surgical residency training program requirements for board eligibility by the ACVS
- **2.2** To provide advanced training in clinical problem solving, diagnostic, and surgical techniques in large animals.
- **2.3** To provide didactic and tutorial teaching training and experience.
- **2.4** To provide experience in scientific and clinical case presentation through the seminar and house officer rounds program.
- **2.5** To provide experience in the preparation and submission of scientific articles for publication and/or presentation.
- **2.6** To provide experience in designing and conducting a clinical research project.
- **2.7** To provide opportunity to participate in graduate level courses that support and strengthen the clinical training program.
- 2.8 To become familiar with areas of parallel interest in small animal and human surgery through participation in rounds, seminars, and short courses at LSU and various medical institutions.

- **2.9** To meet the requirements for one of the following:
 - **2.9.1** A MS degree (Thesis) through the Graduate School and the VCS at the SVM.
 - **2.9.2** A PhD doctoral degree (Dissertation) through the graduate school.

3.0 PREREQUISITES

- **3.1** Candidates must have a DVM or an equivalent degree.
- 3.2 Candidates must have satisfactorily completed at least a one year rotating large animal internship or equivalent 2 year post graduate veterinary experience.
- **3.3** Candidates must have successfully completed the National Board examination or its equivalent in the certifying country.
- **3.4** Candidates <u>must</u> have the goal of board certification by the ACVS.
- 3.5 Candidates must be academically acceptable for admission to the Graduate School in the Department of Veterinary Clinical Sciences if a Master of Sciences Degree is to be pursued.
- **3.6** The candidates must have a satisfactory moral and ethical standing in the profession.

4.0 FACULTY MENTOR

- **4.1** The resident will be assigned to a faculty resident advisor who has diplomat status in the ACVS.
- 4.2 Responsibilities of the resident advisor include direction and coordination of the clinical program, completion of on-line semi-annual performance reviews in conjunction with twice yearly progress and performance evaluations with the resident, verification of all surgery cases, activity weeks, and seminars as required by the ACVS, advice toward research, publications, and preparation for application to sit the ACVS qualifying examinations, and general counseling.
- 4.3 The resident advisor may or may not be the graduate advisor, but will work in conjunction with the resident's graduate committee. The resident advisor will be assigned by the program director within the first calendar quarter of the program

5.0 HOUSE OFFICER ROUNDS AND SEMINAR PROGRAM

5.1 The House Officer Rounds and Seminar Series is designed to provide the resident the opportunity to research and present scientific information or to present interesting, unusual, or difficult clinical case material utilizing a

problem oriented approach to professional colleagues. The resident will participate with the other VCS house officers on a rotating basis and will make 2 presentations during each year of the program. Residents have the option to present 1 case report and 1 seminar or to do two seminars each year. House officer seminars and rounds presentation will be evaluated by the clinical faculty present at the seminar.

- 5.2 One seminar will be prepared and given in each year of the residency. The option to do two seminars instead of a case report and a seminar is possible.
- **5.3** One seminar topic will relate to original research conducted by the resident.
- 5.4 Attendance: The resident is required to attend and participate in the following: VMED 7001 (VCS Seminar), Grand Rounds, House Officer Rounds, and other seminars that are requirements of the resident's home department and/or section.
- **5.5** VCS HO Rounds/Seminar Policy
 - 5.5.1 HO attendance at all HO Rounds/Seminar sessions is required. HO attendance is required at only those rounds and seminars designated as VCS HO Rounds/Seminar sessions and that others occurring in the same time slot are not required by the House Officer Committee.
 - **5.5.2** Attendance will be taken at the beginning of each session.
 - 5.5.3 HO will be required to present an additional seminar if they have more than one unexcused absence or come late to the seminar more than twice (unexcused) during the program year. All absences must be accounted for by completing a HO Leave Request Form and submitting it to the HOC chair.
 - **5.5.4** Excused absences include the following: illness, annual leave, attendance or participation in a continuing education program, presentation of a student lecture, scheduled out-rotation or special service requirements per request of advisor. All other absences are unexcused unless deemed excusable by the HO advisor.

