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 (LVMC) 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) in 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. **House Officer Presentations & Rounds Programs**

The LVMC 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 LVMC Seminar/Case Presentation Program requires attendance and participation by all House Officers while participation in other rounds is program dependent.

5.1 The **LVMC House Officer 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 Resident responsible for coordinating these presentations.

5.1.1.1 All presentation topics are to be approved by the House Officer’s advisor **1 month** prior to the scheduled presentation.

5.1.1.2 All presentations are to be reviewed by the advisor or appropriate topic mentor **1 week** prior to the presentation to allow the House Officer time to make the recommended modifications.

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 Chair 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, and scheduled ICU/ECC swing shift, 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 **LVMC House Officer 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 complete 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 15 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 F*)

5.1.5 **LVMC House Officer 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 (*see section 8 for specific program requirements*).

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 G)*

5.2 Seminar/Rounds Schedule and participation requirement:

<table>
<thead>
<tr>
<th>Type:</th>
<th>Frequency:</th>
<th>Commitment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LVMC HO Seminar/Case Presentation</td>
<td>weekly (Thursday 8 a.m.)</td>
<td>required</td>
</tr>
<tr>
<td>Intern Education Rounds</td>
<td>weekly</td>
<td>required</td>
</tr>
<tr>
<td>Service Resident Rounds</td>
<td>per service</td>
<td>required</td>
</tr>
<tr>
<td>Service Rounds w/students</td>
<td>per program</td>
<td>required</td>
</tr>
<tr>
<td>Radiology-Pathology Rounds</td>
<td>monthly (Tuesday 8 a.m.)</td>
<td>required</td>
</tr>
<tr>
<td>Morbidity/Mortality Rounds</td>
<td>monthly (Tuesday 8 a.m.)</td>
<td>required</td>
</tr>
<tr>
<td>ECC Rounds</td>
<td>monthly</td>
<td>encouraged</td>
</tr>
<tr>
<td>Student Grand Rounds</td>
<td>weekly (Friday 8 a.m.)</td>
<td>encouraged</td>
</tr>
<tr>
<td>Journal Club (assigned service)</td>
<td>weekly</td>
<td>required</td>
</tr>
<tr>
<td>Textbook Review Session</td>
<td>weekly</td>
<td>optional</td>
</tr>
<tr>
<td>Anatomic Pathology Rounds</td>
<td>weekly</td>
<td>encouraged</td>
</tr>
</tbody>
</table>

5.2.1 Attendance and participation is required as indicated unless the intern is assigned to active Emergency duty that day.

5.2.2 The faculty will make every effort to assist the Intern in attending these rounds.

5.2.3 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. **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 The intern will participate in preclinical didactic lecture and laboratory instruction as assigned by his/her advisor.

6.4 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.

7. **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. **Clinical Program**

Below is a description of the 54 weeks per year of training.

<table>
<thead>
<tr>
<th>Internship Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>26 weeks Emergency &amp; Critical Care</td>
</tr>
</tbody>
</table>

**20 weeks Required Rot:**
- 8 wks medicine (6 weeks internal medicine required, 2 wks can be taken as oncology, cardiology or IM)
- 6 wks surgery (at least 2 wks each ST surgery & orthopedics)
- 2 wks primary care/exotics
- 2 wks radiology
- 2 wks anesthesiology

**6 weeks elective rotations**: Any required rotation or Dermatology, Ophthalmology, Oncology, Pain management, Rehabilitation, Cardiology, Dentistry, Special out-rotation

2 week orientation

*Elective rotations* (see Appendix E) Approval of special elective rotations is covered in section 8.5.

8.1 **Intern Year**

8.1.1 *Weeks of training described in table above. The hospital reserves the right to reduce the number of ECC weeks by two and substitute in two additional weeks of elective time.*

8.1.2 The intern will participate in the instruction of clinical students. Participation in CVM student laboratories will be assigned.
8.1.3 The intern will participate in house officer rounds, ward rounds, intern rounds, journal club, special topic conferences, seminars, and other scheduled conferences of the LVMC. He/She will attend other scheduled seminars in the CVM as time permits.

8.1.4 The intern will present 1 seminar and 1 case presentation (to faculty and house officers) on topics of interest to the intern during LVMC House Officer Seminar/Case Presentation sessions.

8.1.5 The intern is encouraged to attend and participate in continuing education meetings sponsored by the CVM or by local and regional veterinary organizations.

8.1.6 The intern is encouraged to apply for specialty training in their area of greatest interest through the VMRIP matching program in the Fall.

