

# AMERICAN BOARD OF VETERINARY OPHTHALMOLOGY

PO Box 1311 - Meridian, Idaho 83680

Ph (208) 466-7624 | Fx (208) 466-7693 | [www.abvo.us](http://www.abvo.us)



## SUPERVISING DIPLOMATE FORM (2015)

### Definitions

<b>Guidelines:</b>	A set of written instructions developed and regularly updated by the ABVO Credentials Committee to guide Examination Applicants, Provisional Residents, and Supervising Diplomates through the ABVO credentialing process.
<b>Residency:</b>	A residency training program approved by the ABVO Residency Committee.
<b>Resident:</b>	A veterinarian who has been accepted into an ABVO-approved residency by the sponsoring program, who has been accepted by the ABVO Credentials Committee as an ABVO-approved resident, who is actively engaged in the residency program.
<b>Supervising Diplomate:</b>	An ACVO Diplomate registered with the ABVO Residency Committee as a “Supervising Diplomate” for any part of any of an ABVO-approved resident’s program.
<b>Provisional Resident:</b>	A veterinarian who has been accepted into an ABVO-approved residency by the sponsoring program who is applying to the ABVO Credentials Committee to be accepted as an ABVO-approved resident.
<b>Examination:</b>	The ABVO Certifying Examination.
<b>Examination Applicant:</b>	A veterinarian applying to the ABVO Credentials Committee to take the ABVO Certifying Examination.
<b>Certified Copy:</b>	A photocopy of a document in its entirety, accompanied by the following sworn and signed statement: “I swear or affirm under the penalties of perjury that the submitted documents are true and correct copies of <u>[insert document name]</u> .” The signature on this statement must be acknowledged by a court clerk, lawyer, or notary public.

### Guidelines for Certifying Examination Application and Supervising Diplomate Form:

1. The Certifying Examination Application must be completed by all Examination Applicants every year they apply to take any part(s) of the ABVO Certifying Examination.
2. The Supervising Diplomate Form must be completed by all Supervising Diplomates of Examination Applicants who are submitting their credentials for the first time. Supervising Diplomate forms are not required for Examination Applicants who have successfully completed the credentials process and who are reapplying to take the Certifying Examination.
3. All Supervising Diplomates associated with any part of a residency training program from which the Examination Applicant is claiming experience to satisfy the 36-month minimum training requirement must submit a completed Supervising Diplomate Form.
4. Any Supervising Diplomate whose supervisory role ends prematurely (due to the resident or Supervising Diplomate leaving the training program) must submit a completed Supervising Diplomate Form within one month of the severance occurring.
5. Separate Supervising Diplomate Forms must be submitted for each Examination Applicant by each Supervising Diplomate.

*Please submit this form and any attachments to the ABVO office at [ABVO Office](#) and pay all required fees online so as to ensure RECEIPT of all materials by midnight Mountain Time, JANUARY 15. Revised 10/2014*

6. The Supervising Diplomate Form must be submitted by the Supervising Diplomate, not by the Examination Applicant.
7. Supervising Diplomate Forms may be submitted prior to completion of the Examination Applicant's residency program. However, it is the responsibility of the Supervising Diplomate to advise the Credentials Committee of any changes that occur between the submission of the form and the end of the Examination Applicant's residency that would warrant a change in the Supervising Diplomate Form.
8. The Residency Committee's record of Supervising Diplomates associated with an Examination Applicant's residency program will be used to determine the list of Supervising Diplomates required to submit Supervising Diplomate Forms for each Examination Applicant. The Residency Committee Chair will send this list to Examination Applicants or Supervising Diplomates upon request. Failure to receive this list is not grounds for failure to submit the required paperwork or for appeal.
9. Answers to all questions on all credentials forms must include consideration of any and all residency programs from which the Examination Applicant is claiming experience to satisfy their 36 month minimum training requirement.
10. The ABVO reserves the right to verify any data provided and to request further data.
11. It is the responsibility of each Examination Applicant and Supervising Diplomate to state under penalty of perjury that the information they provide is, to the best of their knowledge and belief, true and correct.
12. Typing one's name in the space marked "Digitally signed" constitutes an electronic signature.
13. All forms and attachments must be typed, not handwritten.
14. All forms and attachments must be sent as pdf documents attached to an email that arrives at the ABVO office ([ABVO Office](#)) before **midnight Mountain time on January 15th.**
15. All required fees must be paid by credit card by **midnight Mountain time on January 15th** via the secure online website:  
<https://www.mtgs-etc.com/registration/mi/abvo/credentials/ABVOcredentials.asp>
16. The ABVO Office will make every effort to acknowledge receipt of materials via return email within 2 business days, but the responsibility for confirming receipt of materials by the ABVO Office is the Applicant's. Having sent an email to the ABVO Office does not guarantee receipt.
17. Forms or attachments received after the deadline, incomplete forms, submissions not using original and current versions of all forms, or failure to pay all fees will render the Examination Applicant's credentials packet incomplete. An incomplete Certifying Examination Application may not be accepted.

