

Iowa State University Department of Veterinary Clinical Sciences Small Animal Rotating Internship Program

1. Overview:

This rotating internship program has been designed to provide in-depth training in Small Animal Clinical Medicine and Surgery and related basic and applied sciences. The program has been developed to provide interns with a comprehensive knowledge of medical and surgical conditions affecting animals. Our program strives to prepare interns for active careers in academia or specialty practice, and the caseload provides an excellent and broad experience over the duration of the program. The internship will provide advanced training for private practice, specialty internship or application to a residency program.

The primary mentors of the training program are faculty of the Department of Veterinary Clinical Sciences (VCS).

Clinical facilities of the Hixson-Lied Small Animal Hospital and Dr. W. Eugene and Linda Lloyd Veterinary Medical Center (Large Animal) will be the primary training location for the Iowa State University (ISU) portion of the internship.

2. Objectives

2.1 To provide advanced training in clinical problem solving and diagnostic and therapeutic techniques in the specialty field.

2.1.1 To become familiar with diseases afflicting veterinary patients and to be able to logically correlate all clinical data in order to formulate and execute correct treatment plans.

2.1.2 To provide a firm understanding of the underlying pathophysiological basis of disease.

2.1.3 To master the art and science of complete patient care, assess outcomes and to appreciate the economic and emotional factors involved in the health care of animals.

2.1.4 To develop the art of interpersonal communications for proper colleague and client relationships.

2.2 To provide didactic and tutorial teaching training and experience.

2.3 To satisfy the requirements for specialty college examination.

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.

3. **Prerequisites**

3.1 Candidates must have a DVM or an equivalent degree.

3.2 Candidates must have successfully completed the National Board examination or its equivalent in the certifying country; must be approved to practice veterinary medicine in the United States.

3.3 Candidates must be/become licensed to practice veterinary medicine in the state of Iowa prior to employment

3.4 Candidates must have the goal of practicing state of the art medicine and surgery or specialty board certification.

3.5 Candidates must have a satisfactory moral and ethical standing.

4 **Faculty Advisor**

4.1 The intern will be assigned to a faculty advisor (mentor) the first month of the program. This may be the same or a different person than the Program Director.

4.2 Responsibilities of the advisor/ mentor include:

4.2.1 The advisor will directly oversee the intern's training and act as a liaison with other faculty members in the College of Veterinary Medicine.

4.2.2 Direction and coordination of the clinical program.

4.2.3 Advice toward research, publications, and preparation for Specialty Board application.

4.2.4 Approval of requests by faculty for the intern to participate in teaching, research or other activities.

4.2.5 Advising on preparation and reviewing presentation performance of seminars and case rounds.

4.2.6 Professional guidance.

5.0 **House Officer Presentations & Rounds Programs**

The VCS Department offers House Officers several educational opportunities to enrich their training programs and obtain teaching experience. Some of these opportunities are in collaboration with other departments within the College. The menu of rounds and seminars is tailored to assist House Officers in literature review and board preparation

and to expose them to a broad range of clinical and academic experiences. The weekly VCS Seminar/Rounds Program requires attendance and participation by all House Officers while participation in other rounds is program dependent.

5.1 The **VCS Seminar/Case Presentations Program** is designed to provide House Officers the opportunity to receive and present interesting, unusual, or difficult clinical material utilizing a problem oriented approach to professional colleagues and to develop manuscripts for publication.

5.1.1 All House Officers will participate and give presentations on a rotating basis. These presentations are scheduled by the Chief Resident.

5.1.2 House Officer attendance is required at all sessions. Attendance will be taken at the beginning of each session.

5.1.2.1 Notify the Leader of the House Officer Committee when an absence is anticipated (due to vacation or out-rotations and when due to illness).

5.1.2.2 Excused absences include the following: illness, annual leave, attendance or participation in a continuing education program, presentation of a lecture, scheduled out-rotation or special service requirement per request of the advisor. All other absences are unexcused unless deemed excusable by the House Officer Advisor.

5.1.3 House Officers will be required to present an additional seminar if they have more than one unexcused absence during a program year.

5.1.4 **VCS Case Presentations** are designed to provide House Officers the opportunity to receive and present interesting, unusual, or difficult clinical case material utilizing a problem oriented approach to professional colleagues and to develop manuscripts for publication.

5.1.4.1 All House Officers will a minimum of **one case** presentation each year of their program.

5.1.4.2 Case selection should be approved by the House Officer's advisor or mentor well in advance of the presentation.

5.1.4.3 Case presentations should utilize the problem oriented approach, have good follow-up, include a discussion of the pertinent current literature and take approximately 20 minutes to present with an additional 5 minutes for discussion.

5.1.4.4 Members of the audience will complete evaluation forms giving comments on the quality of the presentation with suggestions for improvement. (*See appendix 15.6*)

5.1.5 **VCS Seminars** are designed to provide House Officers with the opportunity to research and present scientific information and then discuss the topic with professional colleagues.

5.1.5.1 A minimum of **one seminar** will be prepared and given by each House Officer in each year of their program. Some programs require two seminar presentations each year.

5.1.5.2 Topic selection should be focused and approved by the House Officer's advisor well in advance of the scheduled presentation date and prior to performing an in-depth literature search.

5.1.5.2.1 Topics might include a literature search in preparation for writing a research grant.

5.1.5.2.2 The presentation may be the results of a research project.

5.1.5.2.3 The topic might be an area of interest or one which will improve your expertise and understanding.

5.1.5.3 Seminar presentations of approximately 40 minutes are expected with an additional 10 minutes available for discussion.

