Recertification for ECVSMR Diplomates

In order to maintain EBVS European Specialist status, recertification is required every 5 years after first recognition. Once you have been recertified, you may continue to use the title “European Specialist” for the next 5 years and your name will continue to be on the list of EBVS approved Specialists.

The European Board of Veterinary Specialisation specifies that Certified Diplomates must practise their specialty for more than 60% of their time, based on a working week of 40 hours. It is not permissible to be a European Specialist of more than one EBVS approved College.

Failure to recertify will result in:

1. The loss of training opportunities of future Residents. Current Residents will be able to complete their programme

2. Loss of the right to use the title of “European Specialist”, and removal from the EBVS list of active Diplomates

The award of the Diploma from the ECVSMR is not removed and membership of the ECVSMR may be continued.

Recertification can be obtained in one of two ways:

1. By sitting and passing the clinical case part of the ECVSMR annual diploma examination

Or:

2. By submitting the recertification request form with 100 or more credit points, and submitting two letters of reference.

**The deadline for submission**

The deadline for submission of the recertification application is no later than 3 months before the end of your certification period (for example: if you were certified in February 2020, you must submit your credentials no later than October 31, 2024). Submission for sitting the board examination must be done at least 6 months before the exam.

**Application for recertification requires:**

1. Completion of the Recertification request form with at least 100 credit points

2. Supporting evidence for the activities entered into the recertification request form

Forms must be typed and all submitted documentation must be included in a single zip file and emailed to [info@ecvsmr.org](file:///C:\Users\MO\AppData\Local\Microsoft\Windows\Temporary%20Internet%20Files\Content.Outlook\22M8KFQN\info@ecvsmr.org). An electronic signature is acceptable.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Publications in peer-reviewed journals or published works (maximum 50 points in total)** | | | | |
| Provide a list of publications, including the impact factor (available from the ISI Web of Knowledge Journal Citation Report) of the journal at the time of submission, and relevance of the publication to the field. The author must be able to show that the publication covers at least one of the subject-specific areas of knowledge outlined in the ECVSMR P&Ps (give the chapter number); indicate the role of the applicant in the study. A scanned copy of the title page or equivalent must be submitted. It is not necessary to include the full text (see below). | | | | |
|  | **Points per publication** | **Maximum in 5 years** | **Number** | **Total** |
| Scientific papers/ISI-listed journal/first author or last author | 10 | maximum 50 points in total |  |  |
| Scientific papers/ISI-listed journal/co-author | 7 |  |  |
| Case reports first or last author | 6 |  |  |
| Case reports co- author | 4 |  |  |
| Textbook chapter | 10 |  |  |
| Reviewing papers submitted for publication in international journal | 2 | 6 |  |  |
|  |  |  |  |  |
| **Oral presentations** | | | | |
| Provide a list of oral presentations (Poster presentations are not eligible unless they are also verbally presented to an audience) including copy of abstract/proceedings. The author must be able to show that the oral presentation covers at least one of the subject-specific areas of knowledge outlined in the ECVSMR P&Ps (give the chapter number, see below). | | | | |
| Oral presentation | 5 | 15 |  |  |
|  |  |  |  |  |
| **Attendance at AGM of ECVSMR** | | | | |
| Provide documentation justifying your attendance at the annual general meeting. A minimum of 2 meetings MUST be attended within the 5-year recertification period. | | | | |
|  | **Points** |  | **Number** | **Total** |
| AGM ECVSMR | 2 | 10 |  |  |
|  |  |  |  |  |
| **Attendance at ECVSMR and other major international meetings related to the speciality** | | | | |
| For example ACVSMR, AAEP, BEVA, ICEEP, ICEL, IAVRPT, VEPRA, ESVOT (list of international congresses is non-exhaustive, decision about individual conferences is to be taken on case-by-case basis). Please provide a detailed list of attended events and certificates of attendance. | | | | |
| ECVSMR Congress | 8 | 40 |  |  |
| Other Meetings | 3 | 15 |  |  |
|  | | | | |
| **Continuing Education** | | | | |
| The applicant must be able to show that the education covers at least one of the subject-specific areas of knowledge outlined in the ECVSMR P&Ps (give the chapter number) | | | | |
|  | **Points per event** | **Maximum in 5 years** | **Number** | **Total** |
| Lecturer/instructor at international educational event | 2 | 10 |  |  |
|  |  |  |  |  |
| **Involvement in college activities** | | | | |
|  | **Points per year** | **Maximum in 5 years** | **Number** | **Total** |
| Supervisor/residency program director (per resident per year) | 12 | 60 |  |  |
| President of the executive board | 20 | 100 |  |  |
| Vice-president of the executive board | 18 | 90 |  |  |
| Other executive board members | 15 | 75 |  |  |
| Chair of a college committee | 18 | 90 |  |  |
| Member of a college committee (for each) | 8 | 45 |  |  |
| Responsible for the webpage | 8 | 45 |  |  |
| Responsible for public relations, including newsletter | 8 | 45 |  |  |
| Contribution to webpage/newsletter (not just links to info- but „real text“) | 2 for each | 20 |  |  |
| Giving webinar for ECVSRM residents | 2 | 10 |  |  |
| Chair of the ECVSMR scientific meeting group | 25 | 50 |  |  |
| Member of the ECVSMR scientific meeting group | 15 | 60 |  |  |
| Auditor | 2 | 10 |  |  |
| Submission of MCQ questions for ECVSMR examination | 1 | 20 |  |  |
| Submission of cases for the ECVSMR examination | 5 | 30 |  |  |
| Vigilator of exam | 1/half day | 10 |  |  |
| Assessor of exam | 4/exam part | 12 |  |  |
|  |  |  |  |  |
| **Case logs** |  |  |  |  |
| If case logs are to be used for certification, the following rules must be observed:   * A minimum of 100 cases per year must be demonstrated * Cases should only be logged where the Diplomate is the primary clinician * Case logs must follow the same format and guidelines as those for residents as detailed in the Training Brochure * 10 points for each year up to a maximum of 50 points over the 5-year recertification period | | | | |
|  | **Points per year** | **Maximal in 5 years** | **Number** | **Total** |
| Case logs | 10 | 50 |  |  |