6.0 TEACHING PROGRAM

- 6.1 Throughout the program residents will be viewed as role models by both interns and professional students. They should always present themselves in a professional manner.
- The resident will participate in clinical instruction and in the evaluation of Phase II veterinary students assigned to the section.

- 6.3 The resident will participate in preclinical didactic lecture and laboratory instruction as assigned by his/her mentor.
 - 6.3.1 The resident will be required to prepare and present a minimum of 1 formal lecture (including handouts and visual aids) to Phase I students during the second and third year of the residency in areas of their interest and developed expertise
 - **6.3.2** The lecture presentation will be previewed and evaluated by 1 or more ACVS diplomats in attendance using the form identified as VCS Seminar Evaluation.
 - **6.3.3** The resident will participate in assigned Phase I and Phase II laboratories.

7.0 BOARD CERTIFICATION

- 7.1 An important credential in veterinary medicine is board certification in a specialty area. The primary objective of this surgical residency program is to prepare the resident for certification by the ACVS.
- 7.2 In order to qualify for examination the resident should refer to the published requirements of the college and commit themselves to an organizational scheme and preparation schedule early in the first year of the program. The ACVS Certification Examination consists of 2 parts: Phase 1 Surgical Knowledge and Phase 2 Surgical Competency
 - 7.2.1 It is highly recommended that the Phase 1 examination be taken during year 2 of the residency. If the resident intends to sit Phase 1 of the exam during the spring of their second year as recommended, they must submit all components of their training for review including 2 satisfactory semi-annual reviews, a minimum of 52 weeks completed and approved by the ACVS Resident Credentialing Committee (RCC), and 2 seminars approved by the RCC. Dates and location of the examination will be published in the fall of the year preceding the exam.
 - **7.2.2** Phase 2 of the examination will be offered in the first 3 months of the year following completion of the residency. For a resident to be eligible to sit for Phase 2 of the examination:
 - **7.2.2.1** Phase 1 of the examination must be successfully passed.
 - **7.2.2.2** All residency requirements must be completed and approved by the RCC.
 - **7.2.2.3** A completed credentials application must be approved by the ACVS.

- **7.2.2.4** Acceptance of a first author manuscript by a publication of the approved journal list.
- 7.2.3 One first-author publication resulting from prospective/retrospective studies or original research must be competed and fully accepted to a journal from the Approved Journals List in the ACVS handbook by August 1st of the final year of the residency program. A manuscript is considered fully accepted when the author receives a letter of acceptance from the editor and further review by a reviewer is not required.
 - **7.2.3.1** Publication must reflect original work or a previously unpublished case series
- **7.3** It is solely the responsibility of the resident to submit any material and fees required by the college for registration for board examinations.
- **7.4** The resident is responsible for maintaining a web based Residency training log which is to include the following:
 - **7.4.1** Surgical case log
 - **7.4.2** Residency activity log
 - **7.4.3** Resident presentation log
 - **7.4.4** Documentation of training in equine internal medicine, anesthesiology, radiology and pathology
- 7.5 The Resident Training Log is the web-based residency documentation and evaluation program. The Program Director (PD), Resident Advisor (RA), resident and ACVS have responsibilities for documentation and verification of satisfactory training for each resident. It is a requirement that each participant in a residency program review the Resident Training Requirements (pp. 28-57 of the Residency Training Standards and Requirements) to understand the log requirements.
- 7.6 The resident is responsible for entering cases, activity weeks, seminars, specialty rotations, and supervisors in the online logs. The RA will verify and approve log items and complete a semi-annual performance review online. The PD will verify the review in line prior to August 1 of each year of the program.
- **7.7** The resident will provide a current curriculum vitae to the RA and PD on an annual basis.

8.0 CLINICAL PROGRAM

The major responsibility of the surgical resident, under the direct supervision of faculty, is to receive, diagnose, operate upon and/or otherwise provide surgical

and medical management of patients admitted to the VTH. The residents' responsibility for patient care and teaching will increase as training progresses, dependent upon his/hers demonstrated level of proficiency.

