

The Residency Programme

Objectives

A Asian College of Veterinary Dermatology (AICVD)-approved Residency Programme ('Residency Programme') is designed to provide in-depth training in veterinary dermatology, related basic and applied sciences and areas of medical dermatology to allow a graduate veterinarian ('Resident') to develop a comprehensive knowledge of the dermatological conditions of domestic animals, to add to that body of knowledge and to meet the dermatological training requirements of the AICVD Credentials Committee ('Credentials Committee') to sit the AICVD Diploma ('Diploma') examination.

Prerequisites of the programme

The Institution

Residency Programmes may be conducted at a veterinary school/college or other institution (including an approved private veterinary dermatology clinic). The parent institution must supply adequate space, facilities and have sufficient clinical cases and these must be guaranteed for the duration of the programme. Some co-operation in the training process with other institutions or clinics (including medical dermatology departments) is allowed. The parent institution must provide all equipment required for the examination, diagnosis and management of patients. A complete medical record must be maintained for each case and these records must be retrievable. Training in clinical pathology and dermatopathology must be provided. There must be reasonable facilities for diagnostic imaging. Extensive library facilities, providing current veterinary and medical texts, bound journals and abstracts (in printed or electronic form), must be available.

The Programme Director and Resident Supervisor

All Residency Programmes must be under the direct supervision of a Diplomate of the AICVD (the "Programme Director"). The Programme Director is responsible for the administration, continuity and continuing development of the programme in general. All Residents must be under the direct supervision of a Diplomate of the AICVD (the "Resident Supervisor"). The Resident Supervisor is responsible for the immediate direction and evaluation of an individual resident and the administration of his/her individual programme. Each Resident Supervisor may train up to two full-time residents concurrently. The Resident must meet formally with his/her Resident Supervisor at least twice annually to evaluate the Resident's performance and progress.

The supervisor may enlist the help of other individual(s) (the 'Resident Advisor(s)') at the parent or other institutions. The qualifications of Resident Advisor(s) will vary with the subject area to be covered. A Resident Advisor in clinical dermatology will ideally, but not necessarily, be a Diplomate or equivalent.

Types of residency available

All residency programmes must be approved by the AICVD Education Committee ('Education Committee') and are subject to current College guidelines. Two types of Residency are available: formalised and individualised.

Formalised Programmes

Formalised programmes are those offered by the parent institution on a routine and regular basis without modifications for particular applicants. Such programmes are designed and approved for a specific number of Residents at any one time. Once the programme is approved by the Education Committee, positions may be filled without further reference to the Committee provided there are no changes to the programme.

Formalised programmes are approved by the Education Committee for a fixed period. If continuation of the programme is required, the programme description must be updated and resubmitted to the Education Committee for further approval, not less than 1 year from the expiry of approval.

Individualised Programmes

Individualised programmes are those offered periodically or on a part-time basis by an institution. For such programmes, a detailed description must be prepared and approved by the Education Committee before each programme is begun. Any training undertaken before the committee's formal approval of the programme will be carefully reviewed. Subsequently, some or all of this training may be accepted up to a maximum of 25 days of the total clinical training requirement.

All Residents in both formalised and individualised programmes must have been qualified as a veterinarian for at least 3 years at the time of sitting the Diploma examination.

Alternate Route Programmes

The AR residency implies part-time tuition, training and case exposure in institutions different to the candidate's clinic/practice under the responsibility of an AiCVD Diplomate or equivalent figure.

An Alternate Route Programmes must spend a minimum of 250 days of observation and supervised study in the training institution and must have primary involvement with clinical cases for more than 50% of the approved training time. Alternate Route Programmes residents must provide an annual progress report and credentials at the end of their residency, to be able to sit the Diploma examination. These include a case log, an activity log, a presentation log, a case book with detailed description of two cases and two publications in peer reviewed journals.

Alternate route programmes must be presented to and approved by the Education Committee before the programme start.

SCOPE OF THE RESIDENCY PROGRAMME

The formalised Residency Programme is a full-time, non-degree period of at least 24 months of supervised training, post-graduate education and experience in the science and practice of veterinary dermatology, encompassing clinical dermatology, dermatohistopathology, and the relevant basic and applied sciences. The majority of the

clinical training will take place at the parent institution and will be supervised by the Resident Supervisor but external instruction, approved by both the Programme Director and the Resident Supervisor, is allowed and encouraged. Such periods of external instruction may be used to meet the clinical training requirements or may be additional or ancillary to them. If periods of external instruction are used towards the clinical training requirements, they must not exceed 25% of the total clinical training time.

If a further degree is undertaken at the same time as the Residency Programme, the overall length of the programme must be increased so that the Resident can meet all of the requirements of the institution's Postgraduate Studies Committee or equivalent and still devote a total of at least 24 months to the residency. The postgraduate degree work must not interfere with clinical training.

