Changes in AVDC Requirements, Policies and Procedures for 2009
Relating to Training Programs and Credentials Applications

The Board of Directors has adopted the following items that result in changes in AVDC credentialing and training program reporting requirements. The changes reported in this Changes for 2009 document are effective January 1st 2009 except as otherwise noted. “Minor” changes relate to format of AVDC reporting requirements and apply to all trainees. “Major” changes are changes in content of credentialing requirements and apply only to trainees whose program was registered after the date the change was implemented (the exception to a “major” change applying only to subsequent program registrations is when the change makes the specific credentialing requirement easier to complete, in which case trainees in pre-existing programs can elect to abide by the changed requirement). Changes in this document are Minor unless specifically identified as Major.

The AVDC on-line documents are undergoing revision to implement these changes – look for the Version current for 2009 statement at the top of the document to be sure that the document has been revised.

Historical Record of Changes

Because “Major” changes apply only to trainees whose program registration date is subsequent to the implementation date of the change, AVDC provides a Historical Record of Changes, so that trainees and committee members can check what requirements apply to an individual trainee. This document will be available in the AVDC document list on the Information for Registered Trainees web page once it is completed.

Abbreviations List

Additional recommendations from the Nomenclature Committee have been approved by the Board of Directors and trainees were notified in November 2008, and use of these abbreviations is required in cases logged after December 31st, 2008. The nomenclature items have been added to the Veterinary Dental Nomenclature page on the AVDC web site, and the new abbreviations have been added to the Abbreviations List.
Trainees are NOT required to make changes in the abbreviations used in previously-logged cases.
As has been AVDC policy for several years, AVDC trainees are required to use only AVDC Approved abbreviations in AVDC case logs, and AVDC nomenclature must be used in AVDC case reports. For cases logged from January 1st, 2009 onwards, use of the 2009 Abbreviations List is required.
Annual Reports

Reviews of Annual Reports are steadily becoming more complete. Electronic archiving of MRCL forms is now part of the on-line case log system. The two most recent Annual Report reviews are made available to the TSC reviewer assigned to a current review and to the Credentials Committee reviewers for credentials applications, so that the reviewer is aware of previously-noted need for corrections and can check whether the necessary corrections have been made.

Status of Annual Report Reviews: For the Dec2007 Annual Report, reviews were classified as either “Approved” or “Not Approved” which has been confusing for trainees, and the Request for Clarification system did not work smoothly on DMS in 2008.

Reviews of the Dec2008 Annual Reports will be classified as either “Review Completed” or “Review Not Able to be Completed”. If the status is shown as “Review Not Able to be Completed”, the TSC review report will contain Comments from TSC indicating changes or corrections that are to be made in a revised report to be submitted during the current review cycle. “Review Completed” does not mean that the Dec2008 Annual Report has been approved – there may be comments in the TSC Comments box indicating items that require correction or comment from the trainee in the next Annual Report.

December 2008 Annual Report: The December 2008 Annual Report Activity Log and other Annual Report files (which are described in the Annual Report Information and Form document, available for download from the Annual Report section in the Information for Registered Trainees web page) can be uploaded to DMS anytime from January 1st 2009 through February 14th, 2009. However, AVDC strongly recommends that you upload your files early in January for review by your Supervisor, so that submission of a supervisor-reviewed and corrected version can be completed on or before February 14th, 2008.

Case logs and MRCL forms in the December 2008 Annual Report: Because the change-over to the on-line case log system has been completed, trainees are no longer required to submit their case logs as part of their Annual Report, because the log is automatically available on-line; however, trainees are required to log all of their 2008 cases in their on-line case log by February 14th, 2009, and MRCL forms for 2008 cases included in the MRCL log are to be uploaded by February 14th. Your Supervisor can access your on-line log, including the uploaded MRCL forms, at any time.

Case Logs

On-line Case Log: Use of the on-line case log is now required, effective with the case log to be reviewed as part of the Dec2008 Annual Report. The migration to the on-line log system is a “Minor”
change. The on-line log is to include all cases logged since the start of the training program – it indicates with red cross-hashed lines cases that are more than six years old and thus are ineligible for inclusion as MRCL cases because of the six year rule.