5.1.5.4 Members of the audience will complete evaluation forms giving comments on the quality of the presentation with suggestions for improvement. (*See appendix 15.7*)

5.2 Seminar/Rounds Schedule and participation requirement:

<u>Type:</u>	<u>Frequency:</u>	<u>Commitment:</u>
VCS Seminar/Case Presentation	weekly (Thursday 8 a.m.)	required
Service Resident Rounds	per service	required
Service Rounds w/students	per program	required
Radiology-Pathology Rounds	monthly (Tuesday 8 a.m.)	required
Evidence based medicine Rounds	monthly (Tuesday 8 a.m.)	encouraged
Morbidity/Mortality Rounds	bimonthly (Tuesday 8 a.m.)	required
Student Grand Rounds	weekly (Friday 8 a.m.)	encouraged
Journal Club <small>(assigned service)</small>	weekly	required
Textbook Review Session	weekly	optional
Anatomic Pathology Rounds.	weekly as scheduled	encouraged

- 5.1.1 Attendance and participation is required as indicated unless the intern is assigned to active Emergency duty that day.
- 5.1.2 The faculty will make every effort to assist the Intern in attending these rounds.
- 5.1.3 Rounds and seminars are part of your educational enrichment. Other Seminar rounds for the College and the VMC will be attended as scheduling permits.

6.0 **Teaching Program**

- 6.1 Throughout the program interns will be viewed as role models by both professional students and staff. They should always present themselves in a professional manner.
- 6.2 The intern will participate in clinical instruction and evaluation of veterinary students assigned to clinics.
- 6.3 Other than seminars and rounds the Intern is not to be involved in any other teaching missions in the hospital without approval from the Internship Committee.
- 6.4 The intern will participate in preclinical didactic lecture and laboratory instruction as assigned by his/her advisor after approval of the Internship Committee.

7.0 **Board Certification**

- 7.1 An important credential in veterinary medicine is board certification in a specialty area. One of the objectives of the program is to guide the intern in selecting a specialty area for board certification.
- 7.2 Interns should seek faculty advice early in their program as applications to the VIRMP are due in the fall of each year. Resume, letter of intent and references are required for application. Publications and research experience are often helpful in obtaining residency positions.

8.0 **Clinical Program -Intern Year**

8.1 Internship Committee Members:

Michael Curtis, Lisa Olsen, Dana LeVine, Bianca Zaffarano,

8.2 Internship Learning Objectives: The specific objectives of the Internship Program are to provide the intern with the following opportunities:

- 8.2.1** To acquire advanced training in the diagnosis and treatment of disease in small animal medicine and surgery and emergency medicine.

8.2.2 To acquire advanced training in the acquisition of radiographic images and the accurate interpretation of these images and those obtained by imaging faculty and staff with ultrasound, CT and MRI.

8.2.3 To develop teaching skills, including small group interactive teaching techniques (student case rounds) and developing high quality didactic (lecture) formats with educational technology.

8.2.4 To prepare for a residency training program, for post-graduate study, or for entry into a high quality small animal veterinary practice.

8.3 The Clinical Program

Interns will rotate through services within the VMC for **52** weeks. The rotation schedule will be modified according to the intern and clinic needs.

Internship Year	
23 weeks ICU/ECC (26)	
22 weeks Required Rot: 8 wks medicine 4 wks ST surgery (2) 2 wks orthopedics 2 wk community practice 1 wk neurology 2 wks radiology 1 wk anesthesiology 1 wk clinical pathology (0)	6 weeks elective rotations*: Any required rotation <u>or</u> Dermatology Ophthalmology Oncology Pain management Rehabilitation Exotics Clinical pathology Special out-rotation
1 week orientation	2 weeks' vacation

- **See appendix 15.5* **Elective rotations.** Approval of special elective rotations must be granted by the Internship Committee chair (Drs. Curtis). Requests for rotations outside of the VMC must be submitted in writing at least 4 weeks prior to the desired date. This can be done via email. Approval for the activity will be granted after consultation with the Intern's faculty advisor and the written approval of the Internship Program Director. A case log for each outside experience will be maintained by the Intern and submitted along with an evaluation of the experience to the Internship Committee for approval within two weeks after returning

8.3.1 *As detailed above*

8.3.2 The intern will participate in the instruction of clinical students. Participation in CVM student laboratories will be assigned.

8.3.3 The intern will participate in house officer rounds, ward rounds, journal club, special topic conferences, seminars, and other scheduled

- conferences of the VMC. He/She will attend other scheduled seminars in the CVM as time permits.
- 8.3.4 The intern will present **1 seminar and one case report** (to faculty and house officers) on topics of interest to the intern during VCS Seminar/Rounds sessions.
 - 8.3.5 The intern is encouraged to attend and participate in continuing education meetings sponsored by the CVM or by local and regional veterinary organizations.
 - 8.3.6 The Intern will either develop 4 teaching cases with Power Point Slides for suitable for small group interaction, and/or...the Intern will prepare a manuscript suitable for publication (first author) in a refereed journal.
 - 8.3.7 The intern is encouraged to apply for specialty training in their area of greatest interest through the VMRIP matching program in the Fall.
 - 8.3.8 The intern is encouraged to prepare a research proposal; review it with his/her faculty mentor, and submit it for funding consideration.

Time Table for Internship Training Program Guide for Interns

Month	Program Requirement	Program Director Signature	Date
June/July	Faculty advisor assigned Orientation to the Hospital and Program		
August	Elective rotations selected		
September	First teaching cases or manuscript initiated 3 month Informal Review		
October	Career goal for next year defined		
November			
December	6 month progress review		
January	Two teaching cases completed and/or manuscript outline, literature search, and case identified where applicable		
February			
March			
April			
May	11 month progress review Intern seminar completed		
June	Exit interview with the committee Written exit program evaluation due		

	4 teaching cases and/or manuscript complete		
	Final checklist completed		
	Submission of Completion Checklist		
June 30	Program Completion		

8.4 Intern Responsibilities

Intern responsibilities include patient care (as directed by clinicians), rotating night and weekend duty, participation in clinical teaching of Junior and Senior students, and participation in rounds and seminars where indicated.

8.4.1 **Case Responsibilities:** The Intern will be assigned to receive cases at the discretion of the faculty member in charge on each service. The Intern will be the “clinician of record” on all assigned cases and will assume the responsibilities of the attending veterinarian. Interns are expected to consult with the faculty clinician whenever questions arise and provide timely communication with the referring veterinarian and pet owner. The faculty clinician will be available to give feedback on the Intern’s diagnostic and treatment plan for the patient as well as teaching and communication skills. If the Intern fails to communicate effectively with the faculty clinician in charge, then the privilege of “clinician of record” will be withdrawn.

