



Thursday, February 18, 2021

ACVR Residency Training Program Application

This application is required for institutions desiring ACVR accreditation of a new residency training program and for institutions requesting re-accreditation of an existing program.

Before beginning the application process, all applicants should review the most recent version of the [ACVR Residency Program Essential Training Standards and Requirements](#) (RPE) document in detail. Use the RPE as a reference when completing the application form, as the contents you provide herein will be evaluated by the Residency Standards and Evaluation Committee (RSEC) against the published RPE standards. This application form follows the headings of the RPE. All terms used in this application have same definitions as those in the RPE, and no information provided in the application form itself will supersede that published in the RPE.

During the application review process, the Chair or Assistant Chair of the RSEC may contact the applicant for additional information or clarification.

**Note: If you wish to save your submission and complete it later, click the save button located at the bottom of the pages. You will be emailed a link to complete your form at a later date.*

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Program Summary

The Residency Director of the program is expected to be the primary applicant and contact person for this application. The Residency Director must be located at the primary training institution.

Institution Name	Sage Veterinary Imaging
Residency Program Director Name	Jaime Sage
Residency Program Director Email	jaime@sageveterinary.com

Program Type

What type of residency program is being requested?	Traditional Residency Program
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If approved, what is the proposed start date of this residency program?	Thursday, July 1, 2021
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Objectives

Succinctly state the objectives of the training program.

Provide clinical training in veterinary diagnostic radiology, ultrasound, computed tomography, magnetic resonance imaging, nuclear medicine,

and special procedures to prepare the resident to successfully complete the American College of Veterinary Radiology board examination, participate in clinical research, and to embark on a successful and enjoyable career as a veterinary radiologist.

Training Period

What is the total length of the training program? 36

What is the anticipated length of supervised clinical training a resident will experience during this program? 30

Will the resident(s) in this program be eligible to take the ACVR Preliminary Exam in September of their third year? ☒ Yes

What are the responsibilities of the resident(s) during non-clinical portions of the program?

1. Self-study and board preparation
2. Research and paper publication
3. Vacation

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Direction and Supervision

When calculating time commitment in this section, you may consider a 100% (full time) duty schedule to consist of 48 weeks per year with 8 hours per day or 40 hours per week.

Residency Director

Please review the Residency Director requirements and responsibilities in the [ACVR Residency Program Essential Training Standards and Requirements](#) (RPE) document. Note that the Residency Director will be required to provide at least 24 weeks of clinical duty per year in primary support of residents in this program and to meet all other qualifications of a Supervising Diplomate.

Is the applicant Residency Director for this program prepared to meet these requirements? ☒ Yes

What percentage of the Residency Director's time is committed to clinical service at the primary training institution? 100

How many weeks per year will the Residency Director be on clinical service and teaching residents at the primary training institution? 50

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Additional Training Diplomates

Please review the definitions and responsibilities of [Supervising Diplomate and Supporting Diplomate](#) in the RPE document. Note that Supervising Diplomates will be required to provide at least 10 weeks of clinical duty in primary support of residents in this program, and are expected to participate in all facets of residency training. Supporting Diplomates aid in residency training, but provide support that is limited, as by modality (e.g. only works in ultrasound), time commitment (e.g. clinical duty < 10 weeks per year), or other constraints that prevent them from qualifying as a Supervising Diplomate.

Provide a copy of affiliation agreements with any diplomates that are located at an external institution (see Affiliation Agreement section at the end of this application).

Excluding the Residency Director, please list all training diplomates who will act as Supervising Diplomates of this residency program. Indicate the approximate number of hours per year each supervisor will be scheduled on clinical duty with primary support of residents and, if applicable, any specific areas of instructional responsibility (e.g. trains mostly in small animal, trains mostly in MRI, etc). If a 'Supervising Diplomate' position will be comprised of multiple radiologists, please list the cohort as a single entity or institution for this question (e.g. "teleradiologists" or private institution name)

Name: Erin Epperly

Hours/Year: 500

Specific Areas and/or Limitations of Instructional Responsibility: All areas - no limits

In addition to ACVR/ECVDI Diplomates, the program must arrange for the resident(s) to have direct access to specialists in other areas. Please identify one member in each of the specialty colleges listed below that has agreed to support this program through clinical activity that allows regular interactions between the specialist and the diagnostic imaging residents (e.g. discussion of diagnostic work up, imaging findings, or patient outcomes, and/or participation in interdisciplinary rounds, etc). Indicate whether the specialist is located on-site at the primary institution at an external institution. Upon completion of this application, the below individuals will receive an email requesting acknowledgement of their support of your residency program.

