**AMERICAN BOARD OF**

**VETERINARY OPHTHALMOLOGY**

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**RESIDENCY TRAINING PROGRAM APPLICATION**

Name document file: INSTITUTION.YearProgramBegins.APPLICATION

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SEND TO: office@ACVO.org

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**DEFINITIONS AND ROLES**

1. Corresponding Supervising Diplomate: A Supervising Diplomate, designated by the institution or practice, who is responsible for all communications regarding the Resident, particularly with the Residency, Credentials, and Examination Committees. The Corresponding Supervising Diplomate is also responsible for oversight of the Residency Training Program. The Corresponding Supervising Diplomate does not need to be the same individual for each Resident in a multi-resident practice.
2. Direct supervision: That time a Supervising Diplomate or External Participant is physically present in the clinical facility and actively engaged with the Resident in clinical service to patients. Direct supervision during surgery requires the physical presence of the supervising diplomate in the operating theater.
3. Residency Training Program (RTP): An institution, practice, or a collaboration of institutions and/or practices that provide the personnel, facilities, caseload, and educational experiences required to train residents in ophthalmology to meet minimum standards for ABVO board certification. A training program must be approved by the Residency Committee of the American Board of Veterinary Ophthalmology (ABVO).
4. Resident: A veterinarian who has been accepted into an ABVO-approved RTP, and who has been accepted by the ABVO Credentials Committee as an ABVO-approved Resident, and who is actively engaged in the RTP.
5. Supervising Diplomate: An ACVO Diplomate who provides direct supervision to the Resident, participates in all aspects of resident training and is listed on the RTP as such. This includes sharing in case management responsibility in the clinical setting. A Supervising Diplomate must provide appropriate case consultation and presence on the clinic floor on a daily basis, be in-house while the resident is performing non-emergency surgery, and be available for consultation when the resident is performing emergency surgery. In addition, Supervising Diplomates actively participate in additional resident training, including slide rounds, histopathology rounds, journal reviews, seminars, and other educational events.
6. External Participant: An ACVO Diplomate who participates in some, but not all, aspects of resident training and provides direct clinical supervision of a Resident for less than 100 days and is not listed on the RTP. These are typically Diplomates who are supervising residents visiting other practices, those providing coverage (locums) when Supervising Diplomates are unavailable, and those exposing the Resident to surgical techniques, instrumentation, or species not routinely available at the RTP institution or practice. External Participants can supervise residents in the same way Supervising Diplomates do throughout this document. External Participants do not have to submit final credentials forms for residents they supervise, however, they need to send an evaluation of the resident to the Corresponding Diplomate. The Corresponding diplomates must inform the Residency Committee when External Participants are participating in the RTP, and must submit the appropriate online form.
7. A Supervising Diplomate Resident Information Form should be completed by/when:
	1. All Supervising Diplomates at the beginning of their first RTP
	2. When a Supervising Diplomate either enters or leaves the role of training in an already approved Residency Training Program.
	3. When a External Participant, who is not included on the original Residency Training Program application, is scheduled for a period of supervision. External Participants do not have to submit Credentials forms for residents.

**APPLICATION INSTRUCTIONS**

1. Program start dates are limited to Jan 1-Feb 1 and July 1-Aug 1.
2. Complete RTP Applications from institutions that are currently training 1 or more Residents must be submitted **BY AUGUST 15TH** for consideration prior to the ACVO meeting or **FEBRUARY 15TH** for consideration in the spring. Programs will not be considered on a rolling basis. Individual requests (last minute funding etc. may be considered on a case to case basis as long as existing programs are submitted 90 days before the start of the program and new programs are submitted 120 days before the start of the program).  No time accrued by an individual prior to RTP approval shall count toward completion of the RTP. RTP approval should be obtained prior to accepting a resident for the position.
3. The RTP Application and all attachments must be submitted to the ABVO (office@ACVO.org) in electronic format with electronic signature by the Corresponding Supervising Diplomate. Incomplete RTP Applications will not be reviewed; however, the Corresponding Supervising Diplomate will be notified of Application deficiencies. The official application date is the submission date of a complete and accurate RTP.
4. One RTP Application is required for each Resident.
5. The original Application must be signed by all Supervising Diplomates. Lack of all appropriate signatures will render the Application incomplete.
6. Supervising Diplomates for the RTP must also submit Supervising Diplomate credentials forms for residents they have supervised as required by the ABVO Credentials Committee during the credentialing process for the resident. Supervising Diplomates who leave the program are also required to submit appropriate credentials documentation for residents they have supervised, as dictated by the ABVO Credentials Committee requirements, as well as the Supervising Diplomate Resident Information form.