8.1.7 The intern is encouraged to prepare a research proposal; review it with his/her faculty mentor, and submit it for funding consideration.

8.1.8 The intern schedule will be distributed during orientation along with the information for the person responsible for intern scheduling.

8.1.8.1 The schedule should be reviewed and any changes/corrections must be requested by July 31

8.1.8.2 No rotation or shift changes/switches will be allowed without express approval by the intern scheduler.

8.1.8.3 In the event of an unplanned absence (illness, bereavement, etc.) the intern should contact the senior clinician for that rotation as soon as possible, with at least 24 hours notice for any absence apart from illness. The clinician may request written confirmation of the absence from an appropriate source (i.e. doctor’s note) for any absence greater than two shifts in duration.

8.1.9 The intern will be given written feedback/evaluation forms before the start of each rotation and is responsible for ensuring they are completed.

8.1.9.1 The Intern is expected to provide the senior clinician on their rotation with the form to evaluate them at the start of the rotation. A copy of this evaluation will be provided to the intern once it is completed.
8.1.9.2 The Intern is expected to fill out and turn in the form to evaluate each rotation within 1 week of the end of that rotation. Feedback will be anonymously forwarded to the appropriate services on a periodic basis and reviewed by the House Officer’s committee. Failure to complete more than 1 evaluation form may result in disciplinary action.

8.1.10 Interns are expected to participate in/fill out student evaluations as directed by each service.

8.1.11

**Time Table for Internship Training Program Guide for Interns**

<table>
<thead>
<tr>
<th>Month</th>
<th>Program Requirement</th>
<th>Program Director Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>June/July</td>
<td>Faculty advisor assigned</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Orientation to the Hospital and Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>August</td>
<td>Elective rotations selected</td>
<td></td>
<td></td>
</tr>
<tr>
<td>September</td>
<td>First teaching cases or manuscript initiated</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3 month Informal Review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>October</td>
<td>Career goal for next year defined</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November</td>
<td>6 month progress review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>January</td>
<td>Two teaching cases completed and/or manuscript outline, literature search, and case identified where applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>February</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>March</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>April</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>May</td>
<td>11 month progress review</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Intern seminar completed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>Exit interview with the committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Written exit program evaluation due</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4 teaching cases and/or manuscript complete</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
8.2 Internship Committee: The Internship Committee is responsible for coordinating internships and making recommendations to the HOC to maintain quality internship programs and interns. There are a minimum of 5 members on the committee. Members will be appointed by the HOC from the Small Animal Rotating Internship Program faculty or advisors and a representative from each specialty internship program. Each specialty internship will elect a representative to serve as a member on the Internship Committee.

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

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

8.3.2 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.

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

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

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 or perform their duties then disciplinary action will be taken and a timeline for correction instituted.

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 and holidays. Interns on other rotations within the hospital are also responsible for being available when on-call for the Emergency Service.

8.4.4.1 The Intern will have primary case responsibility for all incoming Emergency cases (unless specifically directed otherwise by the supervising emergency clinician) as well as all in-patients that have not yet transferred off the Emergency service.

8.4.4.2 All cases will transfer off the Emergency Service to the appropriate receiving service whenever a major procedure is performed (i.e. endoscopy, surgery, etc.) or no later than 8 AM the following day.

8.4.4.3 The intern may assist in the primary management of cases that remain on the Critical Care service as the emergency case load permits. Clear communication with the criticalist should be maintained to ensure that the roles of patient care and owner communication are well defined.

8.4.4.4 The intern should always contact their Emergency or Critical Care in-house faculty or on-call prior to consulting with another service or calling in another clinician after hours.

8.4.4.5 **Finally, some case management guidelines include the following:**
• Always contact the Emergency or Critical Care faculty/on-call prior to performing a procedure you have not done before unless it is eminently necessary to prevent death or serious harm.
• Always contact the Emergency or Critical Care faculty/on-call for assistance/advice on post cardiac-arrest care.
• Always contact the Emergency or Critical Care faculty/on-call anytime you do not feel comfortable with a case or how it is being managed.
• Always contact the Emergency or Critical Care faculty/on-call if you are unable to stabilize a case within two hours of arrival or you feel that the patient requires vasopressor therapy for stabilization.

8. 5 **External Rotations**

8.5.1 **Required:** External rotations (away from ISU) may be necessary if the number of qualified diplomates, caseload or equipment are insufficient to provide required training or training in another specialty area is needed.

