SMALL ANIMAL SURGERY RESIDENCY

Supplement

I. Introduction

The Small Animal Surgery Residency is designed to 1) train the resident proficiently in the art and science of veterinary surgery, 2) fulfill requirements for application to take the certifying examination of the American College of Veterinary Surgeons following the residency training, and 3) help prepare the resident to successfully complete the certification examination for diplomate status in the ACVS.

Residency training is the direct responsibility of all faculty in the Small Animal Surgery Section and, to a lesser degree, all faculty in the Department of Small Animal Clinical Sciences.

II. Objectives

As Departmental Program

III. Prerequisites

As Departmental Program

Candidates should be dedicated to the pursuit of diplomate status in the American College of Veterinary Surgeons.

IV. Resident Advisor

A Resident Advisor appointed by the Department Head and will be responsible for direction and coordination of clinical duties and teaching assignments; advise on establishing a graduate committee; advise on research (ideas, funding, implementation), publications, and preparation for board examination; and counseling. Additional responsibilities include monitoring development, continuity and progress of the Residency activities described herein. Coordination of the resident's responsibilities and activities with the resident's Graduate Advisor is expected. The advisor is, finally, responsible to the Small Animal Surgery Section for approval of each year's schedule of the resident's program.

V. Graduate Advisor

A Graduate Advisor (Major Professor) will be selected by the end of the first Fall Semester. It is preferable that the graduate advisor not be the same individual as the resident advisor although exceptions are possible. The Graduate Advisor and graduate committee will be primarily responsible for direction and approval of the graduate program.
VI. **Resident/Intern Committee**

As Departmental Program

VII. **Residency Program**

A. **First Year**

1. Clinical Program

   a. 1 week: orientation  
      2 weeks: internal medicine/neurology  
      39 weeks: surgery  
      3 weeks: radiology/pathology  
      3 weeks: anesthesia/research proposal  
      2 weeks: research proposal/project preparation  
      2 weeks: open

   52 weeks: total

   b. The initial week will consist of orientation along with other beginning residents and interns. Timely arrival at Virginia Tech is imperative to include this week for a coordinated entry into the residency program.

   c. Two weeks are allotted to Internal Medicine and three weeks to Neurology rotations which should fulfill the ACVS residency requirement for this discipline.

   d. The majority of the first year will be spent rotating between Orthopedic and Soft Tissue surgery. The resident will be under direct supervision of a faculty member or chief resident in receiving, evaluating, treating, and performing follow-up evaluation of surgical patients. The resident will assist in supervision of interns and/or students assigned to these cases. Active participation in rounds, consultations, demonstration of surgical techniques, client communications, and student evaluations is expected. The resident will be responsible for independently conducting daily rounds on assigned topics when requested. The resident will be excused during the rotation to attend classes and/or labs, but every effort should be made to organize one's graduate schedule to avoid conflict with rounds, seminars, or clinically productive periods. Service clinicians will be notified in writing of the resident's class schedule at the beginning of each clerkship. Attendance at weekly faculty/resident/intern and necropsy rounds is encouraged when hospital duties permit.
e. A 3-week rotation is given to radiology/pathology. Radiology rounds will be attended starting at 8:00 a.m. and special procedures or files review will be conducted the remainder of the morning. Necropsy rotation will be attended from 1:00-5:00 p.m. This rotation will complete the resident's ACVS requirements for radiology and 60% of the ACVS requirements for pathology. Remaining pathology hours may be completed through graduate credit courses.

f. A 3-week rotation given to anesthesiology. The resident will spend from 8:00-9:30 a.m. in Anesthesiology Clerkship rounds and from 10:00-12:00 noon in directed study toward certifying board preparation supervised by the Anesthesiologist. An examination may be given by the Anesthesiologist on completion of this rotation. Successful completion will insure compliance with the ACVS Residency Guidelines. Time from 1:00-5:00 p.m. will be given to independent preparation of the manuscript requirement.

g. Two weeks are scheduled for the resident to complete a research proposal described in VII.A.3.c. below.

h. Two weeks of nonscheduled activity are available to the resident. This activity must be approved by the Advisor or duty clinician to assure proper coordination of service activities.

i. A 3-week rotation through Small Animal Medicine Section will be incorporated, at the discretion of the Surgery Section, into the first year for any resident not having completed a rotating internship at an academic institution or private specialty referral hospital.

j. The resident, in conjunction with the Resident Advisor, will submit to the Section Chief a proposed clinical schedule for the second year of residency by June 1st.