ACVIM Member Name	Michelle Carnes
ACVIM Member Institution	Neurology off site
ACVIM Member Email	mcarnes@scanfl.com

ACVS Member Name	John Bevan
ACVS Member Institution	Small animal off site
ACVS Member Email	john.bevan@ctvseh.com
ACVP Member Name	Kellie Whipple
ACVP Member Institution	Clinical pathology off site
ACVP Member Email	Kellie-Whipple@idexx.com

Upload any affiliation agreement(s) with Supervising Diplomates, Supporting Diplomates, or Diplomates in other specialties that are located at external institutions. (see Affiliation Agreement section at the end of this application.)


 Affiliate Agreement for LA Training - SVI.pdf


 CV 11.2.2020 - Jaime E. Sage, DVM, MS, DAC...


 Epperly2020CV.docx


 affiliate letter NWVI.pdf

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Resident:Supervising Diplomate Ratio

The number of residents in the program cannot exceed twice the number of ACVR/ECVDI Supervising Diplomates on-site.

What is the maximum number of residents you will have enrolled in this training program at any given time? 4

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Facilities

Review the Facility Requirements listed in the RPE document. Note also that residents should have opportunities to be involved with image acquisition and protocol set-up.

Does this residency training program provide on-site access to modern equipment for the following modalities?

Digital or Computed Radiography	Yes
Fluoroscopy	Yes
Ultrasound with Doppler Capability	Yes
MRI	Yes
Fan-beam CT	Yes
Nuclear scintigraphy	Yes

Briefly describe how this program meets the facility requirements, including the specific type of CT and MRI units available. Explain how your program will train residents in modalities for which equipment is not located on site, providing affiliation agreements if applicable. (see Affiliation Agreement section at the end of this application.)

Sage Veterinary Imaging is newer imaging facility that is ~4000 square feet in size and has two inhouse Samsung RS80 console ultrasound machines with echocardiography probes/software, Philips 3T Achieva dstream MRI, Philips Pulsera uoroscopy C-arm, digital radiography (next door facility), in-house hot lab set up for tin-117m, I-131, and 99Tc, and handheld gamma camera. Land has been purchased next door for a CT trailer (64 slice) placement planned for summer 2022 but we have access to a CT (16 slice 3 miles away with a surgeon listed as a contributor to the residency) and many teleradiology cases (16, 64, and 256-slice CT machines).

Additionally, a sister facility is under construction in Salt Lake City, Utah, where Dr. Epperly will be working full time. This facility will have the same equipment listed above, in addition to a 128 slice CT scanner. This facility is anticipated to open fully around 7/2021 and the resident will be spending time at this location, as well.

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Clinical Resources

Review the clinical resource requirements listed in the RPE document.

What is the average annual caseload at the primary institution over the past 3 years? This number will include all patient visits whether or not they contribute to the annual imaging caseload. 7600

What is the average annual imaging caseload at the primary institution over the past 3 years? Each body region imaged for a given patient (e.g. thorax, abdomen, spine, etc) will count as a single study.

7600

What is the average annual imaging caseload at the primary institution over the past 3 years in the following categories?

Small animal radiology 2544

Large animal radiology 0

Abdominal ultrasound 1800

Non-abdominal ultrasound 200

Computed tomography 720

Magnetic Resonance Imaging 2880

Nuclear scintigraphy 50

Indicate the approximate species breakdown of the imaging caseload at the primary institution in the following categories:

Small animals (canine, feline): 99%

Large animals (equine, bovine, porcine, etc.): 0

Avian, Exotic, and Wildlife animals: 1%

Which of the following types of imaging cases will the resident(s) have direct, on-site exposure to at the primary institution during the residency program?

