

AAVMC GUIDELINES FOR VETERINARY INTERNSHIPS

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INTRODUCTION AND INTERNSHIP DEFINITION

Introduction

These guidelines establish expectations for providers and for veterinarians undertaking internship training programs. The primary purpose of an internship is to provide an educational training program for the intern, rather than a service benefit to the hospital. The compensation for internship positions is often below market value for other entry-level positions due to the educational value of the training program. This should be reconciled whenever possible. Programs should consider using the [MIT Living Wage Calculator](#).

These guidelines describe the minimum standards for internship programs relative to educational program design, clinical experience and responsibilities, training environment and resources, health and wellness support, work conditions, and program outcomes and reporting.

Internship Definitions

Veterinary internships are one-year education programs undertaken immediately or soon after graduation from the DVM/VMD (or equivalent) program. The purpose of a veterinary internship is to provide mentored, experiential, clinical training for veterinarians seeking to advance their clinical competence. Internship training can also be used as a prerequisite for entry into a residency training program. To achieve minimum standards for quality, an internship program must:

1. Include a well-defined curriculum consisting of experiential (clinical) training and didactic education.
2. Provide the intern with a broad range of relevant and current clinical experiences while under direct supervision.

3. Ensure the intern has appropriate responsibility for patient care and client service, which should include being the primary clinician on cases.
4. Provide a supportive training environment with adequate clinical and educational resources.
5. Provide working conditions that support the intern's mental, physical, and social wellbeing.
6. Conduct regular outcomes assessment using appropriate metrics of success.

Rotating internships are programs in which an intern works under direct supervision in several departments or services in succession. These services may vary between internship programs, so a rotating internship must be fully described by listing the services involved. A service is defined as an independently staffed clinical specialty, preferably including a board-certified Diplomate of the appropriate American Board of Veterinary Specialties (ABVS)-Recognized Veterinary Specialty.

Specialty internships are limited to one of the ABVS-Recognized Veterinary Specialties and should only be offered in training environments staffed by a board-certified Diplomate of the appropriate ABVS-Recognized Veterinary Specialty.

EDUCATIONAL PROGRAM DESIGN

The success of an internship should be measured in terms of the difference in skills, knowledge, aptitudes, and attitudes between a newly or recently graduated veterinarian and the intern at the completion of their training. The program should focus on the end goals of the internship and chart a path to achieve these educational outcomes, incorporating mentored clinical experiences and other educational resources such as rounds, seminars, and journal clubs. The educational design

of an internship is, therefore, of paramount importance and should be constructed with a focus on the clearly defined outcomes of the training program. This can be accomplished using a competency-based curriculum.

Contemporary veterinary medical education is based on competency-based curricula. Veterinarians entering internship programs from American Veterinary Medical Association-Council on Education (AVMA-COE) accredited veterinary training programs can be presumed to have achieved the basic scientific skills, knowledge, aptitudes, and attitudes to provide entry-level healthcare and to have competence in each of the [nine competencies](#) required by the AVMA-COE.

The American Association of Veterinary Medical Colleges (AAVMC) Council on Outcomes-based Veterinary Education (COVE) oversees, manages, and coordinates the implementation of, and the interconnected activities associated with, the defined Operations Plan for Competency-Based Veterinary Education (CBVE). Notably, COVE focuses on the learning continuum in the veterinary profession, which includes internship and residency training programs. While most of the work of COVE to date has been associated with the professional veterinary medical curriculum, this group, and other entities in the profession, recognize the importance of extending CBVE to house officer training programs. We encourage the reader to review the [COVE website](#) for a review of CBVE principles and to access the latest information regarding implementing CBVE in house officer training programs.

Components of education program

An effective internship will include multiple components in addition to mentored clinical experience. Teaching rounds, journal clubs, seminars, lectures, morbidity/mortality rounds, and clinico-pathologic conferences all contribute to the development of competence. The intern should be expected to periodically deliver a professional presentation or seminar to senior clinicians and peers. Funding to attend a professional meeting is desirable to promote the importance of continuing education and lifelong learning. Rotating internships will include mentored clinical experiences in several clinical specialty services in an institution. Utilizing the CBVE approach (designing the program to achieve specific educational outcomes) will ensure these activities are purposeful and integrated.