8.5.2 **Elective:** The purpose of an elective block is to allow resident/intern the opportunity to learn skills and obtain knowledge in clinical areas of special interest. In coordination with the program director and advisor, the resident/intern may select a clinical block within the ISU CVM or at another medical facility. The resident/intern should seek rotations at other facilities only if this opportunity does not exist at the ISU CVM.

8.5.2.1 **Protocol:**

8.3.2.1.1 A minimum of 8 weeks prior to the scheduled elective present your proposal to your advisor for preliminary approval.
8.3.2.1.1.1 Final approval is necessary from the Internship Program Director
8.3.2.1.1.2 Requests must include the institution, the name of the supervising specialist, a description of experience/justification for the out rotation, and a written statement from the supervising specialist agreeing to the mentoring role and listing the expectations for the intern.
8.3.2.1.1.3 The intern must have primary case responsibility during the out-rotation (observation only is not acceptable for credit) and have a minimum of 40 hours of clinic time per week.
8.3.2.1.1.4 The intern is responsible for any cost associated with any applicable licensure, liability insurance, travel, and housing and is encouraged
to obtain all of this information prior to scheduling the out-rotation.

8.3.2.1.5 Approval for the activity will be considered after consultation with the Intern’s faculty advisor, the supervising specialist, and review by Internship Program Advisor.

8.5.2.2 Contact the desired elective site and determine the feasibility of your rotation, including start and end dates. Present them with preliminary objectives and determine if they are able to fulfill these objectives.
8.5.2.3 Determine if professional insurance will be required by the elective site and procure appropriate insurance.
8.5.2.4 Write formal objectives for your elective and present them to your advisor to request approval from the program faculty.
8.5.2.5 Present the approved objectives to your elective mentor. Obtain a letter from the mentor of your elective rotation stating they or their institution can meet the objectives you have set forth and they will be willing to formally evaluate your performance.
8.5.2.6 Present the letter of acceptance from your elective mentor to the program faculty & director for final approval. Perform admirably in your elective rotation. Arrange for the completed elective evaluation form (Appendix I) to be sent to your program director/advisor from the elective mentor. The evaluation should include comments regarding the fulfillment of the agreed upon objectives.

8.5.2.7.1 Within two weeks of returning, the intern must submit a case log (including their role/involvement with each case), written evaluation of the experience, and the supervising specialist must submit a written evaluation of the intern.
8.5.2.7.2 Failure to provide any of the above documentation may result in the time NOT counting towards the necessary 52 weeks of training that are required to complete the internship.

8.6 Emergency duty
All House Officers will participate in emergency duty with other residents, interns and faculty. Emergency duty commits the House Officer to evening, weekend and holiday duty on a rotating basis. While such activities will be closely supervised early in the program, the House Officer is expected to develop appropriate skills in emergency patient care which will require less supervision as the program progresses.

9. Scholarly Activities
The Lloyd Veterinary Medical Center 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:
9.1 Design a research project to address a specific question or problem in the discipline.

9.2 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 December of the 1st year.

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 unless research is a clinical trial which can be conducted while on clinics.

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, Lloyd Veterinary Medical Center (LVMC) 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 LVMC 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 Appointment Completion**

11.1 A written critique will be provided at least every 6 months by the advisor or section. The critique will cover:

11.1.1 Professional ability; to include theoretical knowledge and application of that knowledge, clinical skills, tutorial skills, and scholarly activity.

11.1.2 Hospital services; to include communication skills, patient care, medical record quality, emergency duty quality, and adherence to LVMC protocol.

11.1.3 Personal characteristics; to include responsibility, initiative, interaction with faculty, staff and students, department and leadership.

11.2 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.

11.2.1 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:

11.2.1.1 A list of action items to be accomplished that are detailed, clear, and aligned with a timeline

11.2.1.2 A specific date for follow-up evaluation

11.2.1.3 A description of consequences if the action items are not completed by the designated timeline.

11.3 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 Director of Hospital Operations of the Lloyd Veterinary Medical Center to:

11.3.1 Award a certificate upon satisfactory completion of the program.

11.3.2 Notify the intern of unsatisfactory performance and failure to successfully complete the program.
11.3.3 **Internship Certificate Requirements:**

11.3.3.1 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.

11.3.3.2 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.

11.3.3.3 The Intern will attend all of the scheduled service and Hospital rounds as outlined in the document above.

11.3.3.4 The Intern will present at least one, 40 minute seminar at the LVMC House Officer Seminar. Topics are selected 3 months in advance, approved by the Faculty advisor, and scheduled by the resident in charge of this activity. This is to be completed by May 31. Additionally, the intern must present at least one time at M&M rounds and Medicine Topic rounds.