- **8.1** Direct surgical supervision by an ACVS diplomat and consultation on patient management will continue throughout the program.
- **8.2** The residency program rotation will follow the Phase II professional teaching schedule which is composed of 12 blocks of 4 to 6 weeks each.
- 8.3 Emergency duty: The VTH provides both daytime and after hours emergency services to all large animal species throughout the year. The resident will share with other house officers and faculty in primary and back-up emergency duty for equine and farm animal species. Emergency duty commits the resident to evening, weekend, and holiday duty on a rotating basis.
 - **8.3.1** While such activities will be closely supervised early in the program, the resident is expected to develop appropriate skills in emergency patient care which will require less supervision as the program progresses.
- **8.4** Clinical Rounds: The resident will participate in the Phase II clinical rounds program of the service to which he/she is currently assigned.
 - **8.4.1** House Officer Rounds: The resident will participate in weekly equine house officer rounds either as the presenter or in attendance (Wednesday 8:15 9:00 am) and other scheduled conferences of the Equine Section. The resident will be responsible for presenting rounds every 4 to 6 weeks with the following format options:
 - **8.4.1.1** Research Rounds: Recommended format for at least 1 presentation during the year.
 - **8.4.1.2** Complicated cases: Must include a thorough review of the literature.
 - **8.4.1.3** Morbidity/Mortality case presentation: Presentation of a complicated case that did not have a positive outcome; discuss alternative treatment options that may have had better results; must include pertinent review of the literature.
 - **8.4.1.4** Journal Club: A review of 2 to 3 articles from recent (within the past 5 years) refereed journals in veterinary surgery, medicine, or other pertinent disciplines.
 - **8.4.2** House officer presentations will be evaluated by meeting attendees. House officers may exchange time slots with other house officers.

House Officer Rounds can only be cancelled by equine senior faculty members.

8.4.3 Other seminars in the SVM will be attended as scheduling permits. Attendance at rounds and seminars at a local medical facility could be arranged.

8.5 Annual Rotation Schedule (12 blocks/year, 4 – 6 weeks /block)

Rotations	Year 1	Year 2	Year 3
Surgery block	8	8 or 9	8
Research block	2 1/2	2 1/2	2 1/2
Medicine block	1		
Radiology block			1/2
Pathology block	1/2		
Anesthesia block		1/2	
Food Animal Surgery (optional)		1	

- 8.6 The above schedule satisfies the ACVS surgery resident program requirements: One hundred and ten weeks of clinical surgery under the direct supervision of an ACVS diplomat; 80 continuous hours of equine internal medicine; 80 hours of radiology; 40 hours of pathology (clinical pathology); and 80continuous hours of anesthesiology. Scheduled participation in food animal surgery is included as well.
- **8.7** The objectives for assignments other than equine surgery are outlined under section 15.
- 8.8 The residency program sequence of responsibilities including approximate dates for completion and the responsibilities of the PD, RA, and resident based on the year of the program is available on pages 54 55 of the 2015 2016 residency program guidelines.
- 8.9 The resident will present a class/seminar schedule to the mentor of each assignment at the first of the block. The resident will be excused from clinical assignment to attend scheduled rounds, classes, and seminars following notification of the block mentor.
- 8.10 The resident is encouraged to attend continuing education meetings sponsored by the SVM or local, regional, and national organizations. Attendance must be approved by the resident advisor, block mentor, and chairman of the HOC. Limited support may be available to defray registration and travel expense.

8.11 Outside Rotations

8.11.1 Off campus training including travel to other institutions will be at the residents' personal expense.

8.11.2 Documentation of off-campus surgical rotations is required by the ACVS in the form of an External Surgical Rotation Form which may be downloaded from the ACVS website. This documentation must be submitted with the credentials application at the end of the residency. A rotation supervisor must be identified by the practice or institution where the external rotation takes place and the supervisor must verify all cases by signing the External Surgical Rotation Form. The form must also be signed by the resident and RA.

9.0 RESEARCH PROJECT

- **9.1** The program requires its residents to participate in scholarly activity such as basic or applied research. The resident must be able to:
 - **9.1.1** Design a research project to address a specific question or problem relating to equine surgery.
 - **9.1.2** Write and submit a research grant proposal to seek funding for the project.
 - **9.1.3** Conduct the research according to the experimental design.
 - **9.1.4** Analyze and report the results of the project in thesis form and in a refereed journal.