8.4.2 **Intern-Student Interactions:** Interns will assist and supervise patient care delivered by students. It is very important to communicate clearly and precisely with students about tests to be performed, paperwork that needs to be filled out by the student, doses and frequencies of medication, all ICU orders, and items that should or should not be discussed by the student with the client. In many cases, it is appropriate to write your instructions clearly in the medical record or have the students write down your orders on a notepad and repeat them to avoid mistakes. **The client/patient information is privileged** and should **never** be discussed outside of the VMC (for example, in a local restaurant).

8.4.3 **Intern-Referring Veterinarian Interactions:** The Intern will communicate with referring practitioners by telephone and discharge letter in a timely and appropriate manner and document these communications in the medical record.

8.4.4 **Emergency Case Management:** Interns provide scheduled primary clinical emergency services during the day and on nights and weekends. Holiday duty has been randomly assigned throughout the year to Interns.

8.4.4.1 The Intern will have primary case responsibility for all Emergency cases until they have become stabilized and are deemed “non-emergency” cases by the Senior Clinical faculty. At this time, the case should be transferred to the appropriate Clinical Service.

8.4.4.2 If the Intern wishes to remain as the primary clinician, then it is the responsibility of the Intern to discuss this option with the Senior Clinician on the Service to whom the case would be transferred. If it is agreed by both parties that the Intern will keep the case, oversight will be provided by the Senior Clinician or his/her representative on the receiving service.

8.4.4.3 While we realize the benefits of following a case to its conclusion, it is not in the best interest of the Intern on Emergency duty to keep a non-emergency case at the expense of seeing and managing emergency patients.

8.4.4.4 **Finally, some case management guidelines include the following: Do not place nutritional support (esophagostomy tube, for example) or chest tubes without first calling in an internal medicine and/or a soft tissue surgery resident. The internal medicine resident should be contacted before nutritional support is initiated. Likewise, surgical back-up should be obtained before initiating an invasive procedure.**

9 Scholarly Activities

The Department of Veterinary Clinical Sciences encourages its interns to participate in scholarly activity such as literature reviews, and basic, applied or clinical research. To that end the intern is encouraged to:

- 9.3 Design a research project to address a specific question or problem in the discipline.
- 9.4 Write a research grant proposal that may be used to seek funding for the project.
 - 9.2.1 The anticipated timeline for completion of the proposal should be completed by December 1st.
 - 9.2.2 Proposals are to be submitted for funding.
- 9.3 Conduct the research according to the experimental design.
 - 9.3.1 Research is to be conducted during off-clinic time.
 - 9.3.2 Completion is expected during the internship.
- 9.4 Analyze and report the results of the project
 - 9.4.1 Research is to be presented to the VCS faculty and House Officers during seminar.
- 9.5 Publication of these results in a refereed journal is expected.
 - 9.5.1 A manuscript suitable for publication is to be completed prior to the conclusion of the program.

10 Facilities and Equipment

10.1 The College of Veterinary Medicine Teaching Hospital (VTH) is a fully accredited hospital (AAHA, AALAC) with full AVMA accreditation. The

facility encompasses the Iowa State Veterinary Diagnostic Laboratory, an accredited (AAVLD) full service laboratory providing clinical pathology, histopathology, immunohistochemistry, immunology, microbiology, virology and toxicology support. The VTH contains full service small and large animal medicine and surgery facilities.

10.2 Library and other Literature Resources

The Veterinary Medical Library, housed within the College of Veterinary Medicine building, contains both human and veterinary textbooks as well as bound serial publications. Parks library on main campus is easily accessible via daily transport of holdings between libraries upon request. An extensive collection of online journal subscriptions is available to the House Officers free of charge via the Interlibrary Loan/ Document Delivery service. Computer-based retrieval systems MEDLINE, CAB and AGRICOLA abstracts are available electronically. A wide selection of current journals is available in the library and online.

- 10.2.1 Each intern is required to be familiar with pertinent articles in the current literature. Reasonable expenses for photocopying are defrayed by the Hospital.

11 Evaluation and Reappointment

- 11.1 Following completion of each rotation a VMC Intern Evaluation Form (see appendix) will be filled out by each faculty member with whom the intern has been assigned.
- 11.1.1 The evaluation will be given to and maintained by the Internship Program Director.
- 11.1.2 Copies of the evaluation will be available for the intern and their advisor.
- 11.2 A written critique will be provided at least every 6 months by the advisor or section. The critique will cover:
- 11.2.1 Professional ability; to include theoretical knowledge and application of that knowledge, clinical skills, tutorial skills, and scholarly activity.
- 11.2.2 Hospital services; to include communication skills, patient care, medical record quality, emergency duty quality, and adherence to VMC protocol.
- 11.2.3 Personal characteristics; to include responsibility, initiative, interaction with faculty, staff and students, deportment and leadership
- 11.3 The intern will meet with his or her advisor on a quarterly basis to discuss their progress. A summary of the discussion will be signed by both advisor and House Officer.
- 11.3.1 In the case of an unsatisfactory performance the advisor and program director will develop an action plan to guide improved performance. The action plan must include the following elements:

