

## Detailed Program Description for ACVD Website

1. Program name and location:
  - Dermatology Residency, University of Florida, Gainesville, Florida
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):
  - Name: Rosanna Marsella
    - Years in ACVD: since 1996
    - Years as Mentor: from 1996-2009, then from 2014-17
  - Name: Domenico Santoro
    - Years in ACVD: since 2010
    - Years in ECVD: since 2010
    - Years as Mentor: since 2010
4. Specific requirements for applying to the program:
  - DVM, Internship or equivalent
5. Length of residency in years: 3-4 (4 years if associated with a MS)
6. Is a Master's degree or PhD required?
  - If so, which? Yes, unless funding is not available.
7. When the residency was first offered?
  - Dr Marsella has been involved since 1996 as mentor at UF.
  - Since 2014 Drs. Marsella and Santoro have been involved as mentors at UF
  - a. Has it been continuous since then?
    - There was a break from 2009 to 2014
  - b. If not continual what years was the residency offered?
    - The program was active from 1996 to 2009 and restarted in 2014 onward. The program has been continuous since 2014
8. How many residents have been accepted into the program since inception?
  - The residency program at the University of Florida has had many residents since its inception.
  - Since 2014, when Dr. Santoro (and Dr. Gram) has joined the program with Dr. Marsella, the program has had 8 residents (4 still in training).
  - a. How many of these have become board certified dermatologists?
    - 13 from 1996-2009
    - 3 (plus 1 resident did not complete the training and 4 are still in training)

9. What is the average annual dermatology caseload for the institution over the past 5 years? We have seen an average of 1,600 cases per year

10. What is the average total caseload seen the entire residency?

- The total number of cases seen during a 3-year program by the dermatology service is 4,800 cases (average cases annually times the number of years of residency). However, the resident would not see all these cases as they would be also seen by faculty members as primary clinicians. The resident would probably see one third (up to 1,600 cases over 3 years) of them as primary responsible.

11. On average, how many new patients, rechecks and consults does the program see per year? (actual numbers of cases)

- New cases (~550)
- Rechecks (~1,050)
- Consults (~200)

12. On average, what percentage of the program's cases are dogs and cats?

- Dogs (~70%)
- Cats (~30%)

13. On average, how many exotic, equine and farm animal cases does the program see per year?

- Exotics (~30)
- Equine (~50)
- Farm animals (~10)

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 year:	100%
third year:	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?

a. If so, please list:

- We have every specialty in our hospital (e.g. medicine, surgery, oncology, neurology, cardiology, ophthalmology, radiology, pathology, integrative medicine, nutrition, and anesthesiology).

16. Please describe your library access:

- We have library in the veterinary school, medical school and on campus offering a variety of textbooks and journals available to the resident. In

addition, the University of Florida has electronic subscription to thousands of journals.

17. Does the program have statistical support for their residents' research projects?

- Yes, we have statisticians in the department. In addition, mentors have extensive training in medical statistics.

18. Does the program have direct access to any basic science or clinical science laboratories that the resident can use for research proposes?

- If yes, please describe the types of laboratories available and interactions that the resident may have with them.
  - Our comparative dermatology laboratory is fully equipped for basic science research. In the laboratory there are two PIs. The laboratory is set up with graduate students and two bioscientists. In addition, equipment to perform the most common laboratories methodologies are available (e.g. ELISA, western blot, PCR, immunohistochemistry, immunofluorescence, cell cultures, microbiology techniques). We also have access to core laboratories for flow cytometry and electron microscopy. We are also set up to run clinical trials and we have a clinical trial coordinator on staff.

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.)*

- Case rounds: daily
- Journal club: weekly
- Histopathology training: weekly with dermatologists and dermatopathologists
- Basic science learning rounds: weekly

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)

- Full health insurance and 14 days of vacation per 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?

- We have annual hospital money that will cover part of the cost. However, it may not be able to cover 100% of the expenses depending on the location of the meeting.

23. Average number of days a resident will spend on clinics per month:

- The clinical schedule for the residents include 3 weeks/month

24. Average number of days a resident will spend on non-clinical pursuits per month (not including Sundays or holidays):

- 5 days (one working week)

25. Does the resident have to take general medicine emergency duty?

- No

26. Does the resident take Dermatology emergency duty?

- Yes, when on clinics

If so how often:

- 3 weeks/month. However, the days on emergency duty are equally divided by the residents in the program.

27. Is time allotted for externships in other subspecialties or at other dermatology practices?

- Yes

If so explain:

- 2 weeks/year

28. How much time is allotted off clinics for board preparation?

- 25% of the time is off clinics. In the last year we allow residents to accrue off clinic time so that it can be used in larger blocks at the end.

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)?

- Research time comes out of the 25% off clinic time. Depending on the nature of the project the resident can use an entire block (1 week/month) or more blocks or even 1 day/week.

