

**SCHOOL OF
VETERINARY MEDICINE**
University of Wisconsin-Madison

Advancing animal and human health with science and compassion

Dentistry and Oral Surgery Residency Program

Department of Surgical Sciences

Introduction

The Department of Surgical Sciences, in cooperation with other departments at the University of Wisconsin-Madison, offers a 3-year program of study leading to a certificate of residency training in dentistry and oral surgery. The residency training is administered by the Department of Surgical Sciences, with the clinical advisor being one of the faculty members within the Dentistry and Oral Surgery service.



Madison

Madison is the state capital of Wisconsin and has a population of more than 300,000 people including over 40,000 university students. It is located in south central Wisconsin; Milwaukee is 50 miles east, Chicago is 150 miles southeast and the Twin Cities of Minneapolis and St. Paul are 260 miles northwest.

Madison lies on an isthmus between two lakes and, with two additional smaller lakes, has 180,000 acres of water. The city has 150 parks including the six-acre Vilas Park Zoo and the 1,270-acre University of Wisconsin arboretum, which has 24 miles of foot trails. There are extensive bikeways and numerous tennis courts and golf courses.



Aerial View from Lake Monona looking towards Convention Center and Capital

Madison is a center for cultural events and it and the surrounding Dane County offers many natural attractions and recreational activities. Madison's elevation averages 860 feet above sea level, and the terrain in Dane County varies from open with rolling slopes to hilly with steep valleys.

The Madison public school system is among the best in the Midwest, and its innovative educational program is nationally recognized for its excellence.

Madison's economy is stable and diverse. The largest employers in the city are state government and the university. Insurance, finance, and real estate are major industries. The international headquarters of several large insurance companies are located here. Several manufacturing companies are located in Madison, and they produce both durable

and nondurable goods. Several federal offices, as well as a Veterans Administration Hospital, and many research and testing laboratories are located in Madison.

The University of Wisconsin-Madison

Founded in 1849, the University of Wisconsin-Madison is internationally known for its educational quality and outstanding faculty. The University ranks third among universities in the U.S. in federally funded research and first among all state supported universities in obtaining all types of research and development funds. The UW-Madison campus has more than 2,300 faculty members and 125 departments, including Schools of Law, Medicine, Nursing, Journalism, Agriculture, Engineering, Pharmacy, Business Education, Letters and Science, and Veterinary Medicine. Located a mile from the state capitol on a series of hills overlooking Lake Mendota, the attractive campus includes several gymnasiums which provide facilities for handball, racquetball, squash, swimming, jogging, basketball, badminton, tennis, and other sports.



Aerial View of Campus Overlooking Lake Mendota

The School of Veterinary Medicine

The School was established by Wisconsin legislative action in 1979. Construction of the new facility began in 1981 and was completed in March 1983. The school opened the doors to its first class of 80 students in August 1983. The school is accredited by the American Veterinary Medical Association Council on Education.

The main facility of the School of Veterinary Medicine (located on the University of Wisconsin-Madison campus) is a contemporary, four-story brick building which houses classrooms, teaching and research laboratories, faculty and administrative offices, and a state-of-the-art Veterinary Medical Teaching Hospital. The new William R. Gengler Dentistry and Oral Surgery Suite provided by Midmark opened in the spring of 2011. The brand new dental suite is equipped with the newest Midmark equipment.