9.2 Timetable:

- **9.2.1** First year: Write and submit a research proposal to a funding source. If not immediately funded the project must be redesigned and resubmitted. The project must be competed in publishable form by March of the third year of the program.
- **9.2.2** Second year: Research project is to be performed. A prospective or retrospective study designed, researched, and initiated by the end of the first-half of the second year is recommended.
- **9.2.3** Third year: Complete funded research and submit to a refereed journal for publication by March. If possible, present results of research at the ACVS resident forum (submit abstract for presentation during 3rd year). If completed, submit manuscript from prospective or retrospective study for publication in a refereed journal before the end of 3rd year.
- 9.3 Research and scholarly activity are to be accomplished (1) during research blocks, (2) after normal hospital hours/activities are completed, (3) when released to do so by the mentor they are assigned.
- **9.4** The resident advisor is responsible for monitoring development, continuity, progress, and completion of research/scholarly activities.

10.0 GRADUATE PROGRAM

- 10.1 An advanced degree is a requirement of the Equine Surgery Residency Program. The candidate has the option of pursuing either a MS or PhD program. An advanced degree is included in order to provide a balanced educational experience which will prepare the resident for an academic career as a member of the faculty of a School of Veterinary Medicine.
- 10.2 Requirements for admission to the Graduate School are provided on the LSU Graduate School home page under "prospective students". The resident will apply for admission to the graduate school within 45 days from the start of the residency. The resident will enroll in the Department of Veterinary Clinical Sciences graduate academic program.
- 10.3 The Master's Thesis must be completed before or concurrent with the completion of the residency before the resident certificate will be issued. Completion of the PhD at the time of completion of the residency is not required.
- **10.4** Course and credit hour requirements: All masters graduate students must complete a minimum of <u>30</u> credit hours of graduate courses, a final examination, and a thesis:
 - **10.4.1** A minimum if 12 hours of graduate work must be at the 7000 level or greater.
 - **10.4.2** A minimum of 10 hours of course credit must be from VCS courses.
 - **10.4.3** A minimum of 6 hours of research/thesis credit must be completed (only 6 hours counts towards degree program).
 - **10.4.4** A maximum of 4 hours of seminar (VCS 7001) may be applied towards the MS degree.
 - **10.4.5** A maximum of 8 hours of special topics (VCS 7003) may be applied towards the MS degree.
 - **10.4.6** A minimum of 8 hours of non-VCS courses is required.
- 10.5 Graduate course in topics of anatomy, physiology, and pathology as related to surgery should be scheduled. Surgical courses will be provided by faculty of the Department of Veterinary Clinical Sciences. The resident and his/her advisor will select a graduate committee by January of the first year.
- 10.6 If the resident alternatively enrolls in a PhD program with the LSU Graduate School, the course requirements of the PhD candidate will be ascertained by the PhD committee members and must follow the VCS PhD program requirements. The resident PhD committee at the time of

completion of the residency must provide sufficient evidence to the House Officer Committee that the candidate is satisfactorily progressing in the PhD program.

11.0 ADDITIONAL OBJECTIVE

- **11.1** The resident should make provisions to attend the ASIF Orthopedic Course at The Ohio State University during year 1 of the residency.
- **11.2** The resident should attend the ACVS Veterinary Symposium during the 2nd and/or 3rd year of the residency.
- 11.3 The resident is expected to remain current with the veterinary surgical literature pertaining to large animal surgery and related fields.
- 11.4 The resident is expected to develop teaching materials that will serve the instructional as well as the continuing education programs needs of the surgical service. This should include the organization of a pertinent veterinary literature file, patient data for the development of case studies, and a slide file as a basis for future instructional efforts.
- 11.5 The resident is expected to publish at least 1 first author publication in a referred journal. The residency certificate will not be issue until this manuscript is accepted by the residency credentialing committee.

