# 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 residency.

#### 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. VCS House Officer Seminar/ Rounds Programs

The VCS Seminar/Rounds Program are designed to provide the House Officer 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. The intern will participate with the other VCS house officers on a rotating basis and will make at least **1 case presentation** in House Officer Rounds during the year.

The seminar series is designed to provide the House Officer with the opportunity to research and present scientific information to professional colleagues.

- 5.1 **One seminar** will be prepared and given in during the program.
  - 5.1.1 House Officer attendance at all VCS Seminar/Rounds sessions is required. Attendance will be taken at the beginning of each session.
  - 5.1.2 House Officer will be required to present an additional seminar if they have more than one unexcused absence during the program year. All absences must be accounted for by communication with the Leader of the House Officer Committee and advisor.
  - 5.1.3 Excused absences include the following: illness, annual leave, attendance or participation in a continuing education program, presentation of a student lecture, scheduled out-rotation or special service requirements per request of advisor. All other absences are unexcused unless deemed excusable by the HO advisor.
- 5.2 House Officers attend and present in a variety of organized rounds and seminars in support of their intern training and teaching experience. The menu of rounds and seminars is tailored to assist interns in literature review and broaden knowledge base and to expose them to a broad range of clinical and academic experiences. Schedules are subject to change but include:

Type: Service Rounds w/students	Frequency: per program	Commitment: required
VCS Seminar/Rounds	weekly (Thursday 8 a.m.)	required
<b>Service Resident Rounds</b>	per service	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 (assigned service)	weekly	required
Textbook Review Session	weekly	optional
Anatomic Pathology Rounds.	weekly as scheduled	encouraged

- 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.

#### 6.0 **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 may participate in the 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**

- 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, David Whitley, Lin Kauffman, Bianca Zaffarano, Ingar Krebs, Robert King

- **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 -29 weeks ICU/ECC				
16 weeks Required Rot:  6 wks medicine 2 wks ST surgery 2 wks orthopedics 2 wk community practice 2 wks radiology 1 wk anesthesiology 1 wk clinical pathology	6-12 weeks elective rotations*:  Any required rotation or Dermatology Neurology 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	11		
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 project should be completed by December of the 1<sup>st</sup> 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.
  - 9.3.2 Completion is expected during the internshp.
- 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 strongly encouraged
  - 9.5.1 A manuscript suitable for publication is to be completed prior to the conclusion of the residency.

#### 10 Facilities and Equipment

10.1The 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.
- 11.2A 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.
- 11.4 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

- 13.1Iowa State University residents and interns are classified as adjunct, nontenure eligible faculty and as such are governed by the faculty handbook (www.provost.iastate.edu/faculty/handbook/current)
- 13.2Iowa 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.
- 14.3For more information about this program, please contact Dr. Michael Curtis, Iowa State University, College of Veterinary Medicine, Department of Veterinary Clinical Sciences, 1600 South 16<sup>th</sup> 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
- 15.8HO Evaluation Form
- 15.9 Checklists for internship completion and clinical competencies

# 15. 1 Faculty in Support of the Internship Programs:

# Anesthesiology

Dean H. Riedesel, DVM, PhD, Diplomate ACVA

Bonnie H. Kraus, DVM, Diplomate ACVS, Diplomate ACVA

Martha L. Buttrick, DVM

Christopher Kelly, DVM

# Cardiology

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

#### **Dermatology**

James O. Noxon, DVM, Diplomate ACVIM (Internal Medicine)

Elizabeth May, DVM, Diplomate ACVD

Diana Miller, DVM

#### **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

#### **Internal Medicine**

Jo Ann Morrison, DVM, MS, Diplomate ACVIM (Internal Medicine); Residency Program Director

Claudia J. Baldwin, DVM, MS, Diplomate ACVIM (Internal Medicine) - practice limited to consultation

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

Robert R. King, DVM, PhD, Diplomate ACVIM (Internal Medicine); Associate Hospital Director

Krysta Deitz, DVM, MS, Diplomate ACVIM (Internal Medicine)

Cody Alcott, DVM, Diplomate ACVIM-LA

Brett Sponseller, DVM, PhD, Diplomate ACVIM-LA

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

#### Neurology

Rod Bagley, DVM, Diplomate ACVIM (Neurology), Department Chair and Executive

Hospital Director - practice limited to consultation

Nicholas Jeffery, BVSc PhD, Diplomate ECVIM (Neurology)

#### Oncology

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

#### **Ophthalmology**

David Whitley, DVM, MS, Diplomate ACVO

Gil Ben-Sholmo, DVM, PhD, Diplomate ACVO

Rachel Allbaugh, DVM, MS, Diplomate ACVO

# **Primary Care**

Bianca Zaffarano, DVM

Brenda Mulherin, DVM

Linda K. Kauffman, DVM

Susan E. O'Brien, DVM

#### **Surgery -CAS**

Karl Kraus, DVM, Diplomate ACVS

Mary Sarah Bergh, DVM, MS, Diplomate ACVS, Diplomate American College of Veterinary Sports Medicine