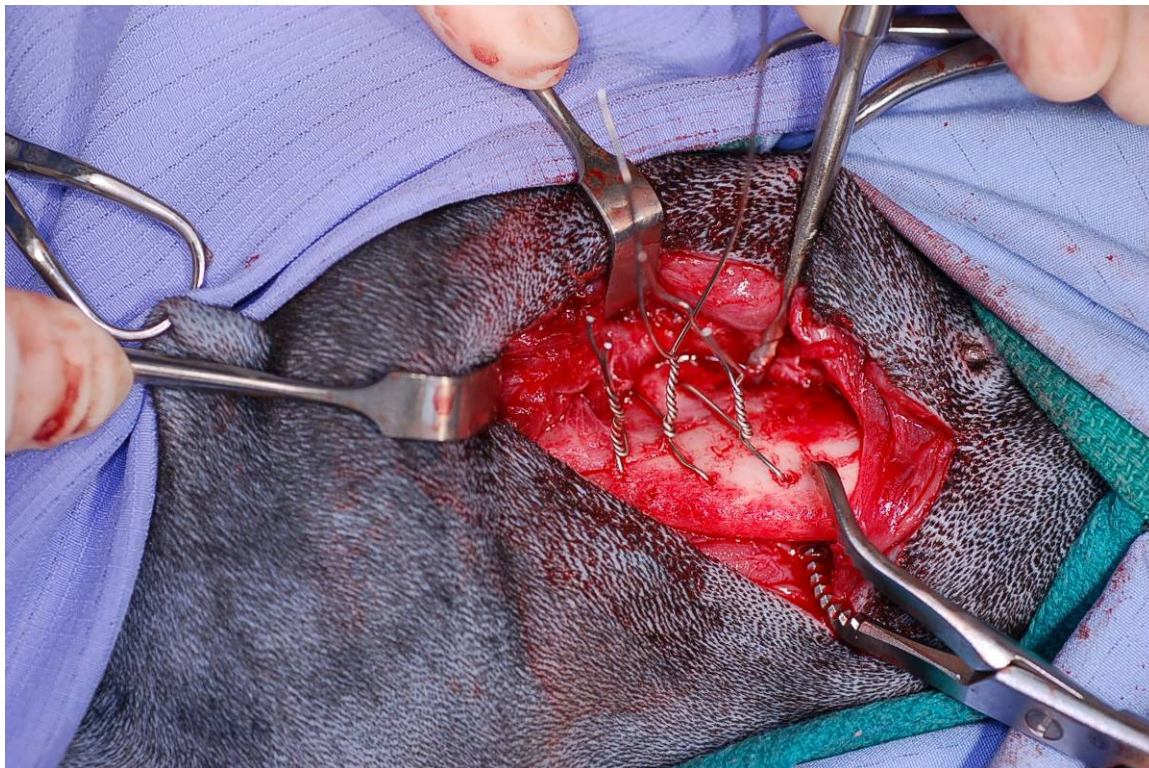
The William R. Gengler Dentistry and Oral Surgery Suite