**Justification**

**Publications in peer-reviewed journals or published works**

**Example**

|  |  |
| --- | --- |
| Title | Compensatory load redistribution in Labrador retrievers when carrying different weights - a non-randomized prospective trial. |
| Journal and date | BMC Vet Res. 2016 Jun 7;12:92. doi: 10.1186/s12917-016-0715-7 |
| Impact factor | 1.75 |
| Authors | **Bockstahler B\***, Tichy A, Aigner P |
| Role | Study design and objective, GRF measurements |
| Relevance | 2.3.2.8: Issues influencing athletic performance, health and animal welfare in specific athletic disciplines: identify the known injury risk factors and sport-related stress factors in relation to the physiology, pathology and biomechanics of the musculoskeletal system. |

**Publications**

|  |  |
| --- | --- |
| Title | Type here |
| Journal and date | Type here |
| Impact factor | Type here |
| Authors | Type here |
| Role | Type here |
| Relevance | Type here |

Please copy and paste the table for further publications

**Reviewing papers submitted for publication in peer-reviewed journals**

|  |  |
| --- | --- |
| Title | Type here |
| Journal and date | Type here |
| Impact factor | Type here |
| Authors | Type here |
| Relevance | Type here |

Please copy and paste the table for further reviews

**Oral presentations**

|  |  |
| --- | --- |
| Title | Type here |
| Conference and date | Type here |
| Relevance | Type here |

Please copy and paste the table for further oral presentations

**Attendance AGM of ECVSMR**

|  |  |
| --- | --- |
| Place and date | Type here |
| Place and date | Type here |
| Place and date | Type here |
| Place and date | Type here |
| Place and date | Type here |

**Attendance at ECVSMR congress**

|  |  |
| --- | --- |
| Conference and date | Type here |
| Conference and date | Type here |
| Conference and date | Type here |
| Conference and date | Type here |
| Conference and date | Type here |

**Attendance at other major international meetings**

|  |  |
| --- | --- |
| Conference and date | Type here |
| Conference and date | Type here |
| Conference and date | Type here |
| Conference and date | Type here |
| Conference and date | Type here |

**Supervisor/residency program director**

|  |  |
| --- | --- |
| Name of the resident | Type here |
| Start of the residency | Type here |
| Institution where the residency  programme has been approved | Type here |

Please copy and paste the table for further residents

**Involvement in college activities**

|  |  |
| --- | --- |
| President of the executive board | from - to |
| Vice-president of the executive board | from - to |

|  |  |  |
| --- | --- | --- |
| Other executive board members | from - to | role |

Please copy and paste the table for further board roles

|  |  |  |
| --- | --- | --- |
| Chair of a college committee | from - to | committee |

Please copy and paste the table for further chair activities of another college committee

|  |  |  |
| --- | --- | --- |
| Member of a college committee | from - to | committee |

Please copy and paste the table for further activities in another college committee

|  |  |
| --- | --- |
| Responsible for the webpage | from - to |
| Responsible for public relations, including newsletter | from - to |
| Contribution to webpage/newsletter (not links to info- but „real text“) | from - to |

|  |  |
| --- | --- |
| Chair of the ECVSMR scientific meeting group | Conference and year |
| Member of the ECVSMR scientific meeting group | Conference and year |

|  |  |
| --- | --- |
| Auditor | from - to |

|  |  |  |
| --- | --- | --- |
| Questions for exam sessions | exam year | number of questions |
| Cases for the exam sessions | exam year | number of cases |
| Vigilator of exam | exam year |  |
| Assessor of exam | exam year |  |

Please copy and paste the table for further activities in exams

|  |  |
| --- | --- |
| Case log | year |
| Case log | year |
| Case log | year |
| Case log | year |
| Case log | year |

I declare that

1. I practise scientific, evidence-based veterinary medicine, which complies with my country’s animal welfare legislation.
2. the information provided in this application is true.

Signed……………………………………………………………………………..

Date…………………………..

**Attachments**

1. Supporting evidence for the activities entered into the recertification request form

2. Two reference letters

3. Case logs if used for re-certification