11.3.3.5 The Intern will either develop 4 teaching cases with Power Point Slides 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.

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

11.3.3.7 The Intern must complete and submit the final checklist to the Program *(see Appendix I)*.
11.3.3.8 The Intern must complete all clinical rotations, scheduled emergency duty, medical records, referral letters and client/referring veterinarian case communications.

11.3.3.9 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.

11.4 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 House Officers are classified as D base employees as either an intern or resident and as such are governed by the House Officers Handbook.

13.2 Iowa State University offers a competitive salary and a comprehensive benefit package to house officers. Full benefits are offered, including medical, dental, and a retirement.

13.2.1 All University employees are covered under ISU’s general liability protection. This would provide malpractice protection for veterinary
services provided during the normal course of professional practice for the ISU veterinary teaching hospital. If you desire additional malpractice insurance and/or license defense insurance, you should obtain this from a private provider.

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 D-base employees 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 in accordance to ISU’s benefits policy.

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 Director of Hospital Operations of the Lloyd Veterinary Medical Center. (see Appendix E)

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.

13.5 A cell phone, access to a computer with internet, and a shared workspace will be provided.

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. (see Appendix D)
14. **Applications**

14.1 Candidates may apply for the Internship by completing:

14.1.1 A standard internship 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.

14.1.5 A 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. Rebecca Walton Iowa State University, College of Veterinary Medicine, Department of Veterinary Clinical Sciences, 1809 South Riverside Drive, Ames, Iowa 50011-3619. (Telephone 515-294-4900; email: rwalton@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**

A. Faculty in support of the Program

B. Code of Conduct & Collegiality

C. Communication Trees

D. Consultation Request

E. House Officer Leave Request (in LVMC office)

F. House Officer Case Presentation Evaluation Form
G. LVMC House Officer Seminar Evaluation Form
H. House Officer Evaluation Form
I. House Officer External Rotation Evaluation Form
J. Service Expectations
K. Other Forms:

______________________________________________________________________________
Appendix A. **Faculty in Support of the Program**

**Anesthesiology**
Michael Curtis, DVM, PhD, Diplomate ACVAA  
Bonnie H. Kraus, DVM, Diplomate ACVS, Diplomate ACVAA  
Dean H. Riedesel, DVM, PhD, Diplomate ACVAA  
Stefano Di Concetto, DVM, MS, Diplomate ACVAA  

**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)  

**Dentistry**
Brenda Mulherin, DVM, Diplomate AVDC  

**Diagnostic Imaging**
Kristina G. Miles, DVM, MS, Diplomate ACVR  
Elizabeth A. Riedesel DVM, Diplomate ACVR  

**Emergency and Critical Care Medicine**
April Blong DVM, Diplomate ACVECC  
Julie Riha, DVM  
Rebecca Walton, DVM, Diplomate ACVECC  

**Food Animal Medicine & Surgery**

- **Hospital-based:**
  Amanda Kreuder, DVM, PhD, Diplomate ACVIM-LAIM  
  Jennifer Schleining, DVM, MS, Diplomate ACVS-LA  
  Joseph Smith, DVM, MPS, Diplomate ACVIM-LAIM  
  Paul Plummer, DVM, PhD, Diplomate ACVIM-LAIM, Diplomate, ECSRHM  

- **Field-based:**
  Patrick Gorden, DVM, ABVP (Dairy)  
  Troy Brick, DVM, MS (Beef, Dairy, Small Ruminant, Swine)  
  Kelly Still-Brooks, DVM, MPH, Diplomate ACVPM (Small Ruminant Production)  
  Paul Plummer, DVM, PhD, ACVIM (LAIM) (Small Ruminant, Camelid, Cervid)  
  Terry Engelken, DVM, MS (Beef Production)  
  Grant Dewell, DVM, MS, PhD (Beef Production)  
  Locke Karriker, DVM, MS, Diplomate ACVPM (Swine Program)  

**Internal Medicine-LA**
Brett Sponseller, DVM, PhD, Diplomate ACVIM-LA  
David Wong, DVM, MS, Diplomate ACVIM-LA, ACVECC  
Katarzyna Dembek, DVM, MS, PhD, Diplomate ACVIM-LA  