### **Appeal of Adverse Decisions**

A complete description of the credentialing process and appeals of adverse decisions is included in the ABVO Policies and Procedures document and on the [ABVO.us](#) website. Applicants, Provisional Residents, and Supervising Diplomates are encouraged to read this document. A brief summary of the appeals process is included here:

1. A Supervising Diplomate, Provisional Resident, Resident, Applicant, or Candidate may, at their option, petition the ABVO to reconsider any adverse decision regarding residency training, credentialing, or certification.
2. Adverse decisions by an ABVO Committee may include, but are not limited to: denial of certification of an individual, denial of adequacy of credentials of an individual, denial of approval of a Residency or Resident, or revocation of approved status of a Resident, Supervising Diplomate or Residency.
3. The affected party desiring to appeal an adverse decision must adhere to the following procedures:

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- (a) The appeal for reconsideration must be written and shall include a statement of the grounds for reconsideration and documentation, if any, in support of the appeal.
  - (b) Appeals should be on the grounds that the ABVO or one of its Committees has ruled erroneously by disregarding the current Policies and Procedures of the ABVO or relevant ABVO Committee, or failing to consider relevant evidence and documentation presented.
4. The ABVO Board shall appoint an ACVO Diplomate to chair an ad hoc Committee (“Reviewing Body”). The Reviewing Body will consist of a public member and 4 ACVO Diplomates, none of whom is currently serving on the ABVO Board or as a member of an ABVO Committee, and none of whom have perceived or real conflicts of interest with the appellant. The Chairperson shall select the remaining committee members.
5. The Reviewing Body may seek further information in any form from the appellant, ABVO Committee, ABVO Board, or any other resource. The appellant or other relevant individuals may, at the discretion of the Reviewing Body, be invited to appear at a meeting of the Reviewing Body or to participate in a conference call with the Reviewing Body.
6. The Reviewing Body may, at its discretion, re-review or arrange re-review of any portion or all of the material involved in the adverse decision(s) in question. The re-review will be guided by current Policies and Procedures of the ABVO and its Committees. The Reviewing Body will report their decision to the ABVO Board. The original decision will be changed only if the Reviewing Body unanimously agrees that the decision being reviewed should be changed.

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## SUPERVISING DIPLOMATE FORM (2015)

1. Examination Applicant's (Resident's) name: \_\_\_\_\_

To the best of your knowledge, has this Examination Applicant ever (Questions 2-4),

2. Practiced veterinary medicine using any other name?  Yes\*  No

\*If "Yes", provide all names previously used. \_\_\_\_\_

3. Previously applied to take the ABVO certifying examination?  Yes\*  No

\*If "Yes", what was the year of their first credentials application? \_\_\_\_\_

4. Had an ABVO credentials application declined?  Yes\*  No

\*If "Yes", please provide an explanation on a separate page.

5. Name of all Institution(s)/Practice(s) at which you were this Examination Applicant's Supervising Diplomat. (If more space is needed, please append a separate page):

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

6. Completion or expected completion date of this Examination Applicant's residency program:

\_\_\_\_\_

To the best of your knowledge (Questions 7-10),

7. Does the Examination Applicant hold a DVM or equivalent veterinary degree?  Yes  No\*

8. Has the Examination Applicant had or are they scheduled to have had by the end of their residency at least 48 months of full time veterinary experience since graduation as a veterinarian, 12 months of which were full time clinical practice as a veterinarian acquired before the residency program began?  Yes  No\*

9. Will the Examination Applicant have successfully completed an ABVO-approved residency program before August 1<sup>st</sup> in the year in which the exam is to be taken?  Yes  No\*

10. Is the Examination Applicant on track to achieve a level of skill and knowledge sufficient to allow you to recommend acceptance of their Certifying Examination Application without reservation?  Yes  No\*

\*If you answered "No" to any of Questions 7-10, please provide further details on a separate page.

By typing my name below, I hereby affirm, under penalty of perjury, that all information I have provided in this form and any attachments is, to the best of my knowledge and belief, true and correct.

Digitally signed (Supervising Diplomat): \_\_\_\_\_ Date: \_\_\_\_\_

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