1. A copy of the approved Application form and supporting documents will be sent to the Resident at the beginning of the program.

**RESIDENCY TRAINING PROGRAM REQUIREMENTS**

Specific requirements for ABVO residency training programs are outlined in the following sections. All Supervising Diplomates should review these requirements, the Program Supervision Changes document, and the relevant sections of the Residency Committee and other Committees’ Policies and Procedures, and are responsible for compliance with them throughout the RTP. These documents are available at www.ABVO.us.

**HARRASSMENT & DISCRIMINATION POLICY AND ETHICS POLICY GUIDANCE**
ABVO values a safe workplace environment, free from harassment and discrimination. So that all residents and mentors abide by ACVO’s related policies, every Corresponding Diplomate has agreed to honor the above named policies in the program’s workplace. If a resident experiences treatment that would violate these policies, they are encouraged to report the situation to the company’s Human Resource Department, as they are best placed to deal with such situations. If appropriate, the resident may also consider making a complaint to the ACVO Ethics Committee against the diplomate, or the program, as outlined in the policy for the committee. Both of the above named policies are located on the [DACVO.org website](https://www.dacvo.org/members-only) under the ‘members-only’ category.

**Resident Candidates:**

1. The candidate must possess a DVM/VMD or equivalent degree.

1. The candidate must have at least 12 months of clinical veterinary experience after veterinary graduation.
2. The candidate must be authorized to practice veterinary medicine through licensure or other means stipulated by the relevant regulatory board in the state/province/country of the RTP and in any external rotations that will be considered part of their clinical training.
3. The candidate must have a provisional resident application approved by the Credentials committee.

**Program Structure and Personnel Requirements:**

1. Two Supervising Diplomates may train 1-3 Residents, and 3 Supervising Diplomates may train 1-4 Residents (one additional SD is required for each additional resident beyond three). All Residents (ABVO, ECVO, etc.) count towards this equation. If the above requirement is no longer met because of unexpected changes, see Program Supervision Changes document. Each resident must be trained by >1 Supervising Diplomate. Each resident must have at least 100 supervised clinical days with a second (or more) Supervising Diplomates.
2. Two (or more) ACVO Diplomates who are not employed in the same institution can work together to conduct a Collaborative RTP. Additional criteria concerning facilities, advanced scheduling, numbers of days each Supervising Diplomate supervises the resident in a clinical setting, and participation of Supervising Diplomates in non-clinical training of the resident during the program should be listed in the RTP application. All other requirements outlined in the RTP must also be met. For Collaborative programs, a 3- or 4-year RTP Master Schedule must be provided to the Residency Committee with the application before the program can be approved.
3. RTP master schedules (overall program schedule) or 6-month schedules may, at the discretion of the Residency Committee, also be requested from the Corresponding Supervising Diplomate of any other RTP.
4. The minimum length of an RTP is 156 weeks. The ABVO requires that all residents receive clinical ophthalmology training for a minimum of 104 of those 156 weeks. For both requirements, a week is defined as 5 full working days (at least 40 hours), thus an RTP must be ≥ 780 days of which ≥ 520 days must be spent in clinical ophthalmology training.
5. The minimum required “off clinic time” for professional development is 15% of the duration of the program (117 days). This time does not include vacation, sick days, or weekend days and should be free from all clinic duties including after-hours emergency duty.
6. The minimum requirement for clinical ophthalmology training is 520 days. Days that the clinic is normally closed, but the Resident is on emergency duty, do not count toward the minimum requirement for clinical ophthalmology training, but Supervising Diplomates (or External Diplomates if Supervising Diplomates are not available) should still be available for emergency/after-hours consultation.

**Program Supervision:**

1. All Supervising Diplomates are expected to guide the Resident through medical, surgical, and academic training by direct, personal, one-on-one instruction throughout the entire program. Initially, supervision and instruction are expected to be intensive, while gradually allowing the Resident more independence with experience. A junior Resident working with a senior Resident is not considered supervision for the purposes of fulfilling RTP requirements.
2. During the RTP, ≥ 80% (i.e. ≥ 416 days) of all clinical training must be under Direct Supervision by a Supervising Diplomate. 100% direct supervision is required during the first 6 months of clinical duty. An exception to this is made for the annual ACVO meeting since attendance is often mandatory for Supervising Diplomates and Residents. In this unique situation, it is acceptable to have a first-year Resident in the first 6 months of their RTP work without Direct Supervision for the time associated with the meeting only.
3. One Supervising Diplomate or External Participant may provide Direct Supervision to a maximum of 2 Residents concurrently while active on the clinic floor. Additional Residents on the clinic floor during that time cannot count this as time as Direct Supervision.
4. A minimum of 100 days (20% of the 416 minimum clinical training days) must be spent with at least one additional or multiple Supervising Diplomates.