2. Didactic Teaching

a. As Departmental Program (Instruction)

b. A schedule of surgical laboratory attendance will be prepared annually by the course leaders to describe the resident's laboratory responsibilities within the preclinical veterinary curriculum. Two lectures will be chosen on the advice of the Resident Advisor, prepared and delivered by the resident each of the three years. In most cases, the same lectures will be given each year. However, additional lectures may be assigned at the request of the resident and resident advisor.
3. Research and Scholarly Activities

a. Seminar Program: as Departmental Program. Two additional seminar presentations are required over the course of the 3-year program beyond that accounted for by the Departmental Intern/Resident Seminar Program. These additional seminar presentations may be acquired by presentation at SEVSS, VOS, Soft Tissue or ACVS meetings or through CE presentations to veterinarians.

b. A suitable manuscript satisfying requirements of the ACVS will be written and submitted to a refereed journal. A clinical study which fulfills certain criteria may be appropriate (see ACVS Information Brochure). The resident should consult faculty surgeons for ideas and materials applicable. Sixty to eighty hours have been scheduled during the first year to complete this requirement (see VII.A.1.f.).

c. A surgical research project must be written as a proposal and submitted to a funding source. If funded, this project could become the basis for the Graduate Degree thesis requirement in the Graduate Program (VII.A.4.a.). If not immediately funded, the project must be redesigned under the guidance of the resident's graduate committee and resubmitted. Two weeks have been allocated to literature review and preparation of this proposal (VII.A.1.g.).

d. Funding will be sought for the resident to attend the A.S.I.F. Basic Orthopedic Course at Ohio State University if not previously attended.

4. Graduate Program

a. As Departmental Graduate Program

b. Coordination of the residency requirements (80 hours of pathology, etc.) with graduate requirements and credits are a program priority to maximize the resident's exposure to clinical material. However, the graduate program is distinct from the residency program. The resident will select a Graduate Advisor (Major Professor) and a Graduate Committee and present an outlined plan of graduate study to the Committee, the Resident Advisor and the Department Head for agreement. The resident will prepare a research proposal as described in VII.A.3.c. above.

c. Adherence to VMS graduate program requirements is expected and is the responsibility of the resident/graduate student, major professor and department head.
B. Second Year

1. Clinical Program

   a. 36 - 39 weeks: surgery
      5 - 8 weeks: research/scholarly activity
      3 weeks: elective: Ophthalmology, Radiology, Specialty Medicine, or equivalent
      3 weeks: elective: Area of primary interest
      2 weeks: open

      52 weeks: total

   b. The resident will rotate equally between Orthopedic and Soft Tissue Surgery over the three year residency under direct supervision of clinicians. Responsibilities will be similar to the first year with increased emphasis given to primary surgical responsibilities on hospitalized patients.

   c. The research/scholarly activity time assigned will allow the resident to begin work on the research proposal submitted in year one (see VII.B.3.c.). This time may also be used for graduate credit as Research and Thesis (VMS 5994).

   d. The resident may elect to rotate through an in-house specialty rotation or arrange an equivalent rotation elsewhere. The elective must be approved by the Advisor.

   e. A 3-week elective in a special area of interest is permitted, preferably in the latter part of the second year (during the first session of the Summer Semester to avoid class schedule conflicts). This elective must be approved by the Resident Advisor but does not have to be decided at the time of clinical schedule submission (VII.A.1.j.).

   f. Nonscheduled activity is arranged as for the first year. (VII.A.1.h)

   g. As in VII.A.1.j. above, the resident will submit to the Section Chief a proposed third year clinical schedule by June 1st.