Dentistry and Oral Surgery Residency Program

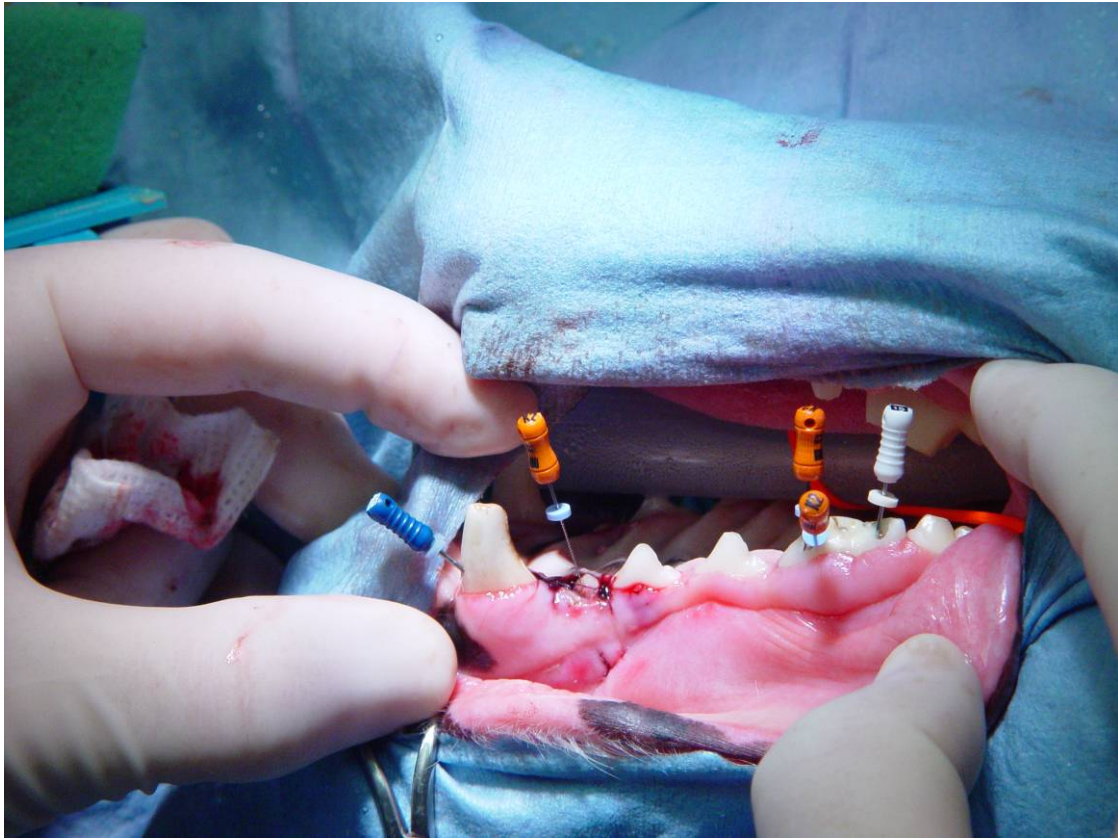
Goals

The objective of this program is to provide resident training, knowledge and experience in the discipline of companion animal dentistry and oral surgery through exposure to clinical dentistry and oral surgery, teaching and research. The program will provide a review of the basic science areas of veterinary medicine as they pertain to dentistry, and of the applicable aspects of human dentistry as they pertain to animals. This training will lead to clinical proficiency in dentistry and oral surgery and should prepare the resident for academic teaching or clinical referral practice. The residency program is designed to fulfill the guidelines for residency as established by the American Veterinary Dental College (AVDC).

Admission into the second and third years of the program and issuance of the certificate of residency training are dependent upon satisfactory evaluation of the resident's performance as determined by faculty of the Dentistry and Oral Surgery service and the Department of Surgical Sciences. At least two publications, acceptable to a peer-reviewed journal, must be submitted for publication before the end of the program. At least one of these must arise from a research project. The resident must be first author of these publications.



Repair of a Jaw Fracture



Root Canal Therapy in a Dog

Format

The 36 months of the program is subdivided approximately as follows:

Approximately nine months will be dedicated to professional development, clinical research, scientific writing and preparing for the AVDC board examination. This time will not be a single block, but divided into multiple smaller units.

One and one half months (two weeks/year) for vacation.

The remaining time will be dedicated to clinical residency training in dentistry and oral surgery and related disciplines. The resident will share “on call” duty for oral and maxillofacial emergencies with other dentistry and oral surgery residents.

The resident is assigned a mentor. In addition, the program has a residency director. The mentor may or may not be the residency director. The residency director and mentor will enter into discussions with the resident regarding plans for research, writing, and philosophy of residency training. The residency director and mentor have the responsibility of helping guide the resident towards completion of the clinical training requirements as required by the AVDC credentialing committee. The mentor may also serve as the research advisor and have the responsibility of guiding the major research focus of the resident, but other dentistry and oral surgery faculty may be involved with smaller research projects and/or manuscripts with the resident.

Clinical Training

The major responsibility of the resident is to receive, diagnose, treat, and carry out the postoperative management of dentistry and oral surgery patients admitted to the Veterinary Medical Teaching Hospital (VMTH). These duties are performed under supervision of the faculty member on-clinics. The resident's responsibility for patient care and teaching increases as training progresses, and is dependent upon demonstrated levels of proficiency.

The clinical Dentistry and Oral Surgery Service consists of one on-clinic faculty member, one off-clinic faculty member, two or three residents, two - three fourth year students and possibly one intern. Two to three mornings per week are spent examining animals in the clinic and the remainder of the week is scheduled in the dentistry and oral surgery suite and in rounds. The resident is exposed to a varied referral and routine dentistry and oral surgery caseload. In addition to development of technical proficiency, emphasis is placed on problem solving skills in diagnosis and pre and postoperative management of dentistry and oral surgery patients.