- 11.3.1.1 A list of action items to be accomplished that are detailed, clear, and aligned with a timeline.
- 11.3.1.2 A specified date for follow-up evaluation.
- 11.3.1.3 A description of consequences if the action items are not completed by the designated timeline.
- 11.3.2 House officers that are evaluated as unsatisfactory and are currently working under an action plan are not eligible for a pay increase (usually July 1st). Once the house officer has made significant progress and the action plan marked as successfully completed, they could be eligible for a pay increase (usually January 1st).
- 11.4 In March of each year, the House Officer Committee will review the year's critiques. Following that review, the committee will make a recommendation to the Head of the Department of Veterinary Clinical Sciences to:
 - 11.4.1 Award a certificate upon satisfactory completion of the program.
 - 11.4.2 Notify the intern of unsatisfactory performance and failure to successfully complete the program.
 - 11.4.3 **Internship Certificate Requirements:**
 - 11.4.3.1 A certificate of successful Internship Completion will be awarded at the end of a 12-month internship period when the Internship Certificate Requirements are met and the Internship Completion form has been signed by the Program Director and the Internship Committee Members.
 - 11.4.3.2 The Intern must demonstrate competency in medical and surgical skills appropriate for Internship level of training documented by overall satisfactory evaluations by all faculty evaluators. Remediation is not possible.
 - 11.4.3.3 The Intern will attend all of the scheduled service and Hospital rounds as outlined in the document above.
 - 11.4.3.4 The Intern will present at least one, 45 minute seminar at the Thursday VCS Seminar Series. Topics are selected 3 months in advance, approved by the Faculty advisor, and scheduled with the medicine/surgery resident in charge of this activity. This is to be completed by May 31, 2011. Additionally the intern must present at least one time at M&M rounds and Medicine Topic rounds.
 - 11.4.3.5 The Intern will either develop 4 teaching cases with Power Point Slides for suitable for small group interaction, and/or...the Intern will prepare a manuscript suitable for publication (first author) in a refereed journal. Papers considered appropriate are review articles, case reports, and original research. The cases and/or the manuscript will be reviewed by the faculty advisor and approved by the Internship Committee. Completion of these tasks is required by June 15. If you are considering a residency and/or a future in academic medicine, it is strongly recommended that you develop 4

teaching cases **and** write a manuscript for publication in a refereed journal.

11.4.3.6 The Intern must complete an exit interview and written evaluation of the Internship Program by the end of June, 2011.

11.4.3.7 The Intern must complete and submit the final checklist to the Program (see appendix 15.9.)

11.4.3.8 The Intern must complete all clinical rotations, scheduled emergency duty, medical records, referral letters and client/referring veterinarian case communications.

11.4.3.9 Completion of a formal review with the Internship Committee will occur at 11 months of the 12-month program prior to receiving the certificate. Formal review will consist of a written evaluation by the Program Director and an interview meeting with the Director, Intern, and Faculty Advisor. An informal review consisting of a meeting with the Director, Intern, and Faculty Advisor will be performed after 3 and 6 months of the Internship Program. A review can be requested by the intern at any time.

11.5 The intern will be asked to make an assessment of their program with suggestions for improvement. The evaluation form will be handed out in May or June and must be returned before completion of that year in July

12 House Officer Committee

The committee is comprised of a representative of each house officer program, the VCS Head (ex officio), and the Director of the VMC (ex officio). It will be responsible for:

12.1 The selection of House Officers from the application pool (with the advice of the faculty of the sponsoring discipline).

12.2 Annual review of the House Officer's progress (in the ninth month of each year).

12.3 Annual recommendation for reappointment of the House Officer or program completion.

12.4 Program approval, renewal, oversight and establishment of policy.

13 Employment and Benefits

13.1 Iowa State University residents and interns are classified as adjunct, non-tenure eligible faculty and as such are governed by the faculty handbook (www.provost.iastate.edu/faculty/handbook/current)

13.2 Iowa State University offers a competitive salary and a comprehensive benefit package to house officers. Full faculty benefits are provided, including medical, dental, and professional liability (limited). House officers are encouraged to investigate personal professional liability insurance coverage. (<http://www.hrs.iastate.edu/hrs/files/Faculty-Benefit-Summary-2011.pdf>)

- 13.3 The annual salary for interns is approximately \$26,000.00. *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. Retirement contributions, social security, federal and state taxes are withheld from each paycheck.
- 13.4 As employees of the University interns are considered full-time adjunct faculty and earn 16.0 hours per month of vacation/annual leave (192 hours or 24 days/year) and 12.0 hours per month of sick leave.
- 13.4.1 Annual leave may only be taken/granted for the amount of time accrued.
- 13.4.2 Annual leave is to be taken when the house officer is not scheduled on clinic or emergency duty. Vacation requests must be made at least 2 weeks in advance of the desired vacation time.
- 13.4.3 After approval by the House Officer's advisor, requests must be made on the standard University Leave Form reviewed by the Program Director/Coordinator and signed by the program's Section Leader and the Chair of the Department of Veterinary Clinical Sciences or the Hospital Director.
- 13.4.4 Accrued vacation time must be used during the term of the appointment or it will be forfeited upon termination. Vacation must not be used during the final three weeks of the term of the appointment.
- 13.4.5 See appendix 15.5 for specific guidelines
- 13.5 A cell phone, desk, chair, place for book storage, and intern filing cabinet are also provided for each House Officer. A computer system is provided with word processing, spread sheet and presentation programs along with unlimited internet access and e-mail.
- 13.6 The Veterinary Medical Center operates year round. The intern will share with other house officers an emergency duty rotation. The rotation will commit the intern to a share of evening, weekend and holiday duty on a scheduled basis.

13.7 Consultation Policy (Outside Employment)

Concurrent employment of interns at a site other than Iowa State University, College of Veterinary Medicine during their program is allowed provided the activity is approved by the House Officer's advisor and the program director and a *CVM Consultation Request Approval Form* is completed and approved by the department chair and the college dean prior to any consulting activities.

14 Applications

- 14.1 Candidates may apply for the Internship by completing:
- 14.1.1 A standard residency online application (V.I.R.M.P. application).
- 14.1.2 A statement of objectives for the internship and subsequent career goals.
- 14.1.3 A transcript of his/her academic record.

- 14.1.4 Three letters of reference from individuals currently familiar with the applicant's professional status.
- 14.1.5A curriculum vitae
- 14.2 Selection is based on:
 - 14.2.1 The above documents.
 - 14.2.2 Interviews may be required.
- 14.3 For more information about this program, please contact Dr. Michael Curtis, Iowa State University, College of Veterinary Medicine, Department of Veterinary Clinical Sciences, 1600 South 16th Street, Ames, Iowa 50011-1250. (Telephone 515-294-4900; email: mcurtis@iastate.edu).
- 14.4 Iowa State University does not discriminate on the basis of race, color, age, religion, national origin, sexual orientation, gender identity, sex, marital status, disability or status as a U.S. veteran. Inquiries can be directed to the Director of Equal Opportunity and Diversity, 3680 Beardshear Hall, (515) 294-7612.