Cheryl Hedlund, DVM, MS, Diplomate ACVS

William D. Hoefle, DVM, MS, Diplomate ACVS

Ingar A. Krebs, DVM

#### Surgery – Equine

Scott McClure, DVM, PhD, Diplomate ACVS

Larry Booth, DVM, MS, Diplomate ACVS

Stephanie Caston, DVM, Diplomate ACVS

Kevin Kersh, DVM, Diplomate ACVS

Jennifer Schleining, DVM, MS, Diplomate ACVS

Eric Reinertson, DVM

#### **Theriogenology**

Lawrence E. Evans DVM, PhD, Diplomate ACT

Linda K. Kauffman, DVM

Nyomi Gallow-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.

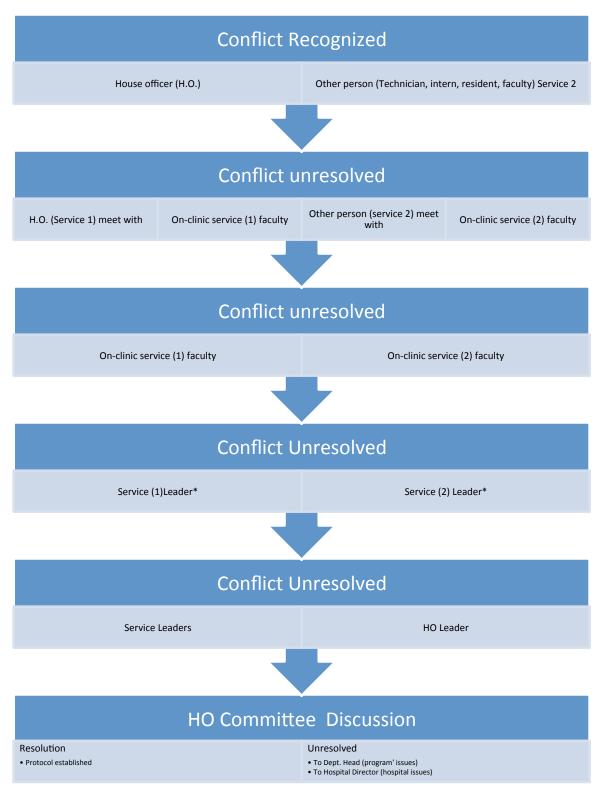
- 1. Each clinician (faculty, residents, and interns) has numerous interactions with veterinary students and should realize that they are role models for these students. Professional attire and language, and appropriate interactions with referring veterinarians are expected at all times. All clinicians 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.

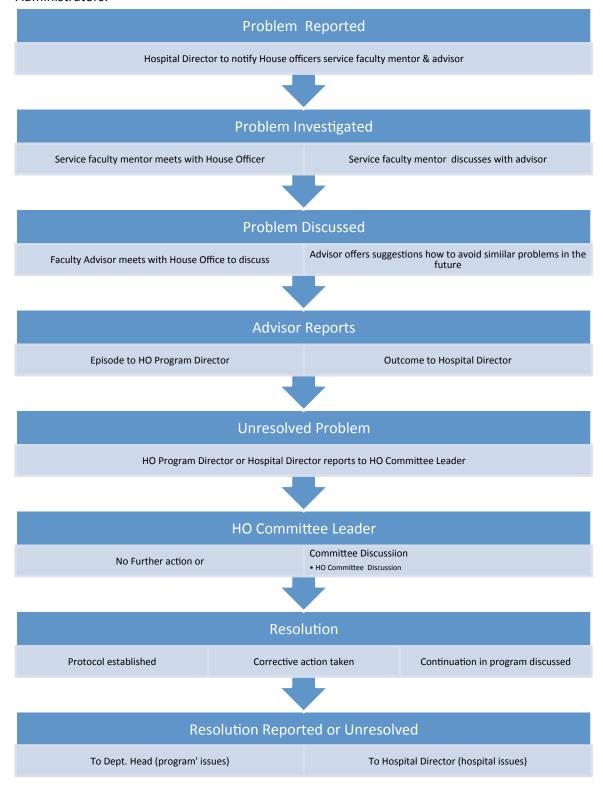
#### 15.3 <u>Communication/ Conflict Pathway to Resolution</u>:

#### 15.3.1 Personnel interactions



<sup>\*</sup>Advisors are apprised when deemed appropriate.