11.6 Rotation Objectives

11.6.1 Equine Medicine

The surgery resident internal medicine training requirements includes a minimum of 80 hours, supervised directly or indirectly by an ACVIM Diplomat. The resident should:

- **11.6.1.1** Take an active role in the care and maintenance of all cases presented to the service, in conjunction with assigned faculty.
- **11.6.1.2** Maintain a special emphasis on interpretation of clinical pathology data, medical therapeutic and diagnostic procedures.
- **11.6.1.3** Take an active role in all rounds/seminars held in conjunction with that service.
- **11.6.1.4** Participate in teaching of professional veterinary students.
- **11.6.1.5** Take the opportunity to review literature in areas of perceived weakness, especially as they relate to veterinary surgery.

The surgery resident radiology training requirement includes a minimum of 80 hours, supervised directly or indirectly by an ACVR Diplomat. The resident will participate in patient care, special diagnostic procedures, radiology rounds, journal club, case discussion, seminar, various imaging modalities, therapeutic procedures, and graduate courses. This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVR Diplomats at the institution(s) involved in the surgery resident program and the radiology training requirement. The resident should:

- **11.6.2.1** Attend and participate in all film reading sessions, discussion and seminars pertaining to large animal.
- **11.6.2.2** Develop familiarity with special procedures and their interpretation.
- **11.6.2.3** Review the radiology teaching file, to develop an appropriate large animal perspective.
- **11.6.2.4** Review the veterinary radiology literature in areas of perceived weakness.
- **11.6.2.5** The on-duty Radiologist(s) should direct the resident to spend his/her time most effectively to gain an understanding of the discipline of Radiology as it relates to veterinary surgery.
- 11.6.2.6 The resident is responsible for scheduling (with advisor assistance) appropriate exposure to fulfill the minimum ACVS requirement.

11.6.3 Pathology

The surgery resident pathology training requirement includes a minimum of 80 hours, supervised directly or indirectly by an ACVP or ACVCP Diplomat. The resident 80 hours might include microscopic and gross pathology, pathology rounds, journal club, case discussion, seminar, surgical biopsy service, clinical case data interpretation, and graduate courses. This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVP or ACVCP Diplomats at the institution(s) involved in the surgery resident program and the pathology training requirement. The resident should:

- **11.6.3.1** Take an active role in the collection and interpretation of clinical laboratory and histopathological specimens.
- **11.6.3.2** Observe the postmortem examination in all cases in which there was medical or surgical participation.

- **11.6.3.3** Attend/participate in all rounds/seminars in conjunction with the pathology service during such assigned times.
- **11.6.3.4** Take the opportunity to review veterinary pathology literature in areas of perceived weakness, especially as they relate to veterinary surgery.
- **11.6.3.5** The resident is responsible for scheduling (with advisor assistance) appropriate exposure to fulfill the minimum ACVS requirements.

11.6.4 Anesthesiology

The surgery resident anesthesiology training requirement includes a minimum of 80 hours, supervised directly or indirectly by an ACVA Diplomat. The 80 hours might include routine and emergency patient care, journal club, literature review, case discussion, seminar, and graduate courses. This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVA Diplomat at the institution(s) involved in the surgery resident program and the anesthesiology training requirement. Under the direction of an ACVA Diplomat, the resident should:

- **11.6.4.1** Take an active role in the anesthetic care and maintenance of cases presented to the anesthesia service under the direct supervision of an ACVA Diplomat.
- **11.6.4.2** Attend and participate in discussions, rounds and seminars of the anesthesia service during the assigned period.
- **11.6.4.3** Participate in the service as other residents do, including out-of-hour responsibilities.
- **11.6.4.4** Have areas of perceived study need identified by ACVA mentor and make appropriate plans to focus on such areas.
- **11.6.4.5** Present a seminar in an area of interest <u>if</u> requested by the Diplomat supervising the service.
- **11.6.4.6** Overall goals for this discipline are to include:
 - **11.6.4.6.1** Become familiar with the pharmacology of anesthetic agents and emergency drugs.
 - 11.6.4.6.2 Take the opportunity to review the veterinary anesthesia literature particularly in the areas of fluid and electrolyte therapy and critical/intensive care as they relate to veterinary surgery.

- **11.6.4.6.3** Become familiar with anesthetic protocols including the following examples: acute gastrointestinal disease, pregnant mares, foals.
- **11.6.4.6.4** Become familiar with anesthetic equipment, anesthesia monitoring equipment, gas machines, and ventilators and the physiologic considerations thereof.