HEALTH AND WELLBEING SUPPORT AND WORK CONDITIONS

Internship programs should actively foster and promote an environment that supports professional, physical, psychological, and social wellbeing. Recognizing that each learner is unique, basic and essential components include safe

and clean workspaces and resting areas, access to mental health and crisis support, and ensuring all learners have access to the resources and opportunities needed to develop to their full potential. Examples of activities supporting health and wellbeing include but are not limited to:

- Organized events that support the overall wellbeing of house officers should be scheduled periodically, e.g., seminars or group discussions on wellness in a professional clinical environment.
- All interns in the program are provided at least one protected day off each week. Additional days off may be provided according to the trainee's needs.
- A flexible protocol is established to ensure mental and physical health resources can be accessed as needed.
- The opportunities to use mental and physical health resources should be specifically discussed with interns throughout the year.
- The intern's mentor or program director should provide regular and frequent oversight of progress, and opportunities for the intern to discuss mental, physical, and social well-being issues. The format for this oversight can vary depending on trainee needs.
- All interns are provided an 'intern night' at least once per month, which is protected time with no emergency duty. This allows the intern class to socialize as a group.

Programs should follow current [AAVMC Guidelines for Veterinary Intern & Resident Wellbeing](#).

- Maximum duty hours:
 - Maximum of 60 hours per week averaged over a four-week period.
 - At least 8 hours off between scheduled clinical work periods.
 - An average of one day out of every seven is free from clinical experience and educational responsibilities over a four-week period.
 - At least 14 hours free after 24 hours of continuous in-hospital work.
 - In-hospital clinical work and educational activities should not exceed 24 continuous hours.
- The intern director should review adherence to, and impact of, these guidelines at least bi-annually and adjust as needed to facilitate a quality educational experience.

CLINICAL EXPERIENCE AND RESPONSIBILITIES

The internship program must provide mentored experiential clinical training that will support the accomplishment of the program's learning objectives.

- Adequate and varied clinical experiences are essential and should include a variety of primary care responsibilities in the following areas:
 - First-opinion primary care.
 - Emergency and critical care.
 - Referral and specialty care, preferably under the direct supervision of a board-certified clinician.
- Interns should receive a comprehensive orientation to all aspects of the hospital or practice. For rotating internships, an orientation should be provided at the beginning of each new rotation.
 - Orientations should emphasize expectations of the program, including specific performance outcomes, and formal feedback mechanisms should be described.
 - Orientations should identify resources available for:
 - After-hours help for case management.
 - Organizational structure of practice, including who to talk to if a problem arises with their immediate supervisor or mentor.
 - Health and wellness support, including mental health support, family, and medical leave.
 - Mentorship:
 - The intern should be assigned a primary mentor and should meet with that person on a regular schedule.
 - Mentors should be experienced staff veterinarians, not residents.
 - The time mentors spend on this activity should be specifically identified in their plan of work and recognized as a valuable contribution to the practice.
 - Mentors should have time to dedicate to mentoring interns and understand and support the learning objectives of the internship.
 - If interns are expected to teach veterinary students, a formal introduction to clinical teaching, including teaching techniques, must be included in the orientation.
 - Balancing patient care with education should be discussed.
 - A schedule for the year should be provided in advance.
 - A hospital policies and procedures manual should be provided.
 - Vacation, medical leave, and duty hours must be clearly explained.
 - The orientation materials should be discussed and made available in multiple formats (written, audio, video, infographic, etc.) to accommodate differences in learning styles.
- Internship programs must develop technical competence and provide training opportunities on a broad range of elective and entry-level procedures. This should be defined in the learning objectives of the program.
- For internships offered in academic veterinary medical centers, the roles of interns, relative to the instructional needs of veterinary students, should be defined and communicated to students and staff.
- Participation in daily rounds and case reviews with a qualified clinician instructor is an essential component of internship training.
 - Rounds should include in-depth discussion of mechanisms of disease, treatment options, typical outcomes, client communication, and formulation of patient management plans.
 - Discussions must require sufficient participation from the intern so that progress towards achieving learning objectives can be monitored and feedback provided.
- While in clinical service, interns should be under the direct supervision of a qualified clinician instructor.
 - Direct supervision means the supervising veterinarian is in the hospital where the intern is working while the intern is working or immediately accessible by phone.
 - Interns should be given graduated responsibility depending on their level of training. As interns develop an acceptable level of competency and proficiency, the level of supervision can decrease, but the intern must always have immediate access to a supervising veterinarian throughout the internship program.
- An intern should not be assigned patient care responsibilities in a secondary training site where there is no access, in person or immediately by telephone, to a supervising veterinarian.
- Activities of non-educational/non-clinical value should be limited.
- Distribution of clinical duties (emergency, primary care responsibility etc.):
 - Interns should not be assigned to primary overnight emergency duty for more than 50% of the program, if this is in addition to a full-time day position.
 - Interns should be assigned primary care responsibilities commensurate with their abilities, as determined by an assessment by their supervisor(s).
 - The program must include protected time for interns to consult reference material and focus on learning objectives.

