Sponsoring Institution Registration Form for **Small Animal Internal Medicine**

2.	Location of sponsoring institution Name: Address: Phone:
3.	Program Supervisor' name, title and email (The Program Supervisor must be an active AiCVIM Diplomate) Name: Title: Email:

1. Date of application

4. Please indicate the availability of the following facilities or equipment to be used in resident training.

	Available?	On- or Off-site?
Standard radiological equipment		
Ultrasonographic equipment		
Color flow/Doppler equipment		
Endoscopy equipment		
Clinical Pathology capabilities		
(CBC, chemistry, blood gases,		
urinalysis, cytology)		
Blood Pressure Measurement		
Computed Tomography		

Magnetic Resonance Imaging*	
Electromyography*	
Intensive Care Facility – 24 hours*	

^{*}Recommended but not required