**Program Supervision Changes**

1. Changes to program supervision and consequences are outlined in the Program Supervision Changes, Probation, Suspension, and Revocation document found on the ABVO website.
	1. The Corresponding Supervising Diplomate is responsible for notifying the Residency Committee in advance of planned changes in personnel and within 15 days for unplanned changes. A Supervising Diplomate Residency Information Form should also be submitted on the ABVO website.
	2. Substantive changes that are planned or anticipated in a residency training program must be submitted to ABVO for approval prior to implementation of those changes. Substantive changes are changes to personnel, locations and to facilities or equipment that would prevent a program from continuing to meet minimum standards. No new residents may begin a residency at a program that is on probation or suspended.

**Program Evaluations**

1. All Supervising Diplomates are required to provide the Resident with a written progress evaluation at 6-month intervals.
2. A Program Evaluation Form from the Resident and Corresponding Supervising Diplomate must be completed and submitted to the ABVO Residency Committee every 6 months. These forms are available on the www.abvo.us in the member portal, with additional Google spreadsheets supplied to each resident by the Residency Committee. Forms are due January 5 and July 5. Residents in 4-year programs and not on clinics are still required to submit the 6-month evaluation forms.

**Program Educational Requirements**

1. A minimum of at least 2 hours per month of educational topic review is required. At least one Supervising Diplomate or External Participant is required to participate in these reviews either in person or via electronic transmission. Attendance at the Basic Science Course can be counted as 2 hours of educational topics for that month.
2. A minimum of 12 hours of histopathology training, with a maximum of 2 hours/month is required annually. At least one Supervising Diplomate or board-certified veterinary pathologistis requiredtoparticipate in these training sessions either in person or via electronic transmission. Attendance at the Basic Science Course can be counted as 2 hours of histopathology training for that month.

**Equipment and Additional Resources:**

1. The RTP facilities must have the following equipment, in sufficient quantity and in working order:
	1. Direct ophthalmoscope
	2. Binocular indirect ophthalmoscope
	3. Electronic tonometer
	4. Slit lamp biomicroscope
	5. External camera
	6. Goniolens
	7. Electroretinogram
	8. Ophthalmic laser
	9. Cryosurgical unit
	10. Operating microscope
	11. Phacoemulsification unit
	12. Microsurgical instruments
	13. Microscope (for cytology, etc.)
	14. Ocular ultrasound
	15. CT or MRI capability (on or off site)

1. The RTP must provide access to a medical library that contains the texts and journal titles listed as sources of test material by the ABVO Examination Committee.
2. The RTP must provide access to professional support services in clinical pathology, microbiology, and virology.

**Minimum Species Examination Requirements:**

1. Minimum species examination requirments must be met by the Resident. The Resident is **required to maintain a species log throughout their program** that is summarized with the Program Evaluation Form at 6-month intervals and at the end of the RTP. The species case log should indicate in sequential columns: 1) the species evaluated, 2) the date of the clinical evaluation, 3) the Supervising Diplomate/ External Participant (if applicable) providing Direct Supervision, and 4) the hospital case identification number for dogs, cats, and horses. Hospital identification numbers (medical record numbers) are ONLY required for species with minimums and only for the minimum number of cases; after minimums are reached, the number of species seen each day and the supervising diplomate can be listed without including the hospital identification number. Every resident will receive a Google spreadsheet from the Residency Committee to track cases.
2. During the course of their RTP, Residents are required to examine a minimum of **1,500 dogs, 150 cats, 50 horses, and 35 individual cases of at least 3 “additional species”** (cows, pigs, goats, sheep, camelids, birds, lab animal/exotic/pocket pets). These examinations must be performed with the Supervising Diplomate examining the animal directly preceding or following the Resident and discussing/critiquing the Resident’s findings with them.