30. What are the other responsibilities/duties of the resident?

- Helping with phone calls, both with clients or referring veterinarians and daily teaching rounds with students.

31. How many residents has the program had over the past 10 years?

- The program has had a total of 8 (1 resident did not complete the training and 4 are still in training) residents over the past 10 years (since 2014).

32. How many/what percentage of the above residents (question 31) passed credentials on the:

- First submission? 100%
- Second submission?
- Third submission or more?
- Never passed credentials?

33. How many/what percentage of the above residents (question 31) sat boards for

the first time:

1. The year they finished their residency: 3/3 = 100%
2. One year after finishing their residency: 0
3. Two or more years after finishing: 0
4. They never took boards: 0

34. How many/what percentage of the above residents (question 31) passed the board exam on their:

1. First time taking the exam: 3/3 = 100%
2. Second time taking the exam: 0
3. Third time or more taking the exam: 0
4. Never passed: 0

35. Is your residency program reviewed by an outside committee at your university?

- Yes

If yes, how often?

- Every 5 years

36. Please list the papers published by your last 5 residents.

1. Liguori B, Alexander A, **Wyatt D**, Wellehan J, Santoro D. Orchard grass allergy in an African spur-thighed tortoise (*Centrochelys sulcata*) confirmed via intradermal allergen testing and provocation testing. *Vet Dermatol.* 2020; 31: 491-e129.
2. **Wyatt D**, Santoro D, Deabold K, Gruntmeir J, Childress A, Craft WF, Walden HDS, Wellehan JFX. Subcutaneous nodules and dermatitis associated with non-*immitis* non-*repens* dirofilariosis morphologically consistent with *Dirofilaria striata* in a 2-year-old male domestic cat in Florida, USA. *Vet Q.* 2020; 40: 215-222.
3. **Cobiella D**, Archer L, Bohannon M, Santoro D. Pilot study using five methods to evaluate skin barrier function in healthy dogs and in dogs with atopic dermatitis. *Vet Dermatol.* 2019; 30: 121-e34.
4. **Cobiella D**, Gram D, Santoro D. Isolation of *Neisseria dumasiana* from a deep bite wound infection in a dog. *Vet Dermatol.* 2019; 30: 556-e168.
5. **Cobiella D**, Gram D, Santoro D. Noninvasive evaluation of vascular endothelial growth factor-A (VEGF-A) protein concentrations in the stratum corneum and serum of healthy and atopic dogs. *Vet Dermatol.* 2020; 31: 102-105.
6. **Boyd M**, Santoro D, Craft WF, Ginn PE, Childress AL, Wellehan JFX, Walden HS. Dermatitis caused by autochthonous *Cercopithifilaria bainae* from a dog in Florida, USA: clinical, histological and parasitological diagnosis and treatment. *Vet Dermatol.* 2019; 30: 68-e20.
7. **Boyd M**, Santoro D, Gram D. In vitro antimicrobial activity of topical otological antimicrobials and Tris-EDTA against resistant *Staphylococcus pseudintermedius* and *Pseudomonas aeruginosa* isolates from dogs. *Vet Dermatol.* 2019; 30: 139-e40.

8. **Marshall KR**, Walton SA, **Boyd M**, Bishop B, Wellehan J, Craft W, Santoro D. Erysipeloid lesions caused by *Erysipelothrix rhusiopathiae* in a dog: clinical and histopathological findings, molecular diagnosis and treatment. *Vet Dermatol.* 2019; 30: 434-e134.
  9. **Boyd M**, Morris JM, Santoro D. Plasma membrane integrity and oxidative stress index outcomes of canine progenitor epidermal keratinocytes (CPEKs) exposed to virgin coconut oil (VCO). *Vet Dermatol.* 2019; 30: 553-e166.
  10. **Bentley JJ**, Santoro D, Gram DW, Dujowich M, Marsella R. Can ultraviolet light C decrease the environmental burden of antimicrobial-resistant and -sensitive bacteria on textiles? *Vet Dermatol* 2016; 27: 457-e121.
  11. **Kelley L**, Flynn-Lurie A, House R, Simpson A, Marsella R. Safety and tolerability of 0.1% tacrolimus solution applied to the external ear canals of high IgE beagle dogs without otitis. *Vet Dermatol* 2010; 21: 554-565.
  12. **Seltzer J**, Flynn-Lurie A, Marsella R, Brennan M. Investigation of the clinical efficacy of topical stannous fluoride for the treatment of canine superficial pyoderma. *Vet Dermatol* 2010; 21: 249-258.
37. Names of your last 5 residents and whether they are willing to be contacted by potential residents:
- Dr. Danielle Wyatt (Cobiella)
  - Dr. Megan Boyd
  - Dr. Jennifer Bentley
  - Dr. Judith Seltzer
  - Dr. Laura Kelley