11.6.5 Food Animal Medicine and Surgery

The resident is encouraged to spend time up to 1 block on a food animal service, since the candidate will be examined on Food Animal medicine and surgery on the ACVS certifying examination. The resident should:

- **11.6.5.1** Take an active role in care and maintenance of all cases presented to the service, in conjunction with assigned faculty.
- **11.6.5.2** Take an active role in all rounds/seminars held in conjunction with that service.
- **11.6.5.3** Participate in teaching of professional veterinary students.
- **11.6.5.4** Take the opportunity to review literature in areas of perceived weakness, especially as they relate to veterinary surgery.
- **11.6.6** Off campus training including travel to another institution will be at the residents' personal expense.
- 11.6.7 Mentors of the above listed blocks will evaluate residents upon their fulfillment of these objectives. In addition, mentors of the ACVS requirements in Equine Internal Medicine, Radiology, Pathology and Anesthesiology will be required to sign a form verifying completion of the ACVS objectives.

12.0 EVALUATION AND REAPPOINTMENT

- 12.1 An evaluation will be provided by the block mentor at the end of each assigned block though the E*Value software. A summary evaluation will be made quarterly by the faculty in conjunction with the resident's advisor. The evaluation covers:
 - **12.1.1** Professional ability; to include theoretical knowledge and application of that knowledge, clinical skills, tutorial skills, and scholarly activity.

- **12.1.2** Hospital services; to include communication skills, patient care, medical record quality, emergency duty quality, and adherence to VTH protocol.
- **12.1.3** Personal characteristics; to include responsibility, initiative, interaction with faculty, staff and students, deportment and leadership.
- **12.2** The resident and mentor will meet on a quarterly basis to discuss progress and block evaluations
- 12.3 At any time in the resident's program, and at the latest in March of each year, the House Office Committee will review all evaluations to date. Following that review, the committee will make a recommendation to the Head of the Department of Veterinary Clinical Sciences to:
 - **12.3.1** Continue the appointment until the next review
 - **12.3.2** Award a certificate upon satisfactory completion of the program.
 - **12.3.3** Not to reappoint the resident, with a minimum of 30 days notice of termination. At the discretion of the House Officer Committee and in consultation with the resident's service, guidelines can be formulated that if met, may allow the resident to be re-instated at the end of the specified period.
- **12.4** All House Officers are required to complete an annual evaluation of their program with suggestions for improvement before continuation or completion of their program is granted.

13.0 HOUSE OFFICER COMMITTEE

- 13.1 The Committee is comprised of a representative of each House Officer program. It is responsible for the year-end review of each house officer's progress. This review is based on block evaluations received throughout the course of the program. The Committee grants recommendation for reappointment or a certificate to those who successfully complete the program.
- 13.2 All House Officers are required to complete an annual evaluation of their program with suggestions for improvement before continuation or completion of their program is granted

14.0 EMPLOYMENT AND BENEFITS

14.1 Louisiana State University classifies interns and residents as University employees. As such, they (and their eligible dependents) qualify for the Louisiana State University Baton Rouge health insurance and benefits. The School of Veterinary Medicine provides malpractice insurance coverage. The salary (not a stipend) is published in the Directory of

Internships and Residencies as published by the American Association of Veterinary Clinicians (www.virmp.org). Salary is payable in monthly increments via direct deposit. Retirement contributions are required and withheld from each paycheck. No social security tax is withheld. Federal and state income tax is withheld. The employee may be eligible to petition the IRS for exemption from federal tax on part of his/her salary.