Residents studying on a part-time basis must complete all of the requirements of the Residency Programme in a period of not more than 5 years.

RESIDENCY PROGRAMME DESCRIPTION

Basic And Applied Sciences And Internal Medicine

The Resident must study areas of the basic and applied sciences and internal medicine, as they relate to dermatology. These studies must be supervised by the Resident Supervisor. While independent study by the Resident is helpful in strengthening understanding in an area, it must not be the sole method of advancement. Acceptable methods of teaching/learning include conferences, lectures, tutorials, book and journal reviews, directed readings and interactive computerised learning programmes with, additionally, clinical training in internal medicine as required. For the directed readings and interactive computerised learning programmes, the Resident Supervisor/Advisor(s) must monitor the Resident's understanding of the material.

Basic And Applied Sciences

The Resident must study the basic and applied sciences as they relate to dermatology. Areas of study must include anatomy, bacteriology, biochemistry, clinical pathology, embryology, genetics, haematology, immunology, mycology, nutrition, parasitology, pharmacology, physiology, therapeutics and virology. A minimum of 52 hours/year of direct supervision by the supervisor or another Diplomate of the AICVD in journal clubs or basic science discussions is required.

Internal Medicine

A resident must have a broad understanding of internal medicine, particularly in those areas where cutaneous involvement is regularly seen. All residents must have completed 1 or more years of basic clinical training prior to beginning the programme and it is expected that skills in internal medicine will have been developed during this time.

Areas of importance include, but are not confined to, cardiology, endocrinology, gastroenterology, haemopoietic disorders, hepatology, infectious diseases, oncology, respiratory disorders, systemic immunological disorders, therapeutics and urology.

Knowledge of aetiopathogenesis, historical and physical features, diagnostic tests, management and prognosis is expected. If the Resident Supervisor identifies weaknesses in this knowledge, steps must be taken to rectify it. These may include a period of mandatory attendance at internal medicine clinics, rounds, seminars etc.

Residents are encouraged to investigate and manage both the cutaneous and systemic diseases of their patients. Consultation with specialists in other fields, in addition to dermatology, is encouraged. If the patient has to be referred to another clinician's care, the Resident must review the evaluation and management of the patient.

Clinical Dermatology, Dermatohistopathology and Dermatological Research Techniques

Clinical Dermatology

During the Residency Programme, the Resident must have a minimum of 250 8-hour days (or equivalent) of clinical training. However, time spent on clinical training should not exceed 75% of the available time of the programme to allow time for academic development. Clinical training includes time spent taking histories, examining animals, carrying out diagnostic and therapeutic procedures, reviewing diagnostic material, liaising with specialists, referring veterinarians and owners and contributing to rounds and case conferences.

Clinical training may be divided into that which is observational and that which is participatory. Observational training is that in which the Resident is not the primary clinician or co-clinician with the Resident Supervisor. This form would be particularly applicable to the earliest stage of the Residency but should not normally exceed 30 days of the clinical training requirement.

Participatory training is that in which the Resident takes an active role in case evaluation and management, either as primary clinician or as co-clinician with the Resident Supervisor. All Residents must have primary case responsibility for at least 500 patients, these being either newly referred cases or previously referred cases requiring a major change in direction of diagnosis or therapy. The Resident may be considered to be the primary clinician when that individual can demonstrate a significant role in all of the following: history taking, physical examination, determination of the diagnosis including appropriate diagnostic tests, selection and administration of appropriate therapy and sufficient follow-up to be acquainted with the course of the disease and the case outcome. A case log must be maintained for these patients. In addition to the 500 cases described above, 750 more cases must be documented in the case log. These may be re-evaluations of patients previously listed as new (i.e. second and subsequent examinations), patients seen as co-clinician with the supervisor or those seen during external rotations with other peers.

All Residents are expected to have in-depth knowledge of the dermatological conditions of domestic animals and of the other species commonly kept as pets, found in current textbooks and widely circulated, English language journals. A more superficial

knowledge of human dermatological conditions, as they occur in people, which have also been recognised in either companion or farm animals, will also be expected. A directed reading list must be given to the Resident by the Resident Supervisor. Experience of the veterinary conditions will, ideally, be obtained during clinical training with the Resident Supervisor. Any deficiencies noted must be addressed by the Resident Supervisor. While independent study of texts and journals by the Resident is accepted to be of value in helping to remedy deficiencies, it is not, in itself, sufficient.

Dermatohistopathology

All AICVD Residents must receive extensive training in dermatohistopathology at the light microscopic level. Knowledge and experience at the ultrastructural level and of immunohistochemical techniques, while of value, is not required by the training programme.