**Case Log Clarification:**
The following statement has been added to the Case Log document

**Case Categorizations to Fill Out the MRCL List.**
Some trainees find that they have more than enough cases (e.g. excisional biopsy) to fill complex treatment MRCL categories (e.g. OS4), but do not have sufficient cases for ‘less complex procedure’ categories such as OM.

Trainees may elect to categorize cases as the lesser complex category to fill spaces on their MRCL log. Examples:

1. An oral mass that is biopsied by excisional biopsy as an OS4 procedure can be categorized as OM instead of OS4, because the mass was biopsied (meeting the OM category requirement).
2. If the PE4 MRCL list is full and a flap procedure was performed as part of a PE4 procedure, the case could be categorized as PE3 if there are PE3 slots to be filled.
3. If several teeth are extracted, some qualifying for OS1 and some for OS2, the case can be logged as OS1 if the OS2 MRCL slots are filled and there are slots to fill in the OS1 list.
4. If a malocclusion is diagnosed and a treatment plan developed (including detailed consultation and recording of the evaluation of the bite or bite registration, impressions, study models, with or without occlusal adjustment) and an orthodontic procedure is performed, the case can be categorized as OR1 if the relevant OR2, OR3 or OR4 MRCL slots are filled.

In these examples, the important consideration is that the procedure(s) required to meet the lesser category definition are met – trainees may not simply ‘deflate’ a case category if the procedure performed does not meet the lesser category definition.

In all cases logged, the diagnosis and procedure columns are to include the full set of information for what was diagnosed and performed on that date.

**Specialist Training Hours**

**Surgery**
Recognizing that the current wording is confusing, the following changes were made: These are “Major” changes (i.e. not required for trainees whose program was registered prior to January 1st, 2009).

Change the wording in bullet two of the surgery hours section of the Specialist Training document to:

- Minimum of 16 hours of the 40 required surgery contact hours are to be fulfilled by attending the Specialist Training - Surgery modules at the Annual Veterinary Dental Forum, by attending AVDC-sponsored lecture-laboratory sessions at the ACVS Forum, or by attending an AVDC pre-approved course as described in the first bulleted item. Certification of attendance is required.

Change the wording in bullet three of the surgery hours section of the Specialist Training document to:
• Minimum of 16 of the 40 required surgery contact hours are to be completed by participating in clinical surgical procedures performed by an A/ECVS diplomate (the procedures are recommended but not required to be restricted to oral and maxillofacial surgery). Certification of attendance is required.

Case Reports

Case Report Equivalent policy – articles submitted for publication: In October 2008, AVDC permitted consideration of articles submitted for publication for Case Report Equivalent Points. The policy is fully explained in the Case Report and Alternatives to Case Reports (CREP system) document in the Case Report section of the Information for Registered Trainees web page.

Case Reports: Citing of references: The Credentials Committee reminds trainees that citation of a reference is to include a page number when the item cited is a book or book chapter. To avoid having the case report flagged, read the Case Report Format section in the Case Report and CREP document before you submit your case report.

Credentials Application Packages

“Six cases” images: Item L, Case Logs, in the Credential Application document. Addition in the Six cases section: Maximum 10 images per case for the “six case” validation submissions.

Training Program, Credentialing and Examination Fees

Examination Fees
The examination fee for the March 2009 examination is not changed. Examination fee is raised to $1,000. For re-examinations, the fees are: $800 for practical, $200 for each bench and written, maximum for all three parts $1000. This change is in effect for 2009 credentials applicants and the 2010 examination.

Credentials application fee
Credentials application fee is increased to $400.00. This change is in effect for 2009 credentials applicants. Total fee due with a July 2009 Credentials Application is credentials fee + examination fee = $1,400. If the credentials application is not approved, the examination part of the fee will be returned.

Training Program Fees
Application fee for Program Registration and Annual Training fees are each raised to $150, commencing January 1st, 2009. The invoice for the 2009 Annual Training Program fee (sent out with this Changes document) will reflect this increase.