* 1. For dogs and cats, examinations used to meet minimum requirements, Direct Supervision and instruction in the clinical setting are expected to be strict, while gradually allowing the Resident more independence as time goes on. However, it is expected that continued interaction on the clinic floor would be the norm for the entirety of the RTP. The Supervising Diplomate is expected to use their judgment regarding the degree of independence allowed, based on their assessment of the Resident’s abilities.
	2. For equine and individual cases of at least 3 “additional species” (cows, pigs, goats, sheep, camelids, birds, lab animal/exotic/pocket pets) examinations used to meet minimum requirements, these examinations must be performed with the Supervising Diplomate examining the animal directly preceding or following the Resident and discussing/critiquing the Resident’s findings with them.
	3. For dogs, cats, and horses, examinations used to meet minimum requirements must be performed on a case with an ophthalmic complaint/condition, and not on a normal animal or animals presenting for eye certification examinations. Initial and recheck examinations on these clinical patients may both be counted towards fulfilling case minimum requirements.
	4. For the “additional species”, clinical patients or normal animals may be examined to contribute towards the required minimums. However, each individual *normal* animal in this category may only be counted once by the Resident towards examination minimum numbers.
	5. Repeat examinations of hospitalized patients cannot be counted as additional case examinations for any species.

**Minimum Surgical Requirements**

1. Minimum surgical requirements must be met by the Resident. Meeting these minimums is incumbent upon the Supervising Diplomates to ascertain over the course of the RTP.

1. The Resident is **required to maintain a surgical log** throughout their program that is summarized with the Program Evaluation Form at 6-month intervals and submitted at the end of the residency period. The surgical logs should indicate in sequential columns: 1) date of surgery, 2) patient medical record number, 3) patient species, 4) surgery performed, 5) which eye operated on, 6) role of the Resident in the surgery (Level 1-3, A or B), 7) name of ACVO Diplomate supervising the surgery if Level 1 or 2, or name of other clinician/Resident supervising surgery if Level A or B. Only ONE level should be designated for each surgery. Each resident will receive a Google spreadsheet at the start of their residency program from the Residency Committee to track cases. Also refer to RTP Supplemental Surgical Guide document on the ABVO website. Although we are only requiring tracking of level 2 surgeries, we would appreciate a complete surgical log for ongoing research purposes.
2. Levels of surgery are defined follows.:
	1. Level 1: The procedure is performed by a Supervising Diplomate with the Resident assisting.
	2. Level 2: The procedure is performed by the Resident with a Supervising Diplomate providing Direct Supervision. The Supervising Diplomate must either participate in the capacity of assistant surgeon or be physically present in the operating room throughout the procedure. The Resident must perform all critical steps of the procedure for it to count towards Level 2 required minimums.
		1. Please see the ABVO RTP Surgical Guide Categories for additional assistance categorizing surgeries.
	3. Level 3: The procedure is performed by the Resident without Supervising Diplomate assistance.
		1. Level 3A: The procedure is performed under the supervision of another ABVO Resident.
		2. Level 3B: The procedure is performed under the supervision of a veterinarian who is not an ACVO Diplomate or ABVO Resident.
3. During the course of their RTP, Residents are required to perform a minimum number of the following **Level 2 surgeries** (\* indicates surgeries that may be performed on cadaver specimens):
	1. **25 lens extractions**:
		1. 25 lens extractions
		2. 5 \*intracapsular or \*extracapsular lens extractions may count towards the required 25 lens extractions.
	2. **15 anterior segment:**
		1. Penetrating keratoplasty, corneoconjunctival transposition, lamellar keratectomy, corneal laceration repair, corneal graft, conjunctival flap/graft, \*suprachoroidal CsA implant placement, etc.
		2. Diamond burr, grid keratotomy, anterior stromal puncture, and debridement techniques may not be counted toward minimum anterior segment surgical procedures.
	3. **15 adnexal**:
		1. Entropion, ectropion or eyelid laceration repair, eyelid/conjunctival mass removal, eyelid reconstruction, etc.
	4. **5 orbit and globe:**
		1. Orbitotomy, enucleation, evisceration, exenteration, etc.
	5. **5 nasolacrimal:**
		1. \*Parotid duct transposition, third eyelid gland replacement, nasolacrimal duct reconstruction
	6. **5 vision-sparing glaucoma techniques:**
		1. \*Cycloablation, \*shunt placement, or \*combination techniques

**Insufficient Species Examination or Level 2 Surgery Minimums:**

1. The Corresponding Supervising Diplomate is ultimately responsible for ensuring the Resident is progressing towards and ultimately meeting these requirements. The Corresponding Supervising Diplomate will confirm in the 6-month evaluations whether they believe the Resident is making sufficient progress. The goal is to meet minimum requirements by the 2nd to last 6-month evaluation prior to residency completion.
2. Residents not achieving these species examination or Level 2 surgery minimums will not have successfully completed an ABVO-approved RTP and will therefore be ineligible for certification as a Diplomate until this is remedied. Residents who have not completed minimum requirements by the January 5th deadline for 6-month evaluations of the year in which they are to take the examination must submit their final 6 month evaluation on June 1st (instead of July 5th).
3. If the Supervising Diplomates determine that these minimums will not be met by the end of the RTP, the Corresponding Supervising Diplomate and Resident must contact the Residency Committee with a mutually agreed upon written plan to meet the requirements. The Residency Committee will review the plan and determine if it is acceptable. If a resident completes their residency without completing the minimums, they may take the examination but cannot obtain diplomate status until the minimum case requirements are met.

