

# ACVR RO Residency Training Program Re-Approval Application

**Submission Date**

2018-01-28 17:21:36

**Date of Application**

01-30-2018

**Date of Initial Program Approval**

01-30-2000

**Date of Last Re-Approval**

01-30-2015

**Your Name**

Lisa Forrest

**Your Email Address**

lisa.forrest@wisc.edu

**Your Address**

2015 Linden Drive  
Madison  
WI  
53706

**Program Director(s): (Must be a Diplomate of ACVR Recognized Veterinary Specialty of Radiation Oncology)**

First Name	Last Name	Title/Credentials	Email	Phone #	Number of weeks per year faculty member is available to resident on a daily basis	Fax #
Lisa	Forrest	VMD, DACVR (R, RO)	lisa.forrest@wisc.edu	608-263-5668	48	608-2637930

**Do you have additional ACVR-RO in support of the program?**

yes

Additional Radiation Oncologists in support of the program (Diplomate of ACVR recognized Veterinary Specialty of Radiation Oncology):	First Name	Last Name	Title/Credentials	Number of weeks per year faculty member is available to resident on a daily basis	Faculty Member on site (yes or no)?
	Michelle	Turek	DVM, DACVIM (Oncology), DACVR (Radiation Oncology)	25	YES
	Neil	Christensen	, BVSc(Hons), MANZCVSc, DipACVR (Radiation Oncology)	25	YES

  

If applicable, upload CVs of the Program Director and any supporting Radiation Oncologists:	<a href="#">CURRICULUM VITAE Forrest 2018.docx</a> <a href="#">Christensen CV 2017.docx</a> <a href="#">MTurek Biosketch Jan 2018.doc</a>
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Do you have a radiation oncology resident in training at this time?	Yes
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Residents	First Name	Last Name	Dates of Training
	Audrey	Stevens	07/15/16 - 07/14/19
	Nate	Van Asselt	07/15/17 - 07/14/20

  

Application is made for (check one):	Standard Program
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Primary Site:	UW-Madison School of Veterinary Medicine
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Hospital/University:	UW-Madison School of Veterinary Medicine
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Department:	Surgical Sciences
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Address:	2015 Linden Drive Madison WI 53706
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What is the total length of the training program?	24-36
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If greater than 2 years, will this period include 24 months of continuous training in radiation oncology?	Yes
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Number of months dedicated solely to radiation oncology training (excluding time on Medical Oncology service, Radiology/Imaging, etc.)

18-23

Advanced Degree:

	Yes	No	Optional
Masters	-	✓	-
PhD	-	✓	-

Upload calendar of resident's activities (24 or 36 month) including required rotations and vacation:

[2 year RO schedule.xlsx](#)  
[3 year RO schedule.xlsx](#)

Diagnostic Radiologist(s): (Must be Diplomate(s) of the ACVR or ECVDI):

First Name	Last Name	Title/Credentials	Number of weeks per year a boarded radiology diplomate is available to resident on a daily basis	Faculty Member on site (yes or no)?
Kenneth	Waller III	DVM, DACVR	32	YES
Alexane	Durand	DVM, MVM, DipECVDI, MRCVS	25	YES

Upload CVs of diagnostic radiologists listed:

[Alexane Durand CV.pdf](#)  
[WallerCV\\_2018.docx](#)

Medical Oncologist(s): (Must be Diplomate(s) of the ACVIM, Specialty of Oncology:

First Name	Last Name	Title/Credentials	Number of weeks per year an ACVIM-Oncology Diplomate is available to resident on a daily basis	Faculty Member on site (yes or no)?
Ruthanne	Chun	DVM, DACVIM (oncology)	6	YES
David	Vail	DVM, MS, DACVIM (oncology)	19	YES
Xuan	Pan	VMD, PhD, DACVIM (oncology)	12	YES
MacKenzie	Pellin	DVM, DACVIM (oncology), DACVR (RO)	15	YES

Upload CVs of medical oncologists listed:

[CV\\_Ruthanne Chun.doc](#)  
[David Vail CV.docx](#)  
[MacKenzie Pellin CV.docx](#)  
[Xuan Pan CV 2017-Nov.docx](#)

Surgeon(s): (Must be  
Diplomate(s) of the ACVS:

First Name	Last Name	Title/Credentials	Number of weeks per year an ACVS faculty member is available to resident on a daily basis	Faculty Member on site (yes or no)?
Robert	Hardie	DVM, DACVS	20	YES
Sara	Colopy	DVM, DACVS	32	YES
Susan	Schaefer	DVM, DACVS	25	YES
Jason	Bleedorn	DVM, MS, DACVS	25	YES

Pathologist(s): (Must be  
Diplomate(s) of the ACVP:

First Name	Last Name	Title/Credentials	Drop down	Number of weeks per year an ACVP faculty member is available to resident on a daily basis	Faculty Member on site (yes or no)?
Howard	Steinberg	VMD, PhD, DACVP	Anatomic Pathology	20	YES
Marie	Pinkerton	DVM, DACVP	Anatomic Pathology	25	YES
Jennifer	Dryfus	DVM, DACVP	Anatomic Pathology	25	YES
Karen	Young	VMD, PhD, DACVP	Clinical Pathology	20	YES
Kristen	Friedrichs	DVM, DACVP	Clinical Pathology	20	YES
Allison	Dusick	DVM, DACVP	Clinical Pathology	32	YES

Please list all additional board  
certified specialists in direct  
support of the program. If  
offsite, please explain  
relationship:

Name	Certifying College/Board	Subspecialty (if applicable)	If offsite, please explain relationship
Helena Rylander	ACVIM	Neurology	
Lauren Trepanier	ACVIM	Internal Medicine	
Rebecca Stepien	ACVIM	Cardiology	
Paul Miller	ACVO		
Leslie Smith	ACVA		
Christopher Snyder	AVDC		
Karen Morello	ACVIM	Dermatology	

**Please describe the role of the radiation oncology resident and the radiation oncology service in the daily clinical management of patients and clients:**

Daily morning patient rounds are held to go over patients being treated that day. Residents are assigned to Clinical Duty or Planning Duty.

Clinical Duty involves seeing new and recheck radiation oncology patients, which includes the following: speaking with clients about their pets cancer and health, their expectations for treatment; obtaining appropriate imaging studies and blood work; ordering chemotherapy, if part of the plan. Setting up CT simulations if patients will be receiving RT.

Planning Duty involves managing current patients undergoing RT, registering each patient (aligning current MVCT with planning CT prior to treatment), and meeting with clients at dropoff/pickup as needed. Planning Duty includes contouring planning CT's of patients that will be starting RT and sending them to IMRT planning. This includes working with faculty radiation oncologist and medical physicist for appropriate contours and IMRT parameters and plan approval.

Every afternoon medical and radiation oncology meet to discuss patients seen and/or treated that day. Any imaging done that day will be reviewed.

Radiation Oncology Board rounds are held weekly where all current radiotherapy patients, potential cases, and follow-up on previous patients are discussed.

Surgery, Oncology, Radiation Oncology rounds are held bi-weekly where surgeons, radiation/medical oncologists, radiologists, and pathologists meet to discuss recent oncology patients that have undergone surgery, the pathology reports, and recommendations for further treatment (chemotherapy, radiation therapy, additional surgery).

**How will the resident receive training in Medical Oncology? What is the time allotted to this training? Please provide description of formal and informal training experiences as well as description of the resident's role while rotating on a medical oncology service:**

Radiation oncology (RO) works closely with medical oncology. Primary patient care of RO patients resides with RO. There are daily radiation oncology ward rounds where progress and toxicities of current radiotherapy patients are reviewed and there are daily oncology afternoon rounds to discuss daily appointments (new patients, rechecks; medical oncology & radiation oncology patients). Radiation Oncology Board rounds are held weekly where all current radiotherapy patients, potential cases, and follow-up on previous patients are discussed. There are weekly Oncology Group Meetings where journal articles, research updates and clinical management concerns are presented. There are weekly clinical pathology rounds where slides from current patients are reviewed. Surgery, Oncology, Radiation Oncology rounds are held bi-weekly where surgeons, radiation/medical oncologists, radiologists, and pathologists meet to discuss recent and upcoming oncology patients that will/have undergone surgery, the pathology reports, and recommendations for further treatment (chemotherapy, radiation therapy (pre-op vs. post-op), additional surgery). The resident will spend 2 months on medical oncology exclusively, receiving new and re-check oncology patients.

**How is resident be trained in diagnostic imaging? What time is allotted for this training? Please provide description of formal and informal training experiences. Please specify if the resident is required to generate imaging reports while on diagnostic imaging rotation:**

The resident will spend 1 month exclusively in diagnostic imaging, which includes radiography, fluoroscopy, ultrasound and alternate imaging (CT/MRI/NucMed). During this time residents will dictate cases that will be finalized by radiology faculty on duty. The resident will be involved with any oncology patient undergoing CT or MR imaging during the year outside this dedicated imaging time. The resident attends bi-weekly MRI rounds with radiology and neurology throughout the year and will be responsible for presenting an unknown MRI case.

**Will the resident be provided with training in anesthesia? If yes, please include a description of the training:**

The resident spends 2-weeks in anesthesia. This includes daily anesthesia rounds, being responsible for anesthesia patient evaluation (blood work, any imaging), preparing an anesthesia patient plan that is approved by an anesthesiologist and delivery of anesthesia from intubation to extubation. Patients may be oncology, imaging, or surgery cases.

**How is resident trained in radiation biology? Please provide description of formal and informal training experiences:**

The resident attends a formal 2-credit radiation biology course that is offered by the Departments of Human Oncology and Medical Physics.  
Twice-weekly RO rounds are held that include review of book chapters in radiobiology, radiation oncology, cancer biology and RO physic texts and journal articles.

**How is resident be trained in cancer biology? Please provide a description of formal and informal training experiences:**

The resident attends a formal 2-credit radiation biology course that is offered by the Departments of Human Oncology and Medical Physics.  
Twice-weekly RO rounds are held that include review of book chapters in radiobiology, radiation oncology, cancer biology and RO physic texts and journal articles.  
The resident attends weekly Carbone Cancer Center Grand Rounds Seminars at UW Hospital. The resident will attend resident seminars provided at VCS and ACVR. The resident joins resident-driven book rounds on cancer biology (Tannock & Hill).

**How is resident trained in radiation oncology physics? Please include a description of the medical physics support available at your institution and any role institutional medical physics support may provide in training of the resident:**

The resident attends a formal 2-credit radiation biology course that is offered by the Departments of Human Oncology and Medical Physics.  
Twice-weekly RO rounds are held that include review of book chapters in radiobiology, radiation oncology, cancer biology and RO physic texts and journal articles.  
The resident attends radiation oncology physics courses offered by the Departments of Human Oncology and Medical Physics as part of their training program. The resident also attends a dosimetry and treatment planning course. Residents attend the yearly course offered by Dr. Wendell Lutz, if provided. Residents have daily access to a medical physicist that provides support for our TomoTherapy™ equipment and provides general RO physics rounds.

**Please list any formal courses and their instructors included in the residency training curriculum. Please attach syllabi and instructor credentials for each listed course. NOTE: Please ensure syllabi are up-to-date within the last year:**

1. Radiation Biology (H. Oncol 410) - Course director - Mark A. Ritter, MD, PhD. Two hours a week for one semester. This is a listed graduate course in the Department of Human Oncology and Medical Physics.

2. Resident's Radiation Oncology Physics Course - Course Coordinator - Rupak K. Das, PhD. Two hours per week for 17 weeks. Course is designed for MD radiation oncology residents at the University of Wisconsin Hospital and Clinics.

3. Medical Physics 572: Advanced Treatment Planning - Course Coordinator - Jennifer Smilowitz, PhD.

Course objectives: a. Design simple and intermediate forward-based photon and electron external beam plans using beam arrangements/energy, wedges and blocks intelligently with regards to underlying physics. b. Describe (and create) target and region at risk planning volumes. c. Setup objectives for, and optimize, inverse planned intensity modulated plans using an understanding of DVH and constraints. Plan simple IMRT cases using machine specific optimization and planning parameters. d. Understand commissioning process, data requirements and model generation. e. Gain a strong planning background to use, design and implement advanced (and new) planning techniques for many delivery modalities.

4. Medical Physics 501 Radiological Physics & Dosimetry - Course Director - Wesley Culberson, PhD. This class is designed to construct a theoretical foundation for radiation physics, radiation dose calculations, and radiation dose measurement in a medical physics context. Specifically, a student completing this course will be able to do the following.

Understand the physics of radiation generation Understand the interaction of radiations with matter; Understand energy transfer and deposition of radiations to matter; Understand the conceptual framework of radiation dose calculations; Understand the experimental measurement methods of the radiation dose measurement; Understand the theoretical details of ion-chamber based dosimetry and of clinical protocols.

5. Physics of Radiotherapy-MP 566- John Bayouth, Ph.D & Jennifer Smilowitz, PhD. This is a 4-credit listed course in the Medical Physics department and builds on MP 501.

**Upload syllabi here:**

[2018\\_syllabus\\_MP566.pdf](#)  
[HO-MP 410\\_Syllabus\\_Spring2018\\_final.doc](#)  
[MP501\\_2017\\_Syllabus - R3.pdf](#)  
[MP501\\_Course\\_Overview.pdf](#)  
[MP\\_572\\_syllabus\\_2017.pdf](#)

**Upload instructor credentials here:**

[Course Faculty\\_17\\_18.doc](#)

**Will the resident participate in clinical rounds on a daily basis while on clinical rotations?**

yes

**Is a supervising Radiation Oncology Diplomate available for the majority of rounds?**

yes

**Are formal conferences, such as clinicopathologic conferences, journal clubs, or seminars held on a weekly basis?**

yes

**Comments:**

1. Daily oncology ward rounds where progress and toxicities of current radiotherapy patients are reviewed and new oncology patients are discussed.
2. Radiation Oncology Board is held weekly where all current radiotherapy patients, potential cases, and follow-up on previous patients are discussed.
3. Weekly Oncology Group Meetings where journal articles, research updates and clinical management concerns are presented.
4. Weekly clinical pathology rounds where histology slides from current patients are reviewed.
5. Weekly known case conference rounds where radiology, ultrasound, CT, MRI and nuclear medicine cases are given to residents in a mock board examination fashion on a rotating basis. These are attended by RO residents during their month on imaging.
6. Bi-weekly MRI rounds where radiology and neurology faculty discuss recent MRI examinations on clinical patients. Residents present unknown cases in a mock board format.
7. Weekly ACVIM rounds where topics are frequently of oncology interest.
8. Daily necropsy rounds.
9. Weekly oncology grand rounds: Presentations and attendance is by faculty and residents of the University of Wisconsin Hospital and Clinics Cancer Center. Veterinary school faculty members attend and have also made presentations.
10. Twice-weekly RO rounds are held that include review of book chapters in radiobiology, radiation oncology, cancer biology and RO physic texts and journal articles.
11. Bi-weekly surgery, oncology, radiation oncology, radiology, pathology rounds current surgical cancer patients are discussed in order to determine adjuvant therapy.
12. Quarterly surgical/medical oncology/radiation oncology topic rounds presented by residents where a resident from each service present a combined presentation.
13. Monthly (fall & spring) Grand Rounds are presented by clinical departments of the veterinary school and attended by faculty, residents and students.



**Please provide a description of the conferences, etc., that are provided and the typical schedule. Please specify which conferences are mandatory vs. optional:**

1. Daily oncology ward rounds where progress and toxicities of current radiotherapy patients are reviewed and new oncology patients are discussed.
2. Radiation Oncology Board is held weekly where all current radiotherapy patients, potential cases, and follow-up on previous patients are discussed.
3. Weekly Oncology Group Meetings where journal articles, research updates and clinical management concerns are presented.
4. Weekly clinical pathology rounds where histology slides from current patients are reviewed.
5. Weekly known case conference rounds where radiology, ultrasound, CT, MRI and nuclear medicine cases are given to residents in a mock board examination fashion on a rotating basis. These are attended by RO residents during their month on imaging.
6. Bi-weekly MRI rounds where radiology and neurology faculty discuss recent MRI examinations on clinical patients. Residents present unknown cases in a mock board format.
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11. Bi-weekly surgery, oncology, radiation oncology, radiology, pathology rounds current surgical cancer patients are discussed in order to determine adjuvant therapy.
12. Quarterly surgical/medical oncology/radiation oncology topic rounds presented by residents where a resident from each service present a combined presentation.
13. Monthly (fall & spring) Grand Rounds are presented by clinical departments of the veterinary school and attended by faculty, residents and students.

All conferences are mandatory.

**Is the resident required to give one or more formal presentations at a conference or in an educational setting on a yearly basis?**

yes

**If yes, please describe these conferences or educational settings:**

The resident will present an abstract at VCS and/or ACVR-RO meetings. The resident will give 1-2 CE lectures at UW sponsored oncology CE meetings for practioners. The resident will also present formal seminars at oncology and surgery rounds on topics of medical and radiation oncology.

**How many major veterinary medical or medical meetings is each resident able to or expected to attend during his/her training program?**

>Two

**Please list the meetings attended:**

VCS, ACVR-RO, ASTRO

**Does the training program require a research project?**

Yes

<b>Please indicate the number of research projects required:</b>	1 research project is required, more are encouraged.
<b>Are one or more publications required as part of the training program?</b>	Yes
<b>Comments:</b>	One publication is required. 1-research project is expected/required, but lack of publication before completion of residency will not affect receipt of residency certificate.
<b>Do you have a megavoltage teletherapy machine available?</b>	Yes
<b>Is the megavoltage teletherapy machine on-site?</b>	Yes
<b>Please specify the manufacturer and model:</b>	TomoTherapy, Hi-Art
<b>Do you have a multileaf collimator available?</b>	Yes
<b>Is the multileaf collimator on-site?</b>	Yes
<b>Please specify number of leaves and width of leaves:</b>	64 leaf binary ML C
<b>Do you have an on-board portal or CT imaging available?</b>	Yes
<b>Is the on-board portal or CT imaging on-site?</b>	Yes
<b>Please specify type:</b>	Helical MVCT
<b>Do you have a 3D - computer based treatment planning system available?</b>	Yes
<b>Is the 3D - computer based treatment planning system on-site?</b>	Yes
<b>Please specify manufacturer and model:</b>	Eclipse™ 11.0 and TomoTherapy™ IMRT v,2, RayStation v.6.1
<b>Do you have a 2D or 2 1/2D computer based treatment planning system available?</b>	No

<b>Is the 2D or 2 1/2D computer based treatment planning system on-site?</b>	No
<b>Please specify manufacturer and model:</b>	N/A
<b>Do you have intensity modulated radiation therapy available?</b>	Yes
<b>Is intensity modulated radiation therapy on-site?</b>	Yes
<b>Do you have stereotactic radiation therapy or radiosurgery available?</b>	Yes
<b>Is stereotactic radiation therapy or radiosurgery on-site?</b>	Yes
<b>Do you have strontium-90 plesiotherapy available?</b>	No
<b>Is strontium-90 plesiotherapy on-site?</b>	No
<b>Do you have LDR brachytherapy treatment and planning available?</b>	Yes
<b>Is LDR brachytherapy treatment and planning available on-site?</b>	No
<b>Do you have HDR brachytherapy treatment and planning available?</b>	Yes
<b>Is HDR brachytherapy treatment and planning available on-site?</b>	No
<b>Do you have diagnostic radiology/imaging services available?</b>	Yes
<b>Is diagnostic radiology/imaging services available on-site?</b>	Yes
<b>Do you have conventional radiography available?</b>	Yes
<b>Is conventional radiography available on-site?</b>	Yes

<b>Do you have fluoroscopy available?</b>	Yes
<b>Is fluoroscopy available on-site?</b>	Yes
<b>Is ultrasound available?</b>	Yes
<b>Is ultrasound available on-site?</b>	Yes
<b>Is nuclear medicine available?</b>	Yes
<b>Is nuclear medicine available on-site?</b>	Yes
<b>Do you have computed tomography available?</b>	Yes
<b>Do you have computed tomography available on-site?</b>	Yes
<b>Do you have magnetic resonance imaging available?</b>	Yes
<b>Do you have magnetic resonance imaging available on-site?</b>	Yes
<b>Do you have positron emission tomography available?</b>	Yes
<b>Do you have positron emission tomography available on-site?</b>	No
<b>Do you have an intensive care facility (24 hours) available?</b>	Yes
<b>Do you have an intensive care facility (24 hours) available on-site?</b>	Yes
<b>Do you have clinical pathology capabilities (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology and endocrinology) available?</b>	Yes

<b>Do you have clinical pathology capabilities (includes CBC, serum chemistries, blood gases, urinalysis, cytology, parasitology, microbiology and endocrinology) available on-site?</b>	Yes
<b>Do you have a veterinary library with literature searching capabilities available?</b>	Yes
<b>Do you have a veterinary library with literature searching capabilities available on-site?</b>	Yes
<b>Do you have a medical library with literature searching capabilities available?</b>	Yes
<b>Do you have a medical library with literature searching capabilities available on-site?</b>	Yes
<b>Do you have computerized medical records with searching capabilities available?</b>	Yes
<b>Do you have computerized medical records with searching capabilities available on-site?</b>	Yes
<b>If any of the above equipment or facilities are available off-site, please explain how the resident can access them for case management, research or study:</b>	<p>PET/CT is available on the UW campus, 4 blocks from the SVM. We have continuing projects with medical physics and our oncology group. We do contours, approve IMRT plans and deliver therapy on our TomoTherapy™ machine to client owned dogs with a variety of cancers. LDR &amp; HDR brachytherapy is available on UW campus, 4 blocks from the SVM. Residents tour the human radiation oncology department with our medical physicist to understand how these modalities function.</p> <p>HDR/LDR: LDR/HDR are available off site for resident training, but is not used clinically on our animal patients.</p>
<b>Megavoltage Gamma/X-ray teletherapy:</b>	120
<b>LDR brachytherapy:</b>	0
<b>HDR brachytherapy:</b>	0
<b>Injectable radionuclide therapy:</b>	10

<b>Radioiodine:</b>	120
<b>Stronium plesiotherapy:</b>	0
<b>Describe procedures for resident record recording of radiation treatment details of all patients.</b>	<p>The trainee will keep a log of patients treated, including tumor type and location, treatment date, and the treatment protocol used. He/She will be involved in providing radiation oncology consults, owner consents for therapy and patient discharges.</p> <p>In addition for every patient treated with radiotherapy a file is kept that includes the following:</p> <ol style="list-style-type: none"> <li>1. Tumor type and location</li> <li>2. Radiation prescription (# of fractions, dose/fraction, total dose, dose% prescribed to PTV &amp; GTV)</li> <li>3. Energy used (currently all are from 6MV linac of tomotherapy machine)</li> </ol> <p>TomoTherapy Data Management System provides comprehensive storage and processing of patient data generated over the life of the TomoTherapy planning and treatment workflow. Key capabilities include: Import and store imaging studies; Store completed treatment plans; make them available for review and approval; Store a record of each day's treatment procedures; Manage the flow of patient data throughout the system from a single location; Ensure security of patient data with scheduled database backups and use of multiple disk drives. After treatment plans are approved, they are printed and contain the following data:</p> <p>Dose volume histograms, dose per fraction, number of fractions, dose prescription, modulation factor, pitch, jaw width, time to deliver each fraction, target and regions at risk constraints and statistics, planned fluence, sinogram, and images of 3D and 2D CT images with dose color maps.</p> <p>***Attached are PDF examples of Plan Report, Delivery Report, and Treatment Summary are under resident evaluation form.</p>
<b>What procedures are in place to facilitate collection of follow up information of patients treated? What is a standard recheck schedule for patients? In the absence of routine patient rechecks at the facility, is there a system in place to obtain follow-up?</b>	<p>Weekly radiation rounds are held where current and recheck patients are discussed. All radiotherapy patients are entered into a searchable database and are on a recheck schedule. Follow-up of patients not returning to the VMTH is done by phone contact and/or postcard. Digital photographs are obtained of the patient during radiotherapy and at rechecks.</p> <p>Recheck schedule: Post RT rechecks include 2 weeks, 1-month, 3-month, 6-month, 9-month, 12-months, then every 6-months.</p>
<b>By what mechanisms and how often will trainees be evaluated? Please comment on radiation therapy specific evaluation as well as general clinical evaluation.</b>	<p>Trainees will be informally evaluated by the training program co-directors at 3 months and formally evaluated by 6 mentors at 6, 12 &amp; 18 months into the program. A written summary is provided to the trainee in the form of a progress evaluation. The trainee will be asked to evaluate the training program at these intervals, as well.</p> <p>Faculty and staff members will provide performance evaluation. Performance in rounds and attendance at seminars will also be included in the overall evaluation. Inadequate progress, based on these evaluations, would be grounds for non-renewal.</p>
<b>Please upload form used in evaluations.</b>	<p><a href="#">DeliveryReport.pdf</a></p> <p><a href="#">PlanReport.pdf</a></p> <p><a href="#">TreatmentSummaryReport.pdf</a></p> <p><a href="#">_Resident Evaluation Form.docx</a></p>

**If applicable, please list the residents who have completed the training program within the last five years, including the year that each individual's training program ended. If at all possible, please provide an address, and any information you have on the status of each individual with respect to the board certification process.**

Lyndsay Kubicek, DVM, DACVR (Radiation Oncology)  
Completed the program in June 2012, successfully completed RO board examination 9/13.  
Currently at Angell Memorial Animal Hospital 350 South Huntington Ave.  
Oncology Department Jamaica Plain, MA 02130 Phone: 617-541-5136  
Fax: 617-989-1668  
Email: lkubicek@mspca.org

Pamela White, DVM  
Completed the program in June 2014, successfully completed 2 sections of RO board examination 9/14, successfully completed the examination 9/15  
Currently in private practice in Washington, DC area 8231 Crestwood Heights Drive, Apt 511  
McLean, VA 22102  
Phone: 215-520-5886  
Email: pjwhite.ro@gmail.com

Neil Christensen, BVSc(Hons) MANZCVSc, DACVR (Radiation Oncology)  
Completed the program in October 2014, successfully completed RO board examination 9/14 (Allowed to take exam prior to 2-months of medical oncology because he completed a medical oncology residency in Australia).  
Currently on faculty at University of Wisconsin-Madison University of Wisconsin-Madison, School of Veterinary Medicine 2015 Linden Drive  
Madison, WI 53706 USA  
Phone: 608-263-7600  
Email: nchristense2@svm.vetmed.wisc.edu

Lauren Smith, DVM, DACVR (Radiation Oncology) Completed the program in July 2016, successfully completed RO board examination 9/16.  
Currently working in private practice in Washington DC area, applying for a new position.

Noopur Desai, B.V.Sc, M.V.Sc, DACVR (Radiation Oncology), successfully completed 3 sections of RO board examination 9/16, successfully completed RO board examination 9/17.  
Current position: Assistant Professor, Radiation Oncology, Department of Veterinary Clinical Sciences, The Ohio State University  
Veterinary Medical Center, 601 Vernon L. Tharp Street, Columbus, OH 43210  
Ph: (614)-292-3551  
Fx: (614)-292-1454  
desai.339@osu.edu

**Please list any additional information of interest in support of this residency application.**

Our program offers a 24 or 36 month program depending on the background of the resident. If the resident has a PhD and as clinical background, then a 24 month program is an option.