Specialty Training Committee COVID-19 accommodations

The following changes are being made for any current non-traditional programs or new non-traditional applications until Dec 31, 2020. At that time, the STC will review the policies in light of current events and modify these requirements accordingly.

1. Applicants may continue to apply for a one-year extension to the non-traditional time limit through December 31, 2020. Please submit this in writing to the ACVB Executive Director with justification. The STC will review each request on a case by case basis.

2. For the first 25 cases and the next 25 of 50 cases where the supervising diplomate (SD) is supposed to be physically present with the resident, the client and the patient:
   a. If there is sufficient reason that the SD, resident, client and patient cannot be physically together, you may request a “postponement” to this rule. This must be submitted in writing to the ACVB Executive Director with justification. The STC will review each on a case by case basis.
   b. Note that even if approved, the Resident WILL STILL be required to complete a minimum of 50 cases in which they ARE physically present with their mentor, the client and the patient. These can be completed at some time point during the course of the residency that is mutually agreeable to both the SD and Resident in light of current events and local regulations. In other words, if the mentor cannot be physically present for the first 50/75, they can ask for a waiver to be virtually present HOWEVER, they will then still need to be physically present for 50 cases at some point during the course of the residency.
   c. If approved, the first 25 cases and 25 of the next 50 cases may be conducted via video telemedicine in which the Resident establishes a valid veterinary client patient relationship (VCPR) in accordance with their state of licensure.

3. For telemedicine cases, we encourage:
   a. SD’s to be able to watch both the Resident and the client/patient; and conversely the Resident’s to be able to watch the SD and the client/patient, so multiple cameras may be needed.
   b. Whenever possible, a full hands-on physical examination be performed by both the Resident and the SD even if not required by your state’s VCPR rules.
   c. If physical examination of the pet is not performed, you should ensure that the pet has had a full physical examination and thorough work-up performed by the referring veterinarian.

4. The current 25% limit to telemedicine cases is still in effect. (ie 100/400 cases)
   a. If a VCPR was established in person but the consult takes place via video, this is not considered telemedicine.
   b. We highly encourage strategies to limit telemedicine cases such as conducting consultations outdoors, socially distanced with every party wearing masks.

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