**Program Probation, Suspension, or Revocation**

Residency training programs and Supervising Diplomates are subject to approval by the Residency Committee; a decision to deny approval can be appealed to the Appeals Committee.

**RESIDENCY TRAINING PROGRAM APPLICATION**

**PLEASE COMPLETE THE FOLLOWING**

**PROGRAM INFORMATION**

Beginning Date of Program (be specific): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ending Date of Program (be specific): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sponsoring Institution/Practice(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address(es): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Residents Now in Training Expected Date of Program Completion

(List all ophthalmology Residents

in training: ABVO, ECVO, etc.)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervising Diplomate(s): E-mail address: \*\*Expected # of days in the clinic per year:

1.\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

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5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

\* Indicates the Corresponding Supervising Diplomate for this program

**CLINICAL TRAINING**

Indicate the *number of days\** of the Resident’s time that will be devoted to the clinical ophthalmology service:

Year one \_\_\_\_\_\_\_\_\_\_

Year two \_\_\_\_\_\_\_\_\_\_

Year three \_\_\_\_\_\_\_\_\_

Year four (if applicable) \_\_\_\_\_\_\_\_\_\_

\*Number of expected weeks in the clinical setting per year multiplied by the number of days per week that the clinic is open to the public. Examples: resident vacation 2 weeks per year, off one week per year ACVO meeting. Resident off one day per week study time. 52 - 3 = 49 weeks, 49 x 4 = 196 days per year, if a four day work week. Or, resident vacation two weeks/year, one week off for ACVO meeting, 9 weeks off per year for study/graduate project/research, 5 days per week clinical duty. 52 - 11 = 41 weeks per year, 41 x 5 = 205 days per year. For year where resident attends ACVO Basic Science Course, subtract additional 15 days.

Does the RTP facility possess the equipment, in sufficient quantity and in working order, as outlined above in the “Equipment and Additional Resources” section? Yes\_\_\_\_\_ No\_\_\_\_\_

Is there a medical library available at the RTP location that meets the requirements outlined above in the “Equipment and Additional Resources” section? Yes\_\_\_\_\_ No\_\_\_\_\_

*How is access to a medical library provided as described above in the “Equipment and Additional Resources” section?*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are professional support services in clinical pathology, microbiology, and virology available at the RTP location? Yes\_\_\_\_\_ No\_\_\_\_\_

*How is access to those services that are not available at the RTP location provide?*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Agreements (Check both below boxes to proceed):**

[ \_\_\_ ] I have read the ACVO’s Harassment & Discrimination policies, and agree that our program will follow these policies. I recognize that violating these policies in our program could result in a termination of this and future programs. (Please initial in the box provided.)

[ \_\_\_ ] I have read the ACVO’s Ethics Policy, and agree that our program will follow these policies. I recognize that violating these policies in our program could result in a termination of this and future programs. (Please initial in the box provided.)

[ \_\_\_ ] I, the corresponding diplomate, agree that I am responsible for the resident and any deadlines for both the provisional resident, current resident, and all RTP Supervising Diplomates. All pertinent information and deadlines can be found on the [www.ABVO.us](http://www.ABVO.us) website. (Please initial in the box provided.)

By signing below, each Supervising Diplomate acknowledges that they have read and will comply withthe residency training standards of the ABVO, as defined in the preceding pages and in the Policies and Procedures of the ABVO Residency Committee available at www.ABVO.us. and that they will forward within prescribed time limits to the ABVO office all information concerning changes in the RTP. They also acknowledge they have read the RTP Supplemental Program Supervision Changes and the Surgical Guide document available at abvo.us. They also acknowledge that they have read and will comply with the Ethics Statement of the ABVO and ACVO.

Supervising Diplomate(s):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

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Signature of Department Head (or equivalent) acknowledging the institution will provide all RTP requirements:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_

Material alteration of this document (other than answering the questions posed) prior to submission and formal approval will render this application void