- 14.2 The Veterinary Teaching Hospital operates year round. House officers will share emergency duty with other house officers within their specialty. House Officers will also share evening, weekend and holiday duty on a scheduled basis.
- The University offers accrual of annual time off following either the 14.3 University accrual rate (14 hours/month with a maximum accumulation of 176 hours) or the Civil Service Schedule rate (8 hours/month with no maximum accumulation). Sick time off accrual is 8 hours/month. All time off, except for illness and emergencies, should be requested and approved 30 days in advance. Time off requests must be entered into Workday (via the employee's MyLSU account) by the employee and approved by the supervisor before time off will be granted. Annual time off will be granted on an individual basis taking into account the reason for the requested absence and the needs of the service and hospital. Annual time off for personal business is to be taken during elective or research blocks. Emergency absence such as for illness or a death in the immediate family should be brought to the attention of the clinician to whom the House Officer is assigned as soon as the House Officer learns that he/she will be absent. The official request should be entered into Workday upon the House Officer's return. Except in unusual circumstances, approval will not be granted for time off during the final month of the program.
- **14.4** Reappointment to the second and third years of the residency program is contingent upon satisfactory completion of the previous year's requirements.

15.0 APPLICATIONS

- **15.1** Candidates may apply for the Residency in Equine Surgery by completing:
 - **15.1.1** A standard residency application through www.virmp.org.
 - **15.1.2** A statement of residency objectives and subsequent career goals.
 - **15.1.3** Official academic transcripts.
 - **15.1.4** Three letters of reference from individuals currently familiar with the applicant's professional status.
 - **15.1.5** A curriculum vitae.
 - **15.1.6** A GRE score less than five years old if admission to graduate school is sought.

16.0 APPENDICES

16.1 HOUSE OFFICER ROUNDS EVALUATION FORM

House Officer:		Date:		
Evaluator:				
	Evaluation E=Excellent G=Good N=Needs Improvement	<u>Comments</u>		
Case Selection				
Complexity of case				
Appropriate follow-up				
Content				
Format of presentation				
Discussion				
Conclusions				
Use of problem-oriented approach				
Delivery				
Clarity of speech				
Rate of delivery				
Effectiveness of Visual Prese	entation			
Use of visual aids				
Body language and enthusiasm				
Questions handled appropriately				
Additional Comments:				

16.2 VCS SEMINAR EVALUATION FORM

Presenter:	Date:			
Audience:				
Title/Topic:				
Evaluation Criteria:				
	Points	Evaluation		
Definition of subject: introduction, importance, clinical significance	0-5			
Organization	0-10			
Quality of material	0-10			
Presence: speaking ability				
Clarity	0-10			
Rate of delivery	0-10			
Enthusiasm, expressiveness	0-10			
Support Materials				
Handouts, manuscript	0-15			
Visual aids	0-5			
Appropriate Summary	0-5			
Presentation consistent with audience level	0-10			
Questions/discussion handled appropriately	0-10			
	Total			
Comments:				
Evaluator:				

16.3 HOUSE OFFICER LEAVE REQUEST

HOUSE OFFICER LEAVE REQUEST

I am requesting leave approval for the following dates and reasons:

1.	To attend the	meeting listed belo	ow.	
2.	To attend to p	ersonal activities (i	llness, family emergency,	vacation).
3.	To attend to o	fficial activities (ou	t rotations, special circums	stance requirements).
Intern	N/RESIDENT:	Print	Sign	Date:
Adviso	OR:	Print	Sign	Date:
BLOCK	MENTOR:	Print	Sign	Date:
CHAIR	HOC:	Print	Sign	Date:

16.4 HOUSE OFFICER BLOCK EVALUATION FORM (E-Value)

HOUSE OFFICER BLOCK EVALUAT	IOI	UN	141 (L	- vai	uc)
House Officer Evaluation Form in E-Value	Needs Improvement	Satisfactory	Good	Excellent	Not Applicable
Professional Ability	_				
Theoretical Knowledge					
Knowledge Application					
Skills					
Patient Care					
Thoroughness					
Individual Characteristics					
Communication with clinicians					
Communication with students					
Communication with staff					
Independent study & initiative					
Awareness of current literature					
Contribution to student education					
Performance under stress					
Ability to accept criticism					
Organizational skills					
Ability to work in a team					
Reliability					
Motivation					
Attendance at seminars & rounds					
Presentation at seminars & rounds					
Ability to make independent decisions					
Hospital Service					
Completion of duties					
Quality of work					
Emergency services duty					
Communication with veterinarians					
Client communication					
Referral letters & record keeping					
Acceptance of service & case responsibility					
Adherence to VTH protocol					
Strengths:					
Areas for Improvement:					