

ACVS CERTIFICATE FOR DUAL EMPHASIS

DUAL CERTIFICATION

(2/2007)

Based on input from Diplomates of the ACVS and discussion by the Board of Regents, there is consensus of opinion that the ACVS should develop a program to allow ACVS Veterinary Surgeons to add an animal emphasis, termed *Dual Certification*. Although current AVMA guidelines do not preclude ACVS Veterinary Surgeons from serving as surgical specialists in an animal emphasis in which they are not residency trained, ethical considerations and peer perception might prevent these individuals from advertising themselves as specialists to the general public or referring veterinarians. The following protocol outlines the criteria required to achieve *Dual Certification*, enabling ACVS Veterinary Surgeons to be endorsed by the College to advertise and practice in an animal emphasis in which they are not residency trained or certified. The proposed criteria fall into two broad categories: 1) Diplomates who passed the Certification Examination prior to 2001 and have practiced for greater than 5 years as surgical specialists in an animal emphasis in which they were not residency trained; and 2) Diplomates who obtained ACVS Diplomate status in 2001 or later or obtained Diplomate status prior to 2001 and have practiced for less than 5 years as surgical specialists in an animal emphasis in which they were not residency trained.

To meet the criteria for submission of documentation for *Dual Certification*, it is required that the applicant be an active Diplomate of the ACVS.

DESCRIPTION OF DUAL CERTIFICATION

- I. **Definition:** Diplomates who achieve *Dual Certification* shall be endorsed by the ACVS to advertise and promote themselves as specialists in the alternate animal emphasis other than their veterinary residency training. The process of *Dual Certification* is meant to assure the general public, referring veterinarians, and other Diplomates in the ACVS that Diplomates who have achieved approval by the Board of Regents for *Dual Certification* have met specific criteria, as set forth in this protocol, demonstrating sufficient expertise in the animal emphasis in which they are not residency trained to be deemed specialists in this animal emphasis.
- II. **Specific Program Description:**
 - A. For Diplomates who passed the Certification Examination prior to 2001 and have practiced for more than 5 years as surgical specialists in an animal emphasis in which they are not residency trained, all of the following criteria must be met.
 1. A one page narrative must be submitted outlining the Diplomate's surgical practice, average annual surgical caseload, the percent distribution of orthopedic vs. soft tissue cases, other specialists in the hospital, species emphasis, opportunity for radiographic review and any other relevant experience over the previous 5 years.
 2. For Diplomates who completed large animal surgical residency programs, the completion of a minimum of 400 surgical procedures of any type as described in the small animal curricula (**ACVS Form 2-SA**). For Diplomates who completed small animal surgical residency programs, the completion of 300 procedures of any type as described in the large animal curricula (**ACVS Form 2-EQ; ACVS Form 2-LA**). These procedures are tracked using a modification of the Surgery Case Log (**ACVS Form 7** modified to exclude columns 'Supervisor' and 'D/N') and do **NOT** need to be supervised by an ACVS Diplomate.
 3. Provide two letters of support from species appropriate ACVS Diplomates.
 4. Although not required, if the Diplomate desires, 50% of the surgical procedure requirement may be exempted (i.e. 200 for SA and 150 for LA) if the Diplomate elects to take and then passes both the practical and case based examinations in the appropriate species emphasis.
 - B. For Diplomates who obtained ACVS Diplomate status in 2001 or later or obtained Diplomate status prior to 2001 and have practiced less than five years as surgical specialists in the animal emphasis in which they were not residency trained, the following criteria must be met.