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





# CONSULTING REQUEST APPROVAL FORM

This form must be approved by the	<u>Department Chair</u>	<u>/Unit Director and</u>	Dean prior to consulting a	activity.
Name				
Date of this Request				
· -				
roposed Date of Consulting Activities				
Who are you consulting for?	_			
Where will you be consulting?				
What is the purpose of the consultin	g activity?			
Reminder: All full-time faculty and	d P&S staff are requ	uired to disclose po	otential conflicts of interes	t annual
or whenever their situation chang	ges, whether they tl	hink they have a co	onflict of interest or not. U	sing the
Access Plus system, faculty and Page 1				
fill in the <b>Conflict of Interest Discl</b>	<b>osure Form.</b> If you	have any question	s, please review the COI p	olicy at:
www.provost.iastate.edu/COI/				
APPROVALS				
Department Chair/Unit Di	rector		College Dean	

#### 15.5 Leave authorization forms are available in the VCS office.

	VCS/VMC AB	SENCE/OVERTIME	REQUEST
NAME		DATE	
Beginning D	ate of Leave	Last Date of Lea	ve
NUMBER OF	HOURS ABSENT		
Vacatior Converte Comp Ti	ed Vacation me Leave	Sick Leave Emergency Leave Funeral Leave Other	FMLA Leave w/o pay
EMERGENCY P	HONE NUMBER		
OVERTIME			
Comp E	arned (Med Rec Requi	red) Comp Pay C	Out (Med Rec Required)
TOTAL COM	IPENSATORY HOURS	WORKED	
Emplementa Sig	nature:		
Employee's Sig			Date
APPROVED:	Supervisor		

# **Guidelines for Scheduling Leave:**

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

- 1. Determine the times/days for your absence to be done on elective time only
- 2. Confirm the time and dates with your Intern 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 Dr. Curtis
- 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 Internship 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.
- 4. Obtain final approval of the Internship Director at least four weeks in advance of out-rotation

# 15.6 VCS House Officer Rounds

#### **Case Presentation Evaluation Form**

Date:	Торі	c:		
			Evaluation	Comments
	E = excellent	G = good	N = needs improvement	
Case Selection				
Complexity of case				
Appropriate case follow	w-up			
Content				
Format of presentation	ı (complete,	logical,		
appropriate length)				
Use of problem-oriente				
(data or evidence to sup	port importa	ant points)		
Knowledge of subject (	well research	ned,		
accurate, comfortable, o				
Discussion (relevance, g	ood referenc	ces, accurate)		
<b>.</b>				
Conclusions			<del></del>	
Delivery				
Clarity of speech (mumb	oles, clear,			
pronunciation, vocalized	d pauses [uh,	um,		
well, so, etc.])				
Rate of delivery (too fas				
Eye contact (consistent, Body language/enthus				
self-confidence)	iasiii (nervot	us, relaxeu,		
sen connactice;				
Effectiveness of presen	itation			
Use of visual aids (spelli	ng, wordines	s, colors,		
clarity, appropriate imag				
Professionalism (attire,	appropriate l	humor,		
self-confident)  Questions handled app	ronriately			
Questions numerica app	opriately			
Additional Comments:				

# 15.7 **Seminar evaluation**:

# **VCS Seminar Evaluation**

Presenter:	Date:	
Audience:		
Title/Topic:		
Evaluation Criteria:	<u>Points</u>	Evaluation
<ol> <li>Definition of Subject: introduction, importance, clinical significance</li> </ol>	0-5 pts	
2. Organization:	0-15 pts	
3. Quality of material, scientific depth	0-15 pts	
<ol> <li>Presence: Speaking ability</li> <li>a. Clarity</li> </ol>	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	
5. Appropriate summary?	0-5 pts	
7. Presentation consistent with audience level?	0-10 pts	
3. Questions/discussion handled appropriately?	0-10 pts	
	Total	
Comments:		
  Evaluator:		

15.8 **House Officer Evaluation Form**: (insert the form you use to evaluate your intern)

# 15.9 Intern Completion Checklist

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

Intern Name	:	
Faculty Adv	isor:	
Program Dir	rector:	
• Ro	tation Completion Checklist: total of 52 weeks	O
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	O O O O O O O
2. 3.	Emergency Medicine and Critical Care: 26 weeks Elective Internship Rotations: 7 weeks	O
	a weeks of b weeks of c weeks of d weeks of e. Outside elective rotation date and location	_0
4.	Vacation: 2 weeks	_ O O
	st author manuscript and/or 4 teaching cases with Possentation in small groups. Completed two weeks before	
	Title of manuscript:	
	Authors:	

	Intended Journal for publication:	
1	And/orCompleted 4 teaching cases for small group presentati	on O
	Titles of Cases:	
	a. b.	
	b. c.	
	d	
•	Intern Seminar	О
	Title:	
	Date given:	
•	Completion of an informal review will occur in December, 20 starting date).	10 (or 6 months after O
•	Completion of a formal review will occur in May or June, 201 starting date).	1 (or 11 months after O
•	Completed scheduled emergency duty, medical records, cliental communications, and referral letters.	referring veterinarian O
•	Submit updated CV to Program Director.	О
•	Submit completed Checklist to Program Director.	O
•	Complete an exit interview with the Internship Committee.	О

# 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

- 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