**Internal Medicine-SA**
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)  
Karin Allenspach, DrMedVet, FVH, PhD, Diplomate ECVIM (Internal Medicine)  
Jean-Sebastien Palerme, DVM, MSc, Diplomate ACVIM (Internal Medicine)
Laura Van Vertloo, DVM, MS, Diplomate ACVIM (Internal Medicine)

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

**Oncology**
Chad Johannes, DVM, Diplomate ACVIM (Internal Medicine and Oncology)
Margaret Musser, DVM, Diplomate ACVIM (Oncology)
Leslie E. Fox, DVM, MS, Diplomate ACVIM (Internal Medicine)

**Ophthalmology**
Rachel Allbaugh, DVM, MS, Diplomate ACVO
Gil Ben-Shlomo, DVM, PhD, Diplomate ACVO
Lionel Sebbag, DVM

**Primary Care**
Bryce Kibbel, DVM
Jennifer Scaccianoce, DVM
Bianca Zaffarano, DVM

**Surgery - SAS**
Cheryl Hedlund, DVM, MS, Diplomate ACVS
Karl Kraus, DVM, MS, Diplomate ACVS
Mary Sarah Bergh, DVM, MS, Diplomate ACVS-SA, Diplomate ACV Sports Medicine
Louisa Ho Eckart, DVM, Hons MS, Diplomate ACVS-SA
William D. Hoefle, DVM, MS, Diplomate ACVS
Eric Zellner, DVM, Diplomate ACVS-SA

**Surgery – Equine**
Stephanie Caston, DVM, Diplomate ACVS-LA
Kevin Kersh, DVM, Diplomate ACVS-LA
Larry Booth, DVM, MS, Diplomate ACVS
Alex Gillen, VetMB, MRCVS, MA, Diplomate ACVS-LA
Tamara Swor, DVM, Diplomate ACVS-LA, Diplomate ACVECC-LA (Surgical Educator)
Dane Tatarniuk, DVM, MS, Diplomate ACVS-LA

**Surgery – Food Animal**
Jennifer Schleining, DVM, MS, Diplomate ACVS-LA

**Theriogenology**
Swanand Sathe, BVSc. MVSc. MS Diplomate ACT
Tyler Dohlman DVM, MS, Diplomate ACT
Nyomi Galow-Kersh, DVM

**Others:**
Frank Cerfoli, DVM (Clinical Skills)
Anges Bourgois-Mochel (Clinical Trials)
Joyce Carnevale, DVM, MS, Diplomate ABVP (Shelter Medicine)
June Olds, DVM (Adjunct, Zoo)
Appendix B. **Code of Conduct and Collegiality**

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.

6. **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.
Appendix C. Communication Trees

Personnel interactions:

Conflict Recognized

- House officer (H.O.)
- Other person (Technician, intern, resident, faculty) Service 2

Conflict unresolved

- H.O. (Service 1) meet with On-clinic service (1) faculty
- Other person (Service 2) meet with On-clinic service (2) faculty

Conflict unresolved

- On-clinic service (1) faculty
- On-clinic service (2) faculty

Conflict unresolved

- Service (1) Leader*
- Service (2) Leader*

Conflict unresolved

- Service Leaders
- HO Chair

HO Committee Discussion

- Resolution
  - Protocol established
- Unresolved
  - To Director Hospital Operations (HO & hospital issues)

*Advisors are apprised when deemed appropriate.
Client Complaint via evaluation of service or other means to Hospital Director or other Administrators:

- **Problem Reported**
  - Director Hospital Operations to notify House officer’s service faculty mentor & advisor

- **Problem Investigated**
  - Service faculty mentor meets with House Officer
  - Service faculty mentor discusses with advisor

- **Problem Discussed**
  - Faculty Advisor meets with House Office to discuss
  - Advisor offers suggestions how to avoid similar problems in the future

- **Advisor Reports**
  - Episode to HO Program Director
  - Outcome to Director of Hospital Operations

- **Unresolved Problem**
  - HO Program Director or Director of Hospital Operations reports to HO Committee Chair

- **HO Committee Chair**
  - No Further action or Committee Discussion
  - • HO Committee Discussion

- **Resolution**
  - Protocol established
  - Corrective action taken
  - Continuation in program discussed

- **Resolution Reported or Unresolved**
  - To Dept. Head (faculty issues)
  - To Director of Hospital Operations (HO & hospital issues)
Appendix D. Consulting Request

Consulting Request Approval Form

IOWA STATE UNIVERSITY
College of Veterinary Medicine

Date of Request: __________________________

Name: __________________________________

Proposed Date for 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 http://www.provost.iastate.edu/COI/

APPROVAL:
Department Chair __________________________

Director of Hospital Operations: _________________________

College Dean: ________________________________

Please Note: Must be approved by the Department Chair, Director of Hospital Operations (when applicable) and Dean prior to consulting activity.