1. A one page narrative must be submitted outlining the Diplomate's surgical practice, average annual surgical caseload, the percent distribution of orthopedic vs. soft tissue cases, other specialists in the hospital, species emphasis, opportunity for radiographic review and any other relevant experience over the previous 5 years, including future specialty goals.
2. For Diplomates who completed large animal surgical residency programs, the completion of a minimum of 250 surgical procedures as described in the small animal curricula (**ACVS Form 2-SA**). One hundred and thirty-five of these surgical procedures must be distributed among the specific categories listed in **Form 2-SA** as follows: NE (15), TH (5), GI (20), AB (5), UG (15), HN (10), SR (15), OR (50). For Diplomates who completed small animal surgical residency programs, the completion of 190 procedures as described in the large animal curricula (**ACVS Form 2-EQ; ACVS Form 2-LA**). For equine emphasis, ninety-five of these surgical procedures must be distributed among the specific categories listed in **Form 2-EQ** as follows: AB (25), FRX (5), WRD (12), TEN (5), ALD (5), FT (5), UG (7), OPH (1), UR (15), AR (15). For large animal emphasis, ninety of these surgical procedures must be distributed among the specific categories listed in **Form 2-LA** as follows: AB (30), FRX (2), WRD (12), TEN (5), ALD (5), FT (5), UG (10), OPH (1), UR (10), AR (10). For all programs, the remaining surgical procedures can be of any type as defined in the species appropriate **Form 2**.

These procedures are tracked using the Excel version of the Dual Certification Program Surgery Case Log (ACVS Form 7) and 50% of these cases must be directly supervised by a species appropriate Diplomate of the ACVS or, when appropriate, by a Diplomate of ACVIM-Neurology, a Diplomate of ACVO, or a Diplomate of AVDC. Direct supervision is defined as the Diplomate being present at the operating table or in the operating room. An Index of Supervisors (ACVS Form 5) must be provided documenting whom the supervisors were for the cases listed on ACVS Form 7.

If the dual certification cannot be completed in 1 year, yearly submission of dual certification documentation should be submitted to the ACVS office for review by the Resident Credentialing Committee by August 1.

3. Specialty service training in anesthesiology, radiology and internal medicine/critical care in the appropriate species (these hours are documented on **ACVS Form 10**):
 - a. Anesthesiology: The dual certification anesthesiology training requirement includes a minimum of 40 hours, supervised directly or indirectly by an ACVA Diplomate, which might include routine and emergency patient care, journal clubs, literature reviews, case discussions, seminars and graduate courses. This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVA Diplomates at the institution(s) involved.
 - b. Radiology: The dual certification training requirement includes a minimum of 80 hours, supervised directly or indirectly by an ACVR Diplomate, which might include participation in patient care, special diagnostic procedures, radiology rounds, journal clubs, case discussions, seminars, various imaging modalities, therapeutic procedures and graduate courses. This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVR Diplomates at the institution(s) involved.
 - c. Internal Medicine/Critical Care: The dual certification internal medicine/critical care training requirement includes a minimum of 80 hours, supervised directly or indirectly by an ACVIM or ACVECC Diplomate, which might include routine and emergency patient care, journal clubs, literature reviews, case discussions, seminars and graduate courses. This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVIM/ACVECC Diplomates at the institution(s) involved in the surgery residency program and the internal medicine/critical care training requirement. The internal medicine specialty service rotation should consist of general internal medicine, not a subspecialty (neurology, cardiology or oncology). This requirement must be fulfilled under a program mutually agreeable to the ACVS and ACVIM/ACVECC Diplomates at the institution(s) involved.
 - d. Emergency Duty: The Diplomate should perform emergency surgery and manage emergency surgical cases in the new animal emphasis being studied. A minimum of 80 hours of emergency duty, supervised directly or indirectly by an ACVS, ACVIM or ACVECC Diplomate, must be completed. A letter confirming this training from a species appropriate ACVS, ACVIM or ACVECC Diplomate must be provided. This requirement

must be fulfilled under a program mutually agreeable to the ACVS and ACVIM/ACVECC Diplomates at the institution(s) involved.

5. Provide two letters of support from species appropriate ACVS Diplomates.
6. Submission of a Credentials Application to the ACVS office by August 1.
7. Acceptance of credentials by the Resident Credentialing Committee and ACVS Board of Regents.
8. Passage of the practical and case based examinations in the appropriate species emphasis.