Treatment of Malocclusion with Acrylic Orthodontic Appliance

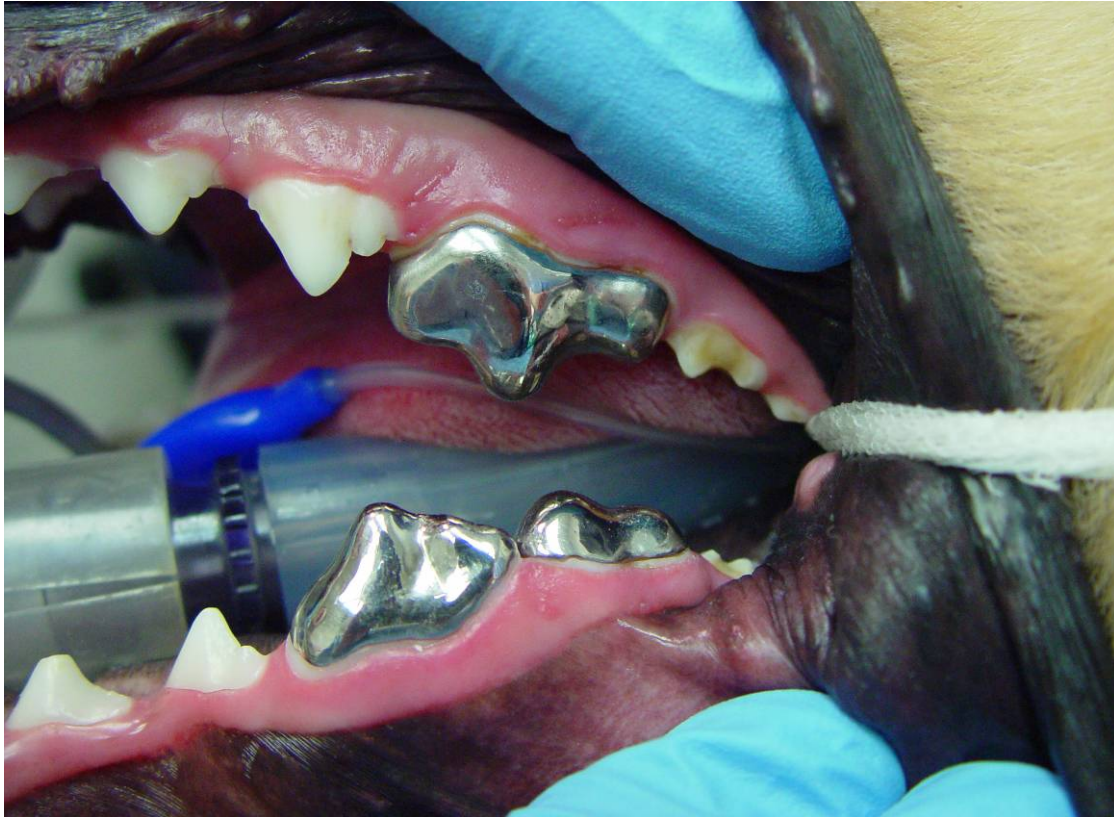
Dentistry and Oral Surgery Cases: Distribution & Responsibilities

Distribution of cases is approximately 20% elective (dental prophylaxis) and 80% non-elective (endodontics, periodontics, dentoalveolar and maxillofacial traumatic injuries, operative/restorative dentistry, prosthodontics, orthodontics, oral oncology and other oral pathology cases).

The resident should have in-depth knowledge about the diagnosis, pathophysiology, anatomy, treatment, and prognosis of *all cases on the service*. Preparation for treatment includes review of anatomy, pathophysiology, surgical approach (including alternatives), technical details of the procedure, postoperative care and complications. Additionally, the resident is responsible for knowledge of current literature (human and veterinary).

The resident is responsible for approximately 17-26 weeks of emergency on-call duty per year. All dentistry and oral surgery residents share duty for dentistry and oral surgery emergencies and for care of oral surgery patients in the Critical Care Unit. A Dentistry and Oral Surgery faculty member is available for consultation and assistance with all after hours' cases.

Faculty/resident/student rounds are held daily to discuss animals seen in the clinic, develop plans for diagnosis and management and monitor the progress of hospitalized animals.