2. Didactic Teaching

   a. As Departmental Program (Instruction)

   b. A schedule of surgical laboratory participation will be distributed and two lectures will be prepared and delivered in the second year as described in VII.A.2.b.
3. Research and Scholarly Activity

a. Seminar Program: as Departmental Program. Two additional seminar presentations are required by ACVS over the course of the 3-year program beyond that accounted for by the Departmental Intern/Resident Seminar Program. These additional seminar presentations may be acquired by presentation at SEVSS, VOS, Soft Tissue or ACVS meetings or through CE presentations to veterinarians.

b. Manuscript revision from VII.A.3.b. will be completed based on reviewer's comments and resubmitted for publication.

c. Four weeks are assigned for the resident's research/thesis and may be scheduled with the approval of the Advisor at any time during the second year. Per VII.A.3.c., an unfunded research proposal will be redesigned and resubmitted during this time. If research is unfunded, only two weeks will be allotted to this activity with the remaining two weeks carried over to year three in order to complete the research/thesis requirement. Two weeks of clinical surgery rotation will be brought forward from year three to balance the program.

4. Graduate Program

The resident's graduate committee becomes responsible for monitoring the resident's graduate studies and progress for the remaining two years based on VII.A.4.b. above. The resident should make every effort to coordinate the graduate program with the clinical residency (e.g., integrate Seminars in Veterinary Medical Sciences [VMS 5944], Resident Seminars [Departmental Program], manuscript requirements [VII.A.3.b.], and presentations at regional meetings). Additionally, the resident should plan to complete as many College and Departmental Graduate requirements as possible during the second year and Fall Semester of the third year to permit adequate time for graduate thesis writing and subsequent manuscript preparation.

C. Third Year

1. Clinical Program

a. 27-30 weeks: surgery
   6 weeks: chief resident service
   3-6 weeks: elective
   12 weeks: research/scholarly activity
   1 week: open
   52 weeks: total
b. The resident will be given increased responsibility in overall service activities while rotating between Orthopedic and Soft Tissue surgery under the supervision of faculty clinicians.

c. The resident may function as chief resident and attending clinician for 6 weeks, equally divided between Orthopedic and Soft Tissue surgery. Appointment to chief resident is made by recommendation of the section to the Hospital Board and is based on satisfactory progress in the residency program. A faculty surgeon will be assigned to consult with the resident on a daily basis and oversee the resident's activities to insure that proper service activities and student teaching are rendered. Chief resident duties should be completed consecutively in the second and/or third quarters of the third year.

d. Twelve weeks are available for completion of graduate degree research, thesis writing, and manuscript preparation.

e. Unscheduled activity is arranged as for the first year.

2. Didactic Teaching

a. As Departmental Program (Instruction)

b. The laboratory schedule and didactic lectures will be prepared as for VII.B.2.b.

3. Research and Scholarly Activities

a. Seminar Program: as Departmental Program. Two additional seminar presentations are required over the course of the 3-year program beyond that accounted for by the Departmental Intern/Resident Seminar Program. These additional seminar presentations may be acquired by presentation at SEVSS, VOS, Soft tissue or ACVS meetings or through CE presentations to veterinarians.

b. Twelve weeks are allocated for completion of the resident's research and thesis writing. A manuscript resulting from the resident's research and graduate thesis must be completed and submitted to a refereed journal (see VII.C.1.e.). The resident is expected to submit the finished manuscript abstract to the Annual ACVS Resident's Research Competition.

c. The resident may be funded to attend the Annual Meeting of the ACVS if Departmental funds are available. Resident presentation of research data at the Annual Meeting of the ACVS will positively influence the funding priority. The resident should present research data at the SEVSS meeting
in April if similar data is not presented to the ACVS during this year. Funding will be sought.

4. Graduate Program

The resident should coordinate VMS 5994, Research and Thesis (9C), with Chief Resident responsibilities and the elective rotation to avoid class schedule conflicts during these times of maximum responsibility.

VIII. Surgery Board Examination Eligibility

A. As ACVS Information Brochure Requirements

B. As ACVS Residency Program Guidelines

C. A Surgical log as described in the ACVS Information Brochure will be maintained by the resident and reviewed/signed by the Resident Advisor annually.

D. This residency program fulfills requirements for application to take the certifying examination of the ACVS. Applications and case logs must be submitted to the ACVS before August 1st of each year. Application should, therefore, be possible as soon as the full training period has been completed.

IX. Certificate Of Residency

A Certificate of Residency will be issued when the above program has been completed as described. Completion of the Master of Science degree is considered necessary to fulfill the residency program and to receive a Certification of Residency.

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