15 Appendices

- 15.1 Faculty in support of the Program
- 15.2 Code of Conduct & Collegiality
- 15.3 Communication Tree
- 15.4 Consultation Request
- 15.5 House Officer Leave Request (in VCS office)
- 15.6 House Officer Rounds Evaluation Form
- 15.7 VCS Seminar Evaluation Form
- 15.8 House Officer Evaluation Form
- 15.9 Checklists for internship completion and clinical competencies

15. 1 Faculty in Support of the Internship Programs:

Anesthesiology

Stefano Di Concetto, DVM, Diplomate ACVAA
Dean H. Riedesel, DVM, PhD, Diplomate ACVA
Bonnie H. Kraus, DVM, Diplomate ACVS, Diplomate ACVAA
Jennifer Bornkamp, DVM

Cardiology

Jessica Ward, DVM, Diplomate ACVIM (Cardiology)
Wendy A. Ware, DVM, MS, Diplomate ACVIM (Cardiology)

Dermatology

Darren Berger, DVM, Diplomate ACVD
James O. Noxon, DVM, Diplomate ACVIM (Internal Medicine)
Diana Miller, DVM

Updated 2015 CSH

Diagnostic Imaging

Kristina G. Miles, DVM, MS, Diplomate ACVR

Elizabeth A. Riedesel DVM, Diplomate ACVR

Emergency and Critical Care Medicine

Michael Curtis, DVM, PhD, Diplomate ACVA

Lisa Olsen, DVM, Diplomate ACVECC

Internal Medicine

Albert E. Jergens, DVM, PhD, Diplomate ACVIM (Internal Medicine)

Chad Johannes, DVM, Diplomate ACVIM (Internal Medicine and Oncology)

Dana LeVine, DVM, PhD, Diplomate ACVIM (Internal Medicine)

Jean-Sebastien Palerme, DVM, Diplomate ACVIM (Internal Medicine)

Brett Sponseller, DVM, PhD, Diplomate ACVIM-LA

Laura Van Vertloo, DVM, Diplomate ACVIM (Internal Medicine)

David Wong, DVM, MS, Diplomate ACVIM-LA, ACVECC

Neurology

Rodney Bagley, DVM, Diplomate ACVIM (Neurology), Department Chair (practice limited to consultation)

Nicholas Jeffery, BVSc PhD, Diplomate ECVN, ECVS, FRCVS (spinal surgery)

Oncology

Leslie E. Fox, DVM, MS, Diplomate ACVIM (Internal Medicine)

Ophthalmology

Gil Ben-Shlomo, DVM, PhD, Diplomate ACVO

Rachel Allbaugh, DVM, MS, Diplomate ACVO

Primary Care

Bianca Zaffarano, DVM

Brenda Mulherin, DVM, Diplomate AVDC

June Olds, DVM

Bryce Kibbel, DVM

Joyce Carnevale, DVM

Surgery -SAS

Karl Kraus, DVM, Diplomate ACVS

Mary Sarah Bergh, DVM, MS, Diplomate ACVS-SA, Diplomate ACV Sports Medicine

Cheryl Hedlund, DVM, MS, Diplomate ACVS

William D. Hoefle, DVM, MS, Diplomate ACVS

Louisa Ho, DVM

James P. Toombs, DVM, MS, Diplomate ACVS

Surgery – Equine

Scott McClure, DVM, PhD, Diplomate ACVS

Larry Booth, DVM, MS, Diplomate ACVS

Stephanie Caston, DVM, Diplomate ACVS-LA

Kevin Kersh, DVM, Diplomate ACVS-LA

Therigenology

Swanand Sathe, BVSc. MVSc. MS Diplomate ACT

Tyler Dohlman DVM MS Diplomate ACT

Patrick Phillips DVM Diplomate ACT

Nyomi Galow-Kersch, DVM

15.2 **Code of professional conduct**

A code of conduct is meant to help guide professionals in proper interaction with other professionals. No document can be all inclusive or specific. This list is meant to direct a professional veterinarian, or veterinary student, toward proper conduct and interactions within the hospital and college.