Crown Therapy in a Dog

Specific Program Description

- a) **Resident Orientation:** The resident will be allowed time to attend the VMTH orientation. The mentor will be available to assist the resident with orientation issues. Whenever possible in the first few weeks of clinical rotation, the first year resident will be paired with a second or third year resident to assist with clinical orientation. The first year resident will not be scheduled for emergency duty during the first week of the residency program.
- b) **Weeks of Supervised Training:** Approximately 24.5 months will be spent in supervised clinical training in dentistry and oral surgery and related disciplines (anesthesia, radiology, oral surgery, general surgery and orthopedic surgery). A minimal amount of this time will be spent at off-campus locations (i.e. Marquette Dental School in Milwaukee, WI).
- c) **Expectations for Case Management:** The resident is responsible for patient care, reviewing daily progress notes and surgery reports, client communication (in cooperation with the faculty member), discharge instructions and referral reply (always in consultation with a faculty member). Examinations of patients and daily progress reports and treatment orders should be completed by 8:00 a.m. Faculty/resident/student rounds are held daily to discuss animals seen in the clinic, develop plans for diagnosis and management, and monitor the progress of hospitalized animals.
- d) **Role of the First Year Resident:** The first year resident will be responsible for coordinating and accommodating weekly cadaveric labs for clinical veterinary students.
- e) **Role of the Second Year Resident:** The second year resident coordinates the resident rounds. It is anticipated that the second year resident will present a topic (possibly his/her research) at a national meeting. In addition, the second year resident will be given one to two lectures to present within the veterinary curriculum.
- f) **Role of the Third Year Resident:** It is anticipated that the third year resident will present his/her research at a national meeting. In addition, the third year resident will be given one to three lectures to present within the veterinary curriculum. The third year resident may assume primary clinical service responsibility but will always be supervised by a faculty member.
- g) **Resident Evaluation:** Residents receive formal evaluations twice annually and meet to discuss these with the Dentistry and Oral Surgery faculty members. The resident receives both oral and written evaluation at these meetings and is given the opportunity to respond to the faculty members. Specifically, the resident's performance is evaluated within the following categories: clinical skills and subject knowledge, enthusiasm and leadership, teaching, interpersonal relationships, service, progress in research/graduate training, goals and progress towards those goals.

Resident Rounds Schedule

The Dentistry and Oral Surgery Service holds resident rounds twice weekly on Mondays and Fridays from 8:00 – 9:00 am. Book chapters, specific topics, morbidity and mortality cases, and journal articles are discussed on a rotating basis. Each resident is assigned topics on a rotating basis. The Dentistry and Oral Surgery faculty members also present topics for education and discussion. In addition, numerous services throughout the hospital have rounds that the Dentistry and Oral Surgery Service attends on an occasional basis.

AVDC Requirements

As required by the AVDC, the resident maintains an up-to-date CV. This CV lists rounds, seminars/meetings attended and seminars/lectures presented. The resident, also, maintains a case log listing case number, animal identification and species, date, treatment, and whether responsibility was as primary or assistant surgeon. This log is reviewed by the mentor and residency director. The AVDC also requires two manuscripts to be published prior to sitting for the credentialing examination. More information on AVDC residency requirements can be found at www.avdc.org.

Meetings

The resident is entitled to five working days per year to attend professional meetings. The selection of meetings must be approved by the mentor. Attendance at the Veterinary Dental Forum is strongly encouraged and may be required.

Teaching

The resident participates in the daily supervision and instruction of veterinary medical students in the VMTH, operative practice laboratory (6-8 afternoons per year) and didactic teaching programs (2-5 lectures during the three years of residency). In addition, the resident is required to present a clinical topic to pre-clinical veterinary students at least once per year as part of a morning lecture series and is required to present at the school/hospital grand rounds lecture series attended by faculty, students and staff at least once during his/her residency.

Progress Reports

Formal review of the resident's program and performance occurs three months after the initial appointment and at six-month intervals thereafter. Admission into the second and third years of the program and issuance of the certificate of residency training is dependent on satisfactory evaluations of the resident's program and performance. The standards for satisfactory performance are established by the Department of Surgical Sciences and the Dentistry and Oral Surgery Service.

Admission Qualifications

To be eligible for the residency program, an applicant must be a United States citizen or have suitable visa status, must have a DVM (or equivalent) degree and must have completed one year of internship or equivalent practice experience.