- Evaluation
 - The intern's proficiency and competency should be regularly assessed in terms of their progress toward achieving established learning objectives.
 - Evaluation tools should be developed that address the goals of [Section 2](#). The reader is encouraged to review the [CBVE website](#) as intern In-Training Evaluation Reports (ITERS) are being developed.
 - Formal written evaluation should occur on a regular basis during the year.
 - Evaluations should include discussion of the availability of resources in support of the intern's physical and mental wellbeing.
- Feedback
 - A formal feedback mechanism must be in place that allows interns to confidentially evaluate the program and supervising veterinarians. This should be part of formal evaluation sessions and the exit interview.
 - Interns should be encouraged to use national internship evaluation reporting systems, such as those maintained by the Veterinary Internship and Residency Matching Program (VIRMP).
 - Program supervisors should regularly assess this feedback and consider it when assigning and evaluating mentors and rotation supervisors.
- Remediation
 - If an intern is identified as having deficiencies in knowledge or professional skills that hamper their ability to function as a primary clinician, such that they are unable to learn through traditional methods, including morning rounds and routine feedback mechanisms, a remediation plan should be co-created in consultation with the intern.
 - A remediation plan should include removing the intern from clinical duties for a time (typically 1-4 weeks) to allow for concentrated work on their specific deficiencies.
 - Time spent in a remediation plan should be structured and customized to address the specific deficiencies preventing an intern from progressing in their development through traditional means, with the goal to return them to clinical practice as soon as that experience will benefit them.
 - Time spent in remediation should not be required to be "owed" to missed rotations such that elective, CE, or vacation time is removed to "makeup" for the remediation.
 - An intern's time spent in remediation should not affect the schedules of other interns.

TRAINING ENVIRONMENT AND RESOURCES

The environment for training an intern should be rich in caseload, talented and dedicated clinicians, facilities, and hospital services.

Caseload

Effective internship programs require an adequate number of diverse medical and surgical cases to support the accomplishment of the program's learning objectives. The caseload should provide an adequate number of outpatients, inpatients, surgeries, and emergency cases throughout the year to support the learning objectives. Caseload should be documented annually using the following criteria for each species. This information must appear in the internship program description:

- Average daily accession number presented to hospital.
- Average daily number of cases treated as outpatients.
- Average daily number of inpatients.
- Average daily number of surgeries performed.
- Average daily number of emergency cases.

The adequacy of the caseload should be assessed based on whether it supports accomplishing the learning objectives established for the program.

Supervisors

Internships must provide access to experienced and qualified supervising clinicians and support staff in disciplines appropriate to the internship. An internship program can be overseen by appropriately experienced general practitioners, while rotating internships preferably include board-certified veterinarians in each service.

Every internship program description must include the following regarding the staff working in supervision of the internship program:

- Number of supervising clinicians directly overseeing the internship program.
- Number of intern and resident trainees working in the internship program.
- Number of Diplomates working in direct support of the internship program.
- Number of Credentialed Veterinary Technicians working in direct support of the internship program.

Facilities

Physical facilities and operating procedures (e.g., biosecurity protocols) should reflect contemporary standards and provide an appropriate learning environment. Adequate diagnostic and therapeutic equipment must be available to support the learning objectives of the internship program, and to support specialty services that are components of the internship program. Major hospital facilities and equipment in direct support of the internship program should be included in the internship program description.

Hospital Services

Interns must have access to a variety of clinical services. Rotating internships must include a minimum of internal medicine, surgery, and emergency duty opportunities. Primary case care should be assigned to interns in each area. Available clinical services should be reported in the internship program description.

Internship Program Performance:

The internship provider should gather outcomes data on interns completing the internship program to determine whether it advanced the intern's clinical competence and supported their future employment. This data can be collected and documented as part of the formal evaluations described in [Section 4](#). This assessment information should be used to monitor program quality and identify areas for improvement. Data should include:

1. Progress the intern made toward achieving the learning objectives of the program.
2. The intern's assessment of the program. Specifically, this would include the intern's assessment of the appropriateness of learning objectives, the success of the program in achieving those learning objectives, and the intern's feedback on the program's strengths and opportunities for improvement.

Internship Program Outcome and Scope:

The Internship provider should gather outcome and descriptive data, which should be reported in an annual program description. This data can assist candidates in their program selection process. The following information is included in the VIRMP Program Description outcomes reporting:

1. Average number of interns who started the program per year for the past 5 years.
2. Average number of interns who completed the program per year for the past 5 years.

3. Number of interns from the program who applied for residency in the past 5 years.
4. Number of interns from this program who accepted a residency in the past 5 years.
5. Number of interns from the program who accepted a position in private practice in the past 5 years.
6. Number of interns from the program who applied for a specialty internship in the past 5 years.
7. Number of interns from the program who accepted a specialty internship in the past 5 years.

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