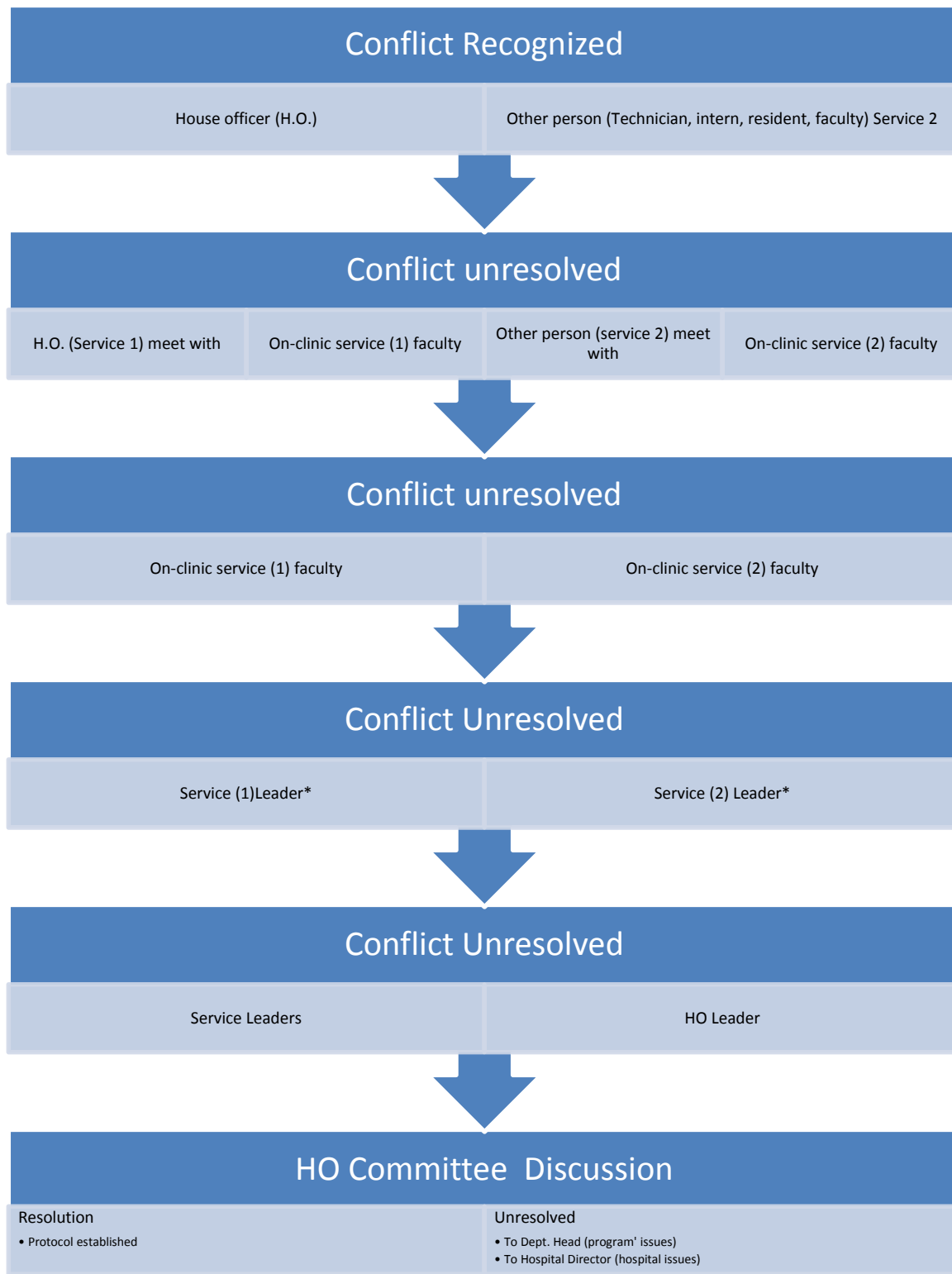
1. Each clinician (faculty, residents, and interns) has numerous interactions with veterinary students and should realize that they are role models for these students. Professional attire and language, and appropriate interactions with referring veterinarians are expected at all times. All clinicians must take care to never use denigrating or insulting language when referring to other veterinarians including referring veterinarians, or to students.
2. Clinicians should refer to each other and other veterinarians as “Doctor” while in the hospital and should instruct students to do the same.
3. All clinicians should strive for the best care for all patients in our hospital. It is inevitable that there will be differences of opinion as to what that best care entails. There is also the possibility that a clinician, for whatever reason, is not caring for a patient to a standard appropriate for this hospital. If a clinician feels that a patient is not cared for appropriately or to a certain standard, then that clinician should discuss their concerns with the attending clinician in a collegial manner (in private venue, not in front of colleagues or students).
4. It is appropriate to collegially discuss the care of cases in case rounds and in the presence of the attending clinician on the case. It is inappropriate to question the care of a patient by another clinician in the presence of clients, students, house officers, referring veterinarians, or attending clinicians outside of case rounds or without the presence of the attending clinician. This is a severe breach of medical ethics and may warrant corrective measures.
5. Students and clinicians come from diverse backgrounds and cultures. It is inappropriate to discuss another professional’s personal life while conducting hospital business.

College of Veterinary Medicine Collegiality Policy:

All CVM employees have a responsibility to maintain a positive workplace that is free of discrimination and harassment. Collegial interactions with all co-workers in the CVM are required. Faculty and staff are expected to model safe and fiscally responsible behavior for students, and are expected to be in compliance with established policies of the CVM and Iowa State University (including the ISU Code of Computer Ethics and Acceptable Use, biosafety regulations, OSPA, purchasing, etc.). All faculty and staff are expected to participate in the annual performance evaluation process.

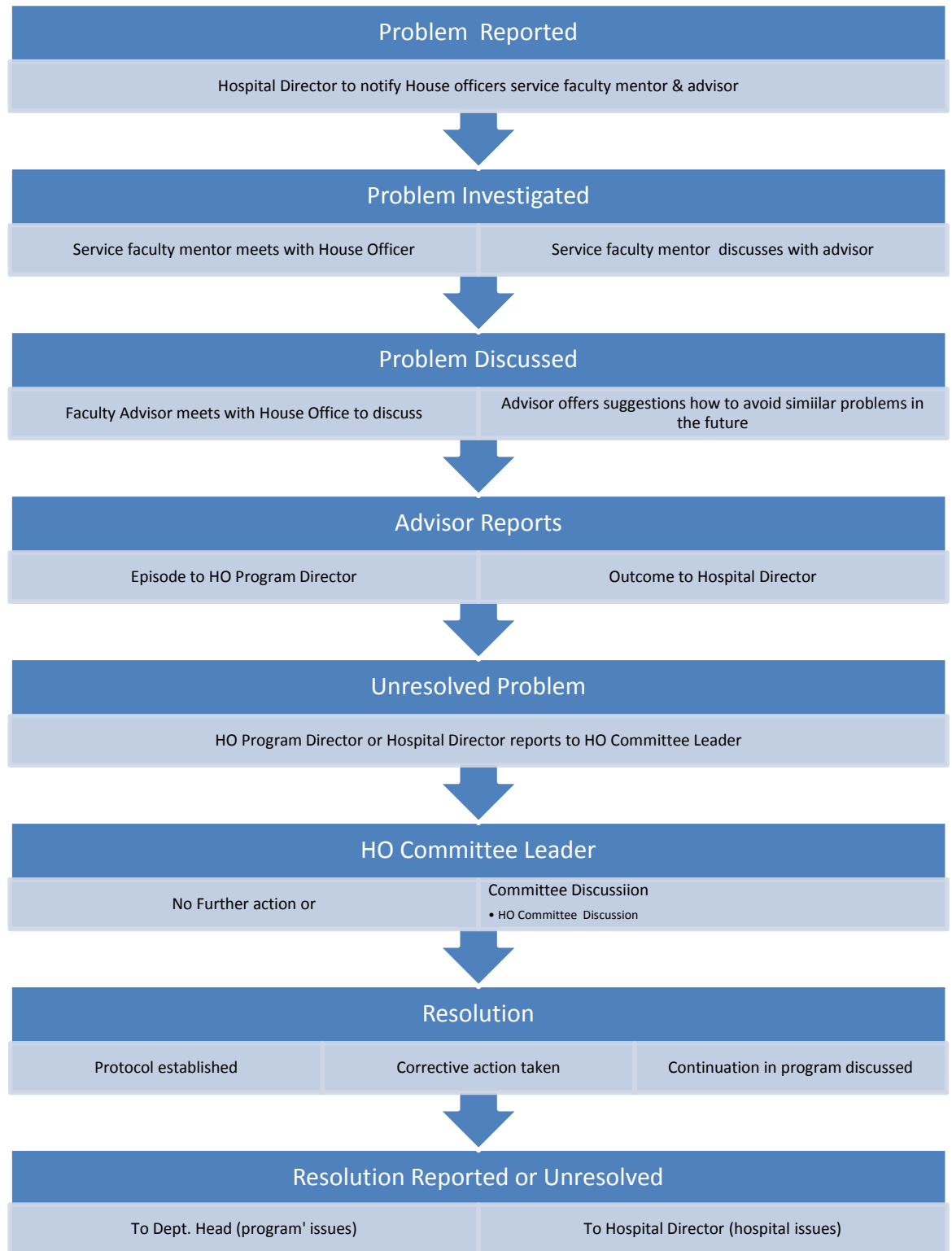
15.3 **Communication/ Conflict Pathway to Resolution:**