The following material is required for application:

- 1 A personal statement describing background, reasons for applying for the residency program, and career goals.
- 2 Curriculum Vitae
- 3 At least three letters of recommendation from instructors, researchers or practitioners. These letters should address aptitude and performance in intellectual and creative pursuits pertinent to scientific research, knowledge of veterinary medicine, clinical skills, ability to apply knowledge in a clinical situation and ability to communicate and work with others.
- 4 Official transcripts and grade point average from **all** post secondary institutions attended **and class rank from veterinary school.**
- 5 Applicants must be part of the American Association of Veterinary Colleges (A.A.V.C.) Resident Matching program (Resident Matching Program, 1024 Dublin Road, Columbus, OH 43215).

The University of Wisconsin is an affirmative action/equal opportunity employer.

Direct requests for information and/or visitation to:

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Dentistry and Oral Surgery Faculty

A current bio, and a list of research interests, on-going research projects, and publications for Dr. Chris Snyder can be found at:

<http://www.vetmed.wisc.edu/people/snyder>

A current bio, and a list of research interests, on-going research projects, and publications for Dr. Jason Soukup can be found at:

<http://www.vetmed.wisc.edu/people/soukupj>

Current Residents

Brenda Mulherin - Dr. Mulherin entered the residency program in 2010.

Jessica Riehl - Dr. Riehl entered the residency program in 2011.

Chad Lothamer - Dr. Lothamer entered the residency program in 2012.

Residents who have Completed Program

John Sowers - Dr. Sowers completed the program in 2003. He was admitted to the AVDC in 2003. He was in private referral practice in Scottsdale, AZ until his untimely passing in 2005.

Lee Jane Huffman - Dr. Huffman completed the program in 2004. She became a diplomate of the AVDC in 2005. She is currently in private referral practice in Ventura, California.

Don Beebe - Dr. Beebe completed the program in 2005. He was admitted to the AVDC in 2006. He is in private referral practice in Englewood, Colorado.

Matt Lemmons - Dr. Lemmons completed the program in 2007. He became a diplomate of the AVDC in 2008 and is in private referral practice in Indianapolis, IN.

Christopher Snyder - Dr. Snyder completed the program in 2008. He became a diplomate of the AVDC in 2009. Dr. Snyder joined the faculty at University of Wisconsin, School of Veterinary Medicine in 2008 and is an Assistant Professor.

Jason Soukup - Dr. Soukup completed the program in 2009. He became a diplomate of the AVDC in 2009 and joined the faculty at University of Wisconsin, School of Veterinary Medicine. He is currently an Assistant Professor.

Carlos Rice - Dr. Rice completed the program in 2011. He joined the Dentistry and Oral Surgery Service at the University of Pennsylvania as a lecturer in 2011. He became

a diplomate of the AVDC in 2012 and is currently in private specialty practice in the Philadelphia area.

Chanda Miles – Dr Miles completed the program in 2012 and became a diplomate of the AVDC the following year. She is currently in private specialty practice in Texas.

UW Dentistry and Oral Surgery Service Publications

1: Soukup JW, Snyder CJ. Transmylohyoid Orotracheal Intubation in Surgical Management of Canine Maxillofacial Fractures: An Alternative to Pharyngotomy Endotracheal Intubation. *Vet Surg.* 2014 Jan 22. doi: 10.1111/j.1532-950X.2014.12138.x. [Epub ahead of print] PubMed PMID: 24612079.

2: Mulherin BL, Snyder CJ, Soukup JW, Hetzel S. Retrospective evaluation of canine and feline maxillomandibular trauma cases. Comparison of lunar cycle and seasonality with non-maxillomandibular traumatic injuries (2003-2012). *Vet Comp Orthop Traumatol.* 2014 Feb 26;27(3). [Epub ahead of print] PubMed PMID: 24569925.

3: Mulherin BL, Snyder CJ, Soukup JW, Hetzel S. Retrospective evaluation of canine and feline maxillomandibular trauma cases. A comparison of signalment with non-maxillomandibular traumatic injuries (2003-2012). *Vet Comp Orthop Traumatol.* 2014 Feb 26;27(3). [Epub ahead of print] PubMed PMID: 24569903.