Supervision of training in dermatohistopathology must be carried out by the Resident Supervisor and may include external instruction. It must include:

1. Histological principles, including processing techniques and routine, and regularly used special, stains.
2. Cutaneous histological and histopathological terminology.
3. Normal cutaneous histology of the domestic species.
4. Recognition of cell types found in skin biopsies.
5. Dermatohistopathology of the non-neoplastic disorders of domestic animals. Any method of classification may be used but diagnosis by pattern analysis is preferred.
6. Dermatohistopathology of the neoplastic disorders of domestic animals.

The ability to recognise the common tumours is expected. Detailed knowledge of their histological sub-classification is not required.

As much training as is possible should be carried out on the Resident's own cases and he/she is expected to review all such biopsies. As it is unlikely that all important dermatoses will be encountered during the Residency programme, these may be supplemented by (ideally) other glass-mounted specimens, or (less satisfactorily) from standard texts. The Resident Supervisor may examine slides with the Resident or the Resident may examine them alone and subsequently review them with the Supervisor. There is no minimum number of slides that must be examined but towards the end of the dermatohistopathological training, the competence of the Resident should be assessed and further study prescribed if this is not satisfactory.

Dermatological Research Techniques

The study of dermatology requires some understanding of investigative techniques currently used mainly in research. Consequently, the Resident must have some knowledge of the general principles of a number of areas of importance, allowing correct interpretation of the literature. Knowledge of specific techniques is not required.

Publications

An important part of the Residency Programme is training in scientific writing. All Residents should, during the programme, produce and have published, or accepted for

two publication in internationally recognised, refereed scientific journal(s), one paper of which the Resident must be first author. This paper must report original work.

Research Project

An important part of the Residency programme is training in aspects of dermatological research. All AICVD Residents must conduct and complete a research project that contributes to the advancement of veterinary dermatology. Basic research and original clinical investigations are acceptable.

The Resident must be the principal investigator in the project. The project must be begun and completed during the Residency. Three copies of a manuscript, suitable for publication, not exceeding 5000 words (excluding references, tables and figures) must be prepared and submitted in typed, bound format, with the Resident's application, to the Credentials Committee.

Scientific Presentations

An important part of the Residency programme is training in scientific presentation. All AICVD Residents are required to present a minimum of six lectures/seminars, each of at least 30 minutes in length, on topics related to dermatology during the programme. The audience may be students, veterinarians, veterinary nurses, veterinary technicians or lay people. The Resident Supervisor should also make every effort to attend the actual presentations and review them subsequently. Where attendance is not possible, these presentations should be previewed.

Scientific Meetings

The Resident is only required to attend the parent institution's ward rounds, dermatology meetings and related clinical seminars. However, the AICVD recognises the importance of this form of training and it is therefore recommended that the Resident attends other meetings, particularly those at or near to the parent institution. These include veterinary dermatology, immunology, oncology and pathology meetings, skin biology meetings, medical dermatology meetings and veterinary and medical research seminars. The Resident should have the time to attend at least one national or specialist conference each year of the programme.

OTHER REQUIREMENTS

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DOCUMENTATION

The Institution

All formalised and individualised programmes must have an approved current programme description on file with the Education Committee. The Resident should have a copy of the description and of this document.

The Resident

Certification of pre-residency General Clinical Training

Prior to appointment, the resident must provide written evidence to the Programme Director of the type of pre-residency general clinical training listing the name(s), address(es) and telephone number(s) of the place(s) of employment, the type of training, the veterinarian(s) with whom the applicant trained and the dates of training.

This letter must be submitted to the Education Committee when the Resident registers with the Committee.

AICVD Education Committee Registration Form

All Residents must complete an Education Committee registration form and submit it to the Secretary of that Committee within 30 days of beginning the programme.

Resident Case Log

All Residents must maintain a brief case log of all cases seen as primary clinician or co-clinician during the programme. This must list the date, case number (or other form of specific identification), species, breed, gender and age, primary complaint, diagnosis and whether the case was followed up. Detailed records of these cases must be available for inspection, if required.

Resident Activity Log

All Residents must maintain an activity log listing days of clinical service, venue, type and dates of external instruction and scientific meetings attended.

Resident Presentation Log

All Residents must maintain a log listing presentations given, to whom they were given and their duration.

The Resident Supervisor must ensure that the case log, activity log and the presentation log is kept up-to-date and to identify and attempt to rectify serious omissions, by twice yearly inspections.

Yearly Progress Report

The Resident Supervisor must submit an annual progress report on each Resident to the Chair of the Education & Credential Committee. The report must comprise the appropriate AiCVD form incorporating the Resident Supervisor's personal evaluation of the Resident. Any Resident Advisor who has participated in the mandatory training of the Resident must document the nature and duration of that training and the Resident's performance in that training in the appropriate place on that form. Any training carried out additional to the mandatory training need not be documented.