15.3.1 Personnel interactions



*Advisors are apprised when deemed appropriate.

15.3.2 Client Complaint via evaluation of service or other means to Hospital Director or other Administrators:





College of Veterinary Medicine
Iowa State University

CONSULTING REQUEST APPROVAL FORM

This form must be approved by the Department Chair/Unit Director and Dean prior to consulting activity.

Name _____

Date of this Request _____

Proposed Date of Consulting Activities _____

Who are you consulting for? _____

Where will you be consulting? _____

What is the purpose of the consulting activity?

Reminder: All full-time faculty and P&S staff are required to disclose potential conflicts of interest annually, or whenever their situation changes, whether they think they have a conflict of interest or not. Using the **Access Plus** system, faculty and P&S staff should go to the Employee tab and click on "COI Disclosure" and fill in the **Conflict of Interest Disclosure Form**. If you have any questions, please review the COI policy at: www.provost.iastate.edu/COI/

APPROVALS

Department Chair/Unit Director

College Dean

15.5 Leave authorization forms are available in the VCS office.

VCS/VMC ABSENCE/OVERTIME REQUEST		
NAME _____	DATE _____	
Beginning Date of Leave _____	Last Date of Leave _____	
NUMBER OF HOURS ABSENT _____		
<input type="checkbox"/> Vacation Leave	<input type="checkbox"/> Sick Leave	<input type="checkbox"/> FMLA
<input type="checkbox"/> Converted Vacation	<input type="checkbox"/> Emergency Leave	<input type="checkbox"/> Leave w/o pay
<input type="checkbox"/> Comp Time Leave	<input type="checkbox"/> Funeral Leave	
<input type="checkbox"/> Authorized Travel	<input type="checkbox"/> Other _____	
EMERGENCY PHONE NUMBER _____		

OVERTIME		
<input type="checkbox"/> Comp Earned (Med Rec Required)	<input type="checkbox"/> Comp Pay Out (Med Rec Required)	
TOTAL COMPENSATORY HOURS WORKED _____		
Employee's Signature: _____		
APPROVED: Supervisor _____	Date _____	
Chair/Director _____	Date _____	

Guidelines for Scheduling Leave:

The procedure for requesting **vacation** is as follows:

1. Determine the times/days for your absence.
2. Confirm the time and dates with your program director and advisor.
3. Fill out an Absence Request card (sample enclosed) *two weeks in advance of your planned vacation day(s)*.
4. Have the card signed by your program director.
5. Give the card to the person in charge in the Hospital Director's Office
6. Inform the reception desk of your absence and the dates.
7. Place a red card in your message slot at the front desk indicating you are not in the clinic.

The procedure for requesting an approved **out-rotation** is similar:

1. Approved out-rotations are considered authorized leave.
2. Notify advisor and program director well in advance of your intent to participate in an out-rotation.
3. Organize the rotation with an approved program and mentor at the out-rotation location with the assistance of your advisor &/or program director.
4. Obtain final approval of the program director at least four weeks in advance of the rotation.

15.6 VCS House Officer Rounds

Case Presentation Evaluation Form

House Officer: _____

Date: _____ Topic: _____

Evaluation

Comments

E = excellent

G = good

N = needs improvement

Case Selection

Complexity of case _____

Appropriate case follow-up _____

Content

Format of presentation (complete, logical, appropriate length) _____

Use of problem-oriented approach (data or evidence to support important points) _____

Knowledge of subject (well researched, accurate, comfortable, question response) _____

Discussion (relevance, good references, accurate) _____

Conclusions _____

Delivery

Clarity of speech (mumbles, clear, pronunciation, vocalized pauses [uh, um, well, so, etc.]) _____

Rate of delivery (too fast, too slow) _____

Eye contact (consistent, entire audience, notes) _____

Body language/enthusiasm (nervous, relaxed, self-confidence) _____

Effectiveness of presentation

Use of visual aids (spelling, wordiness, colors, clarity, appropriate images, organized) _____

Professionalism (attire, appropriate humor, self-confident) _____

Questions handled appropriately _____

Additional Comments:

Evaluator: _____

15.7 Seminar evaluation:

VCS Seminar Evaluation

Presenter: _____ Date: _____

Audience: _____

Title/Topic: _____

Evaluation Criteria:	<u>Points</u>	<u>Evaluation</u>
1. Definition of Subject: introduction, importance, clinical significance	0-5 pts	_____
2. Organization:	0-15 pts	_____
3. Quality of material, scientific depth	0-15 pts	_____
4. Presence: Speaking ability		
a. Clarity	0-10 pts	_____
b. Rate of delivery	0-10 pts	_____
c. Enthusiasm, expressiveness, mannerisms	0-10 pts	_____
5. Visual aids: slides & text, images, graphs	0-10 pts	_____
6. Appropriate summary?	0-5 pts	_____
7. Presentation consistent with audience level?	0-10 pts	_____
8. Questions/discussion handled appropriately?	0-10 pts	_____
	Total	_____

Comments: _____

Evaluator: _____

15.8 House Officer Evaluation Form:

Intern Evaluation

Intern: _____ Rotation: _____ Dates: _____

	Excellent	Good	Satisfactory	Needs Improvement	Unsatisfactory	
						Remarks
Professional Ability						
Theoretical knowledge						
Application of knowledge						
Professional Development						
Awareness of current literature						
Ability to make independent decisions						
Attendance at seminars and rounds						
Participation in rounds and seminars						
Contribution to student education						
Personal Characteristics						
Quality of faculty interactions						
Quality of intern-resident interactions						
Quality of student interactions						
Quality of staff interactions						
Independence and initiative						
Maturity						
Motivation						
Attitude and enthusiasm						
Leadership qualities						
Hospital Service						
Completion of duties						
Quality of work						
Acceptance of service responsibilities						

Work towards service objectives						
Record keeping						
Communication with referring veterinarians						
Communication with clients						
Overall Intern Evaluation						
Miscellaneous Comments and Constructive Suggestions for Improvements						
<p>This is my individual evaluation of the intern following the intern's completion of a rotation on my service. The evaluation has been completed with the intent of providing constructive suggestions to assist the positive progress of the intern.</p>						
<p>Evaluator (Print):</p>						
<p>Evaluator Signature:</p>						
<p>Date of Evaluation:</p>						
<p>After completing the evaluation, please return this form to Dr. Curtis, Intern Committee Co-Chair. The evaluation will then be forwarded to the intern and the intern's advisor.</p>						

15.9 Intern Completion Checklist

**Iowa State University, Rotating Internship in Small Animal Medicine and Surgery
Program Final Completion Checklist**

Intern Name: _____

Faculty Advisor: _____

Program Director: _____

- Rotation Completion Checklist: total of 52 weeks

- 1. Required Internship Rotations: 17 weeks
 - a. 4 weeks of Internal Medicine
 - b. 2 weeks of Soft Tissue Surgery
 - c. 2 weeks of Radiology
 - d. 2 weeks of Primary Care
 - e. 2 weeks of Orthopedic Surgery
 - f. 1 week of Anesthesiology
 - g. 4 weeks of required Medicine elective
 - h. 2 weeks of Neurology

- 2. Emergency Medicine and Critical Care: 26 weeks

- 3. Elective Internship Rotations: 7 weeks
 - a. ___ weeks of _____
 - b. ___ weeks of _____
 - c. ___ weeks of _____
 - d. ___ weeks of _____

 - e. Outside elective rotation date and location _____

- 4. Vacation: 2 weeks

- First author manuscript and/or 4 teaching cases with Power Point Slides suitable for presentation in small groups. Completed two weeks before program completion.

Title of manuscript: _____

Authors: _____

Intended Journal for publication: _____

And/or...Completed 4 teaching cases for small group presentation

Titles of Cases:

- a. _____
- b. _____
- c. _____
- d. _____

- Intern Seminar

Title: _____

Date given: _____

- Completion of an informal review will occur in December, 2010 (or 6 months after starting date).
- Completion of a formal review will occur in May or June, 2011 (or 11 months after starting date).
- Completed scheduled emergency duty, medical records, client/referring veterinarian communications, and referral letters.
- Submit updated CV to Program Director.
- Submit completed Checklist to Program Director.
- Complete an exit interview with the Internship Committee.

Clinical Skills Checklist for Interns

This is a guideline list of procedures that you should have seen or done at least once during your Internship year. It is divided into competencies (you should have done this many times and know about potential adverse effects, etc.) and procedures that you may do only once or a few times, but should be quite familiar with (gastroenteroscopy). Obviously, you will obtain urine via cystocentesis many times and may perform gastroenteroscopy once. If you have not seen or done a procedure on the checklist by mid-year, please see Dr. Deitz or Fox to assist you in seeing or doing the procedure.

Clinical Competencies

1. Complete physical examination
2. Complete neurological exam
3. Phlebotomy
4. Blood pressure determination
5. Cystocentesis
6. Initial wound management
7. In-house laboratory skills (after hours support)
8. IV catheter placement
9. Indwelling urinary catheter placement
10. Computer skills (word processing, Power Point slide preparation, electronic medical record)
11. Direct and indirect ophthalmoscopy
12. Arthrocentesis
13. Abdominocentesis
14. Thoracocentesis
15. CPR techniques and strategies
16. Bone marrow aspiration and core biopsy
17. Tumor fine needle aspiration and cytology

Updated 2015 CSH

18. Clinical staging of oncology patients
19. Suture Laceration
20. Place Robert Jones, metasplint, spica splint, cast
21. Treat open fracture/shearing wound
22. Pubmed and computer-assisted searches
23. VIN use
24. Obtain excellent quality thoracic, abdominal, and extremity radiographs

Other Procedures

1. Gastroenteroscopy and biopsy
2. Colonoscopy and biopsy
3. PEG tube placement
4. Esophagostomy tube placement
5. Bronchoscopy and bronchoalveolar lavage
6. ECG technique and interpretation
7. CSF tap
8. Transfusion therapy
9. Approach to the stifle of a dog or cat
10. Laparotomy, abdominal exploratory, closure (two)
11. Spay and Castration (two of each)
12. Chest tube placement and management
13. Venous access port sampling
14. TPN calculation and administration
15. Nasopharyngeal tube placement with nutritional requirement calculation