4: Tannenbaum J, Arzi B, Reiter AM, Peralta S, Snyder CJ, Lommer MJ, Harvey CE, Soukup JW, Verstraete FJ. The case against the use of dental implants in dogs and cats. *J Am Vet Med Assoc.* 2013 Dec 15;243(12):1680-5. doi: 10.2460/javma.243.12.1680. PubMed PMID: 24299535.

5: Soukup JW, Snyder CJ, Simmons BT, Pinkerton ME, Chun R. Clinical, histologic, and computed tomographic features of oral papillary squamous cell carcinoma in dogs: 9 cases (2008- 2011). *J Vet Dent.* 2013 Spring;30(1):18-24. PubMed PMID: 23757821.

6: Snyder CJ, Snyder LB. Effect of mepivacaine in an infraorbital nerve block on minimum alveolar concentration of isoflurane in clinically normal anesthetized dogs undergoing a modified form of dental dolorimetry. *J Am Vet Med Assoc.* 2013 Jan 15;242(2):199-204. doi: 10.2460/javma.242.2.199. PubMed PMID: 23276096.

7: Soukup JW. Crown preparation design: an evidence-based review. *J Vet Dent.*

2013 Winter;30(4):214-9. PubMed PMID: 24660306.

8: Mulherin BL, Snyder CJ, Soukup JW. An alternative symphyseal wiring technique. *J Vet Dent.* 2012 Fall;29(3):176-84. PubMed PMID: 23193712.

9: Rice CA, Snyder CJ, Soukup JW. Use of an autogenous cortical graft in combination with guided tissue regeneration for treatment of an infrabony defect. *J Vet Dent.* 2012 Fall;29(3):166-71. PubMed PMID: 23193710.

10: Soukup JW, Mulherin BL, Snyder CJ. Prevalence and nature of dentoalveolar injuries among patients with maxillofacial fractures. *J Small Anim Pract.* 2013 Jan;54(1):9-14. doi: 10.1111/j.1748-5827.2012.01295.x. Epub 2012 Oct 4. PubMed PMID: 23033815; PubMed Central PMCID: PMC3962954.

11: Rice CA, Riehl J, Broman K, Soukup JW, Gengler WR. Comparing the degree of exothermic polymerization in commonly used acrylic and provisional composite resins for intraoral appliances. *J Vet Dent.* 2012 Summer;29(2):78-83. PubMed PMID: 23008855.

12: Soukup JW. Should veterinary technicians be allowed to perform dental extractions? *J Vet Dent.* 2012 Spring;29(1):7-9. PubMed PMID: 22792855.

13: Soukup JW, Snyder CJ, Karls TL, Riehl J. Achievable convergence angle and the effect of preparation design on the clinical outcome of full veneer crowns in dogs. *J Vet Dent.* 2011 Summer;28(2):72-82. PubMed PMID: 21916370; PubMed Central PMCID: PMC3302665.

14: Miles CR, Bell CM, Pinkerton ME, Soukup JW. Maxillary ameloblastic fibroma in a dog. *Vet Pathol.* 2011 Jul;48(4):823-6. doi: 10.1177/0300985810382091. Epub 2010 Sep 22. PubMed PMID: 20861502.

15: Soukup JW, Lawrence JA, Pinkerton ME, Schwarz T. Computed tomography-assisted management of a mandibular dentigerous cyst in a dog with a nasal carcinoma. *J Am Vet Med Assoc.* 2009 Sep 15;235(6):710-4. doi: 10.2460/javma.235.6.710. PubMed PMID: 19751168.

16: Snyder CJ, Soukup JW, Gengler WR. Imaging and management of a caudal mandibular fracture in an immature dog. *J Vet Dent.* 2009 Summer;26(2):97-105.

PubMed PMID: 19718973.

17: Soukup JW, Snyder CJ, Gengler WR. Free auricular cartilage autograft for repair of an oronasal fistula in a dog. *J Vet Dent.* 2009 Summer;26(2):86-95. PubMed PMID: 19718972.

18: Soukup JW, Snyder CJ, Gengler WR. Computed tomography and partial coronoidectomy for open-mouth jaw locking in two cats. *J Vet Dent.* 2009 Winter;26(4):226-33. PubMed PMID: 20192022.

Veterinary Medical Teaching Hospital Faculty

For a current list of hospital faculty, please visit www.uwveterinarycare.wisc.edu.