

ACVR Diagnostic Imaging 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 <u>ACVR Residency Program Essential Training Standards and Requirements</u>(RPE) document (accessed from the Essentials Homepage) 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 Washington State University

Residency Program Director Name Tom Wilkinson, Jr

Residency Program Director Email twilkinson@wsu.edu

Program Type

What type of residency program is being requested?

Traditional Residency Program

If approved, what is the proposed start date of this residency program?

Thursday, February 1, 2024

Objectives

Succinctly state the objectives of the training program.

Have our residents accrue the knowledge and experience to be effective in the interpretation of diagnostic imaging studies and communicate the results of those studies to clinicians in a succinct and accurate manner.

Training Period

What is the total length of the training 36 program?

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

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

Yes

30

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

Board exam and scientific journal preparation

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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 <u>ACVR Residency Program Essential Training Standards and Requirements</u> (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?

85

How many weeks per year will the Residency Director be on clinical service and teaching residents at the primary training institution? 42

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Additional Training Diplomates

Please review the definitions and responsibilities of <u>Supervising Diplomate</u> and <u>Supporting Diplomate</u> 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 item at the end of this section).

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: John Mattoon

Hours/Year: 1600

Specific Areas and/or Limitations of Instructional Responsibility: none

Institution: Washington State University

Name: Greg Roberts

Hours/Year: 1600

Specific Areas and/or Limitations of Instructional Responsibility:

Institution: WSU

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

Upon completion of this application, the below individuals will receive an email requesting acknowledgement of their support of your residency program.

ACVIM Member Name Rance Sellon

ACVIM Member Institution WSU

ACVIM Member Email rsellon@wsu.edu

ACVS Member Name Tina Owen

ACVS Member Institution WSU

ACVS Member Email tina.owen@wsu.edu

ACVP Member Name Gary Haldorson

ACVP Member Institution WSU

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Resident: Supervising Diplomate Ratio

The number of residents in the program cannot exceed twice the number of Supervising Diplomates **on-site**. Remote Supervising Diplomates will not count when calculating the maximum residents allowed in a given program.

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

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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 item at the end of this section)

All necessary equipment onsite.

Please describe how residents will gain experience in image acquisition and protocol set-up for each of these modalities (excluding nuclear medicine).

Informal training in-hospital.

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Clinical Resources and Training Content

Review the clinical resource and training content 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.

19239

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.

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

Small animal radiology 3606

Large animal radiology 404

Abdominal ultrasound 1135

Non-abdominal ultrasound 60

Computed tomography 920

Magnetic Resonance Imaging 383

Nuclear scintigraphy 11

Other (Specify) 40 (fluoroscopy)

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

Small animals (canine, feline): 85

Large animals (equine, bovine, porcine, etc.): 10

Avian, Exotic, and Wildlife animals: 5

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?

Yes

Echocardiography No

Large animal ultrasound Yes

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

Food/fiber animal imaging	Yes
Exotics imaging	Yes
Teleradiology/Referral imaging	No

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 item at the end of this section).

Cardiology is performed at the primary institution, so they have access to primary cases. They can choose to do a rotation with the cardiology group if they desire.

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What percentage of the total imaging caseload at the primary institution results in a written imaging report being generated by either the residents or the training radiologist diplomates in this program?

99

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

98

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

Yes

If yes, indicate the maximum number of imaging interns the institution will train concurrently, what percentage of the preliminary reports generated from the imaging caseload will be initially produced by the intern(s), and how this affects the resident imaging report caseload.

2 interns concurrently, accounting for a very small percentage of total caseload

What percentage of residentgenerated 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

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

Please describe how after-hours/weekend/holidaycases are handled at the primary institution.

How does this affectresident-reported imaging caseload?

They are now sent out for external read. Residents can review those cases and have the report available for review.

For each category below, calculate the approximate number of cases that a single resident will <u>interpret at the primary institution with radiologist feedback</u> 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	1200
Large animal radiology	100
Abdominal ultrasound	350
Non-abdominal ultrasound	20
Computed tomography	300
Magnetic resonance Imaging	100
Nuclear scintigraphy	3
Other (specify)	10
How many ultrasound exams will a single resident perform with radiologist supervision and feedback during the course of the entire program? Scans for which the resident writes a report but does not acquire images are excluded.	350
Do residents in this program have ample hands-on training and practice opportunities to become proficient in the performance of ultrasound guided fine needle aspirates and biopsies?	Yes

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

Physics of Diagnostic Imaging	Yes
Radiobiology	No
Nuclear Medicine	No

Ultrasonography	No
Computed Tomography	No
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.