3/24/15
Appendix E. **House Officer Leave Request (in LVMC office)**

### 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.

---

**VCS/VMC ABSENCE/OVERTIME REQUEST**

| NAME ____________________________ | DATE ____________________________ |
| Beginning Date of Leave __________ | Last Date of Leave ________________ |
| NUMBER OF HOURS ABSENT ____________ |
| ___ Vacation Leave ___ | Sick Leave ___ | FMLA ___ |
| ___ Converted Vacation ___ | Emergency Leave ___ | Leave w/o pay ___ |
| ___ Comp Time Leave ___ | Funeral Leave ___ | Other ___ |

**EMERGENCY PHONE NUMBER**

**OVERTIME**

| ___ Comp Earned (Med Rec Required) | ___ Comp Pay Out (Med Rec Required) |

**TOTAL COMPENSATORY HOURS WORKED**

**Employee’s Signature:**

**APPROVED:** Supervisor ____________________________ Date ____________________________

**Chair/Director** ____________________________ Date ____________________________
Appendix F. **House Officer Case Presentation Evaluation Form**

<table>
<thead>
<tr>
<th>Case Presentation Evaluation Form</th>
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<tbody>
<tr>
<td>House Officer: ____________________</td>
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<tr>
<td>Date: ____________________________</td>
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</tbody>
</table>

**Case Selection**

<table>
<thead>
<tr>
<th>Complexity of case</th>
<th>______</th>
<th>__________________________</th>
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</thead>
<tbody>
<tr>
<td>Appropriate case follow-up</td>
<td>______</td>
<td>__________________________</td>
</tr>
</tbody>
</table>

**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: ______________________________________________________________
Appendix G. **LVMC House Officer Seminar Evaluation Form**

**LVMC House Officer Seminar Evaluation**

**Presenter:** ___________________________  **Date:** ___________________________

**Audience:** ___________________________

**Title/Topic:** _____________________________________________________________

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

**Total** ________

**Comments:** ______________________________________________________________________
____________________________________________________________________________________
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Evaluator: ___________________________
# House Officer Evaluation Form

## Intern Evaluation

<table>
<thead>
<tr>
<th>Intern: ____________________</th>
<th>Rotation: ________________</th>
<th>Dates: ________________</th>
<th>Excellent</th>
<th>Good</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
<th>Remarks</th>
</tr>
</thead>
</table>

## 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
<table>
<thead>
<tr>
<th>Work towards service objectives</th>
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<tbody>
<tr>
<td>Record keeping</td>
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<tr>
<td>Communication with referring veterinarians</td>
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<td>Communication with clients</td>
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<tr>
<td><strong>Overall Intern Evaluation</strong></td>
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<tr>
<td>Miscellaneous Comments and Constructive Suggestions for Improvements</td>
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Evaluator (Print):

Evaluator Signature:

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.
Appendix I. **House Officer External Rotation Evaluation Form:**

<table>
<thead>
<tr>
<th>Lloyd Veterinary Medical Center</th>
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<tbody>
<tr>
<td>House Officer Evaluation for External Rotations (away from ISU)</td>
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</table>

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<thead>
<tr>
<th>House Officer:</th>
<th>Rotation Location:</th>
<th>Dates:</th>
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<tbody>
<tr>
<td>ISU Faculty Advisor/Program Director:</td>
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<tr>
<th>Professional Ability</th>
<th>Excellent</th>
<th>Good</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
<th>Not Evaluated</th>
<th>Remarks</th>
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<td>Theoretical knowledge</td>
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<td>Application of knowledge</td>
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<td>Technical skills</td>
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<td>Ability to make independent decisions</td>
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<td>Attendance at seminars/rounds</td>
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<td>Participations in seminar/rounds</td>
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<td>Contribution to student education</td>
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<td>Quality of faculty/supervisor interaction</td>
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<td>Leadership qualities</td>
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<th>Hospital/Clinical Service</th>
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<td>Quality of work</td>
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<td>Work towards service objectives</td>
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</table>
Appendix J. **Service Expectations:**

Please review these at [https://vetzone.cvm.iastate.edu/policies-and-documents/](https://vetzone.cvm.iastate.edu/policies-and-documents/)

Appendix K. **Other Forms:**