Echocardiography Yes

Large animal ultrasound No

Nonabdominal small animal ultrasound (i.e. cervical, musculoskeletal) Yes

Food/fiber animal imaging No

Exotics imaging Yes

Teleradiology/Referral imaging Yes

Explain how the resident(s) in this program will gain experience in any of the above types of imaging cases that are NOT available at the primary institution. Provide affiliation agreements,

if applicable. (see Affiliation Agreement section at the end of this application.)

The resident will have exposure to large animal imaging cases via the affiliation with Texas A&M. Additionally, Dr. Epperly's teaching materials include large animals (all modalities and large animal species).

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Training Content

Review the Training Content requirements listed in the RPE document.

What percentage of the total imaging caseload at the primary institution results in a report written by the resident(s) and/or training diplomates in this program? 80

If < 99%, please provide a brief explanation and account for this when calculating the number of cases that each resident will interpret.

This is estimated, as the imaging centers are new in 2020 and 2021 and there are no residents that have begun yet. As the caseload is quite high, we are estimating lower percentages (80% rads, 80% US, 50% CT, 10% MRI) to make sure the resident is not over-worked. If case numbers appear inadequate, the percentages will increase, and conversely, if the case numbers are excessive, the percentages will decrease.

What percentage of the preliminary reports generated from the imaging caseload are initially produced by the resident(s) in this program? 50

Does this institution concurrently support the training of diagnostic imaging interns?

Yes

If yes, indicate what percentage of the preliminary reports generated from the imaging caseload are initially produced by the intern(s) and how this affects the resident imaging report caseload.

As indicated in the previous question, this is currently a new and dynamic situation that we will be tracking closely. Our plan is to maintain a case log for the residents and interns and to make sure the priority is given to appropriate resident case numbers and modality distribution.

What percentage of resident-generated reports are reviewed by training diplomates prior to finalization of the report? 100

What is the average turnaround time for resident-generated preliminary reports to be finalized by training diplomates?

24 hours or less

What percentage of all imaging reports (resident and diplomate generated) is finalized and available to requesting clinicians within 48 hours after the exam is submitted for radiologist consult? 100

For each category below, calculate the approximate number of cases that a single resident will interpret at the primary institution with radiologist feedback during the course of the entire residency program. These numbers should be calculated using the annual imaging caseload adjusted to include only those with written reports generated by the residents. In general, this number should then be divided by the total number of residents in a program during a given year.

If external rotations for the resident(s) are employed to increase the resident caseload in any given category, please be sure to upload affiliate agreements that include the expected number of reports that residents can expect to generate (with radiologist feedback) for cases in those categories.

Small animal radiology 4500

Large animal radiology 0

Abdominal ultrasound 2500

Non-abdominal ultrasound 300

Computed tomography 650

Magnetic resonance Imaging 1000

Nuclear scintigraphy 150

How many ultrasound exams will a single resident perform with radiologist feedback during the course of the entire program? Scans for which the resident writes a report but does not acquire images are excluded. 2800

Please indicate whether this training program includes formal courses in any of the following topics:

Physics of Diagnostic Imaging

Radiobiology

Nuclear Medicine

Ultrasonography

Computed Tomography

Magnetic Resonance Imaging

No

Other

No

Briefly describe the formal courses that are available for the resident(s) in this program by indicating the institution, course title, course number, and credit hours as well as any other relevant information. For any topics for which formal course work is not provided for the resident(s), please explain how educational objectives in these topics will be met.

During year 1, the resident will have weekly protected time for formal study with Dr. Epperly. This will break down to 1 hour for each nonphysics topic rounds, physics, journal club, and KCC. The resident will be provided with routine mock exam questions, as well as formal practice examinations quarterly. The curriculum is still under development, but a draft can be accessed via the link below.

https://docs.google.com/spreadsheets/d/1dcOkKFuMCKvYEs7ocJ7wnDFGMJELu_-a8lqNie5s/edit?usp=sharing

Will the resident(s) in this program attain an advanced degree (MS, PhD) at the conclusion of the program?

No

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Research Environment

Review the Research Requirements listed in the RPE document.