VET CLIN 570

Do residents have access to a majority of the written pathology reports that are generated from patients included in this imaging caseload?

Yes

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)

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

If this is an established program, what 30 percentage of residents have made formal research presentations at the annual ACVR or equivalent national meeting?

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.

Without the masters program this is less emphasized. Once the qualifying examination is passed more focus can be placed on investigative work.

Educational Environment

Review the Educational Environment expectations listed in the RPE document.

Please list and enumerate the formal presentations that are expected of each resident during the course of their training. In general, didactic lectures, departmental seminars, scientific presentations, Continuing Education presentations, and similar are considered "formal". Informal topic rounds, journal club, small group teaching (like student rounds), student labs, and similar events should not be included.

Each resident provides two formal presentations in house officer seminar rounds each year.

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

Daily interaction with senior students on the radiology rotation, and rotation students with patients in imaging.

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

PACS and RIS with DICOM images and reports dating back to 2007 (MRI going back to 1996)

How many Known Case Conferences 12 are conducted annually?

Describe the nature and frequency of resident rounds ("other educational events") planned for this program. You may upload an example schedule with the general program schedule that is requested at the end of this application.

Daily rounds that includes discussions about modality strengths and weaknesses, artifacts, etc...

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.

Online access to the university-wide library.

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Evaluation and Protection of Residents

For existing programs, list the names, email contact information, and start/end dates of your current residents.

Derek Standlee derek.standlee@wsu.edu(inherited from UM) end date 7/18/2024 Kimberly Terry kimberly.terry@wsu.edu 7/15/2021 - 07/15/2024

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



List the current members of the resident review committee.

Tom Wilkinson, John Mattoon, Greg Roberts

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.

Hospital director and department chair oversee the radiology section and accept workplace misconduct complaints.

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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

Preliminary Board Exam Pass Rate		
2020	Number Of Prelim Board Eligible Residents: 3	
	Number of Residents That Took Prelim Exam: 3	
	Number of Residents That Passed On 1st Attempt: 1	
	Number of Residents That Passed After Multiple Attempts: 1	
	Number of Residents That Have Not Passed: 1	
2019	Number Of Prelim Board Eligible Residents: 1	
	Number of Residents That Took Prelim Exam: 1	
	Number of Residents That Passed On 1st Attempt: 0	
	Number of Residents That Passed After Multiple Attempts: 1	
	Number of Residents That Have Not Passed: 0	

2018	Number Of Prelim Board Eligible Residents: 1
	Number of Residents That Took Prelim Exam: 1
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 1
	Number of Residents That Have Not Passed: 0
2017	Number Of Prelim Board Eligible Residents: 1
	Number of Residents That Took Prelim Exam: 1
	Number of Residents That Passed On 1st Attempt: 1
	Number of Residents That Passed After Multiple Attempts: 0
	Number of Residents That Have Not Passed: 0
2016	Number Of Prelim Board Eligible Residents: 2
	Number of Residents That Took Prelim Exam: 2
	Number of Residents That Passed On 1st Attempt: 1
	Number of Residents That Passed After Multiple Attempts: 1
	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: 1
	Number of Residents That Took Certifying Exam: 1
	Number of Residents That Passed On 1st Attempt: 0
	Number of Residents That Passed After Multiple Attempts: 1
	Number of Residents That Have Not Passed: 0
2018	Number of Certifying Board Eligible Residents: 1
	Number of Residents That Took Certifying Exam: 1
	Number of Residents That Passed On 1st Attempt: 1
	Number of Residents That Passed After Multiple Attempts: 0

Number of Residents That Have Not Passed: 0

20	1	7
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Number of Certifying Board Eligible Residents: 2

Number of Residents That Took Certifying Exam: 2

Number of Residents That Passed On 1st Attempt: 1

Number of Residents That Passed After Multiple Attempts: 1

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



Affiliation Agreements

Upload digital copies of any affiliation agreements that have not been included elsewhere in this document. Refer to the RPE document for an explanation of what information should be included in such agreements.