Detailed Program Description for ACVD Website (updated February 2019)

- 1. Program name and location: Clinical and Investigative Dermatology Residency Dermatology Service Veterinary Hospital North Carolina State University Raleigh, North Carolina
- 2. Is the program currently on ACVD Probation? No If yes, please describe the reasons for probation, what is being done to correct them and when the program is scheduled to be off probation?
- 3. Mentor(s):

	1.	Name:	Petra Bizikova, MVDr, PhD, DipACVD, DipECVD
	2.	Years in ACVD:	9 (ECVD: 9)
	3.	Years as Mentor:	9
b.	Name:		Marcy Murphy, DVM, DipACVD
	1.	Years in ACVD:	16
	2.	Years as Mentor:	16

- 4. Specific requirements for applying to the program: none, but preference is normally given to applicants with a proven track-record or desire to embark on a future academic career.
- 5. Length of residency in years: 3 years
- 6. Is a Masters degree or PhD required? No, but residents are encouraged to pursue a PhD after their residency if a tenure-track academic career is considered
- 7. When the residency was first offered? Late 1980's
 - a. Has it been continuous since then? No
 - b. If not continuous, what years was the residency offered? The program was continuous except when interrupted for one-year dermatology internships that were offered in lieu of a dermatology residency in 2001-2002 and 2005-2006.
- 8. How many residents have been accepted into the program since inception? 17 residents (+ 3 alternative residencies through ECVD)
 - 2 residents had their program changed to an internship because of inadequate performance (one finished ACVD residency subsequently, one received *de facto* LACVD (Latin America College of Veterinary dermatology))
 - 2 residencies were under the ECVD umbrella, 1 under the AiCVD (Asian College)
 - a. How many of these have become board-certified dermatologists?

- 2 residents became double-boarded by the ACVD and ECVD at the first examination sitting
- 3 residents have not yet finished their program
- 9. What is the average annual dermatology caseload for the institution over the past 5 years? cases per year? See below

Numbers obtained from electronic medical record information:

Fiscal year	2014	2015	2016	2017	2018
# visits total	2153	2350	2531	2516	2375
# new cases	554	552	583	684	626
# rechecks	1407	1583	1658	1625	1610
# consults	192	215	290	207	139

10. What is the average total caseload seen the entire residency? cases (average cases annually times the number of years of residency)

Our last five residents each saw around ~250 different cases per fiscal year.

- 11. On average, how many new patients, rechecks and consults does the program see per year? (give these in actual numbers of cases)
 - a. New cases see table above
 - b. Rechecks see table above
 - c. Consults see table above
- 12. On average, what percentage of the program's cases are dogs and cats?
 - a. Dogs: ~85-90%
 - b. Cats ~ 10-15%
- 13. On average, how many exotic, equine and farm animal cases does the program see per year?
 - a. Exotic: < 1%
 - b. Equine: < 3%
 - c. Farm animals: < 1%
- 14. What percentage of time is the mentor in clinics with the resident while the resident is seeing cases during the resident's first year: 100% second: 100%.

(This means that the mentor is either physically seeing patients with the resident or can be contacted by phone and available to see the case within one hour of being called.)

15. Does the program have access to other specialists? Yes

If so, please list:

- small animal internal medicine, soft-tissue surgery, orthopedic surgery, oncology, neurology, cardiology, critical care, dentistry, emergency, ophthalmology, nutrition, theriogenology, behavior
- equine surgery, medicine, ophthalmology
- food animal medicine
- exotic medicine
- anesthesia, radiology, radiation therapy
- pathology, clinical pathology, clinical pharmacology
- 16. Please describe your library access: we have full access to an on-site library with extensive online journal subscriptions. NC State libraries are members of a consortium with other local universities two of them being medical schools so that articles not immediately available in print or online can be requested via a web-based form ("TripSaver") and will be sent free-of-charge to the requester within 1-3 business days.
- 17. Does the program have statistical support for their residents' research projects? Yes, support is provided by mentors or statistician associated with the university, as needed.
- 18. Does the program have direct access to any basic science or clinical science laboratories that the resident can use for research proposals? Yes

If yes, please describe the types of laboratories available and interactions that the resident may have with them. One of the mentors supervise a fully equipped research laboratory focused on immunology investigations and cloning. One research technician is available to support the residents' projects if needed.

- 19. How often do the residents and mentors have the following rounds? (For each type of rounds, please list how often they are held, how long each session is, and a detailed description of how they are conducted.)
 - a. Case rounds: Daily all new and recheck cases are discussed during the first year of the program. During the 2nd and 3rd year, only new cases are reviewed and rechecks are discussed whenever the residents or mentors feels there is a need.
 - b. Journal club: An average of three Fridays per month, (outside of holidays) journal club is held for 1hr 45 minutes. Four articles are reviewed each time. There is at least one board-certified dermatologist supervising this journal club
 - c. Histopathology training: An average of three per month (Fridays, outside of holidays) dermatopathology rounds held at a 10-headed scope with video projection. The session lasts 1.5 hour. In-house and external cases are discussed and a clinico-pathological discussion is held for all in-house cases. Between 2-4 board-certified pathologists, 3-4 board-certified dermatologists and 2-5 residents will routinely attend these rounds.

- d. Basic science learning rounds: Dermatology residents meet with Dr. Olivry (till summer 2019) or Dr. Bizikova at least two hours per month (in average) for discussion of basic foundations of dermatology. In addition, arrangement for 1-1.5hr lectures on selected topics (pharmacology, exotics, etc.) presented by specialists in the corresponding field are arranged by the mentors. Additional supervision is provided for grant writing, project management and abstract and paper writing, as needed.
- 20. Resident's benefits: (Please give a general list of benefits and then whom a potential candidate should contact to get more specific information on salary and benefit packages)In 2019, the salary was \$35,000 per annum + health insurance.

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Resident receives 12 paid vacation and 12 sick days per year, pro-rated during the first year of employment. In addition, there are approximately 10 paid holidays each year.

- 21. Does the program allow the resident to attend the NAVDF (North American Veterinary Dermatology Forum) meeting annually? Yes
- 22. Does the program pay for the resident to attend the NAVDF meeting annually? It depends upon the availability of funding by mentors and hospital director
- 23. Average number of days a resident will spend on clinics per month: 3.5 days/week
- 24. Average number of days a resident will spend on non-clinical pursuits per month (not including Sundays or holidays): At least one day per week + Saturdays
- 25. Does the resident have to take general medicine emergency duty? No If so how often:
- 26. Does the resident take Dermatology emergency duty? No, but the resident is on weekend dermatology emergency consult back-up to provide help to on-site emergency clinicians. If so how often: 33-50% of weekends (depending on number of house officers)
- 27. Is time allotted for externships in other subspecialties or at other dermatology practices? If needed If so explain:
- 28. How much time is allotted off clinics for board preparation? The resident is expected to embark on a continuous studying schedule aimed at the acquisition of knowledge and board preparation (journal club, resident reviews, day/week off clinics, etc.). There is no specific time given for board studies at the end of the program, but the resident can bank his/her vacation time and reallocate his/her schedule if a block of time off is preferred instead of one or more weekday(s) each week.

- 29. How much time is allotted to carry out a research project (grant writing, data collection, paper preparation) during the residency (please report in number of weeks)? The resident has one day per week off clinics. In addition, extra time off will be given for timely completion of the research project (if needed).
- 30. What are the other responsibilities/duties of the resident? Participation in student teaching and phone consults for area veterinarians.
- 31. How many residents has the program had over the past 10 years? 7 (+ 3 current) How many/what percentage of the above residents (question 32) passed credentials on the
 - a. First submission 7 (100%)
 - b. Second submission
 - c. Third submission or more
 - d. Never passed credentials
- 32. How many/what percentage of the above residents (question 31) sat boards for the first time

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- a. The year they finished their residency
- b. One year after finishing their residency
- c. Two or more years after finishing
- d. They never took boards
- 33. How many / what percentage of the above residents (question 32) passed the board exam on their
 - a. First time taking the exam

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- b. Second time taking the exam
- c. Third time or more taking the exam
- d. Never passed
- 34. Is your residency program reviewed by an outside committee at your university? If yes how often? Yes, yearly.
- 35. Please list the papers published by your last 5 residents. This list is limited to papers relevant to the residents' work at NCSU while a resident:

2014-2017: Chie Tamamoto-Mochizuki, DVM, dipAiCVD

- 1. **Tamamoto-Mochizuki** C, Banovic F, Bizikova P, Laprais A, Linder KE, Olivry T. Autosomal recessive congenital ichthyosis due to PNPLA1 mutation in a golden retriever-poodle cross-bred dog and the effect of topical therapy. Veterinary Dermatology 2016;27: 306. PMID: 27237723
- Tamamoto-Mochizuki C, Murphy KM, Olivry T. Pilot evaluation of the antipruritic efficacy of a topical transient receptor potential melastatin subfamily 8 (TRPM8) agonist in dogs with atopic dermatitis and pedal pruritus. Veterinary Dermatology 2018; 29:29. PMID: 28952176

- 1. Tamamoto-Mochizuki C, Banovic F, Bizikova P, Laprais A, Linder KE, Olivry T. Autosomal recessive congenital ichthyosis due to PNPLA1 mutation in a golden retriever-poodle cross-bred dog and the effect of topical therapy. Veterinary Dermatology 2016;27: 306. PMID: 27237723
- 2. Laprais A, Dunston SM, Torres SMF, Favrot C, Olivry T. Evaluation of intraepidermal nerve fibres in the skin of normal and atopic dogs. Veterinary Dermatology 2017; 28: 355. PMID: 28122844
- 3. Laprais A, Olivry T. Is CCNU (lomustine) valuable for treatment of cutaneous epitheliotropic lymphoma in dogs? A critically appraised topic. BMC Veterinary Research 2017; 13:61. PMID: 28222789
- 4. Laprais AF, Bizikova P, Lashnits EW, Tucker A, Linder KE. Scleromyxoedema in a dog. Veterinary Dermatology 2017; 28:503. PMID: 28439995.

2013-2016: Hang Leet Tham, DVM

- Tham HL, Olivry T, Linder KE, Bizikova P. Mucous membrane pemphigoid in dogs: a retrospective study of 16 cases. Veterinary Dermatology 2016; 27: 376-e94. PMID: 27353951
- 2. **Tham HL**, Jacob ME, Bizikova P. Molecular confirmation of shampoo as the putative source of Pseudomonas aeruginosa-induced postgrooming furunculosis in a dog. Veterinary Dermatology 2016; 27:320-e80. PMID: 27237982
- 3. **Tham HL**, Linder KE, Tucker A, Maggi R, Bizikova P. Protozoal nodular dermatitis and panniculitis in a Rottweiler puppy caused by Caryospora bigenetica.Veterinary Dermatology 2016; 27:44-e12. PMID: 26567903

2011-2013: Michael Rossi, DVM, dipACVD (Dr. Olivry T/Dr. Messinger L comentoring)

- Rossi MA, Messinger L, Olivry T, Hoontrakoon R. A pilot study of the validation of percutaneous testing in cats. Veterinary Dermatology 2013; 24: 488-e94. PMID: 23826630
- 2. **Rossi MA**, Messenger LM, Linder KE, Olivry T. A. Generalized canine discoid lupus erythematosus responsive to tetracycline and niacinamide therapy. Journal of American Animal Hospital Association 2015; 51: 171-5. PMID:25955142
- 3. Olivry T, **Rossi MA**, Banovic F, Linder KE. Mucocutaneous lupus erythematosus in dogs (21 cases). Veterinary Dermatology 2015; 26: 256-e55. PMID: 26096899.

- 1. **Banovic F**, Koch S, Robson D, Jacob M, <u>Olivry T</u>. Deep pyoderma caused by *Burkholderia cepacia* complex associated with ciclosporin administration in dogs: a case series. Veterinary Dermatology 2015; 26: 287-e64. PMID: 25962868.
- 2. Banovic F, Olivry T, Bazzle L, Tobias JR, Atlee B, Zabel S, Okunaka N, Linder KE. Clinical and microscopic characteristics of canine toxic epidermal necrolysis. Veterinary Pathology 2015; 52: 321-300. PMID: 24907312.
- 3. **Banovic F**, Linder KE, Olivry T. Ciclosporin therapy for generalized canine discoid lupus erythematosus refractory to doxycycline and niacinamide. Veterinary Dermatology 2014; 25: 483-e79. PMID: 24916384.
- 4. **Banovic F**, Olivry T, Linder KE, Tobias JR. Pathology in practice (lichenoid psoriasiform dermatitis in a dog). Journal of the American Veterinary Medical Association 2014; 245: 1237-1239.
- 5. Olivry T, Rossi MA, **Banovic F**, Linder KE. Mucocutaneous lupus erythematosus in dogs (21 cases). Veterinary Dermatology 2015; 26: 256-e55. PMID: 26096899.
- 36. Names of your last 5 residents and whether they are willing to be contacted by potential residents:
 - 2014-2017: Chie Tamamoto, DVM, dipAiCVD (yes)
 - 2014-2017: Aurore Laprais, DrVet, dipACVD (yes)
 - 2013-2016: Hang-Leet (Ben) Tham, DrMedVet (yes)
 - 2011-2014: Frane Banovic DrMedVet, DipECVD (yes)
 - 2008-2011: Ursula Oberkirchner, DrMedVet, DipACVD, DipECVD (yes)