Over the last five years, what is the average number of peer reviewed publications on which the training diplomates (Supervising and Supporting diplomates) of this program are included as authors? (total number of publications in last 5 years among all training diplomates divided by the number of training diplomates) 3

How many peer-reviewed publications are expected of a resident completing the program? 1

If this is an established program, what percentage of residents have made formal research presentations at the annual ACVR or equivalent national meeting? 0

Briefly describe if/how residents are encouraged to engage in investigative work and what mechanisms are in place for training diplomates to support this work.

Dr. Sage is currently involved in several clinical research projects. The resident will be given off clinics weeks to participate in these projects (and others).

Educational Environment

Review the Educational Environment expectations listed in the RPE document.

How many formal presentations (e.g. 1 didactic lectures, departmental seminars, scientific presentations, Continuing Education conferences, etc) are expected of each resident during the course of their training? In general, informal topic rounds, journal club, small group teaching, student labs, and similar events should not be included.

Briefly describe the type and extent of teaching opportunities that are provided to the resident throughout the training program.

The resident will be involved in teaching/mentoring imaging interns. Additional opportunities exist for teaching rDVMs in the community via imaging rounds and local CE sessions.

Briefly describe the nature and scope of the teaching file available to the resident(s) in this program and how it is maintained/updated.

Separate servers are maintained with imaging studies labeled and organized by pathology for MRI, CT, and US (cytology, culture, histopathology, and PARR results) cases and reports attached. Currently, there are over 3,000 cases sorted by disease and study type. A histopathology album is also available. A second server has approximately 5,000 cases.

Radiographic teaching files of several hundreds of cases sorted by diagnosis, imaging pattern, and body region are also available.

Cases are added on an on-going basis.

How many Known Case Conferences 36 are conducted annually?

Describe how the resident(s) in this program will attain direct and consistent medical library access and/or how they will access research tools and medical literature including the suggested references listed in the ACVR Preliminary Examination study guide?

Digital access via an institutional database will be provided, as well as current subscriptions.

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Evaluation and Protection of Residents

Did all of your current residents adequately complete the last 6 months of training?

No current residents

List the current members of the resident review committee.

Jaime Sage, Erin Epperly

Describe the internal mechanisms in place at your institution to protect the resident(s) if personal or organizational conflicts arise. Include the management hierarchy for residents and procedures by which residents would report workplace misconduct.

Brittany Gerritz, BSN, is our operations manager and HR contact. If she cannot resolve the issue, she will bring it to Dr. Jaime Sage to help. If the issue arises directly with Dr. Sage, Dr. Andy Claude will help mediate the issue.

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Appendix

Please provide the following information regarding preliminary and certifying board exam pass rates for residents in your program over the past five years.

Preliminary Board Exam Pass Rate

2020

Number Of Prelim Board Eligible Residents: 0

Number of Residents That Took Prelim Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple Attempts: 0

Number of Residents That Have Not Passed: 0

2019

Number Of Prelim Board Eligible Residents: 0

Number of Residents That Took Prelim Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2018

Number Of Prelim Board Eligible Residents: 0

Number of Residents That Took Prelim Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2017

Number Of Prelim Board Eligible Residents: 0

Number of Residents That Took Prelim Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2016

Number Of Prelim Board Eligible Residents: 0

Number of Residents That Took Prelim Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

Certifying Board Exam Pass Rate

2020

Number of Certifying Board Eligible Residents: 0

Number of Residents That Took Certifying Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2019

Number of Certifying Board Eligible Residents: 0

Number of Residents That Took Certifying Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2018

Number of Certifying Board Eligible Residents: 0

Number of Residents That Took Certifying Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2017

Number of Certifying Board Eligible Residents: 0

Number of Residents That Took Certifying Exam: 0

Number of Residents That Passed On 1st Attempt:
0

Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

2016

Number of Certifying Board Eligible Residents: 0

Number of Residents That Took Certifying Exam: 0

Number of Residents That Passed On 1st Attempt:
0


Number of Residents That Passed After Multiple
Attempts: 0

Number of Residents That Have Not Passed: 0

Program Schedule

Upload a schedule for your residents that outlines their clinical and non-clinical work over the course of the residency program. This may be a master schedule or duty roster for your entire radiology section, if desired. If available, an example weekly or monthly rounds schedule can also be included.

Program Schedule

 Basic resident schedule.docx

Affiliation Agreements

Upload digital copies of any affiliation agreement(s) in place for the following: