**European College of Veterinary Neurology Re-certification Process**

Recognition of Diplomates of the ECVN as European Veterinary Specialist in Neurology requires demonstration of successful re-certification at least every 5-years under the ECVN re-certification process AND Diplomates of the ECVN should practice the speciality for more than **60 % of their time, i.e. more than 24 hours** based on a normal working week of 40 hours. **Practicing neurology can comprise clinical, research, teaching and administrative activities.**

Diplomates do not have to participate, but are then not eligible to use the EBVS recognised title of ***“EBVS® European Veterinary Specialist in Neurology”*** nor to supervise ECVN residents.

The deadline for submission is the **1st of October.**

**Do I need to submit a re-certification form?**

* NO – if you have been awarded your ECVN Diploma **by ECVN examination** less than five years ago.
* NO – if you have successfully completed the ECVN re-certification process within the past five years.
* NO – if you have notified the ECVN that you are non-practising or retired.
* NO – if you are an Honorary Member or Associate Member of the ECVN.
* YES – for all other Diplomates of the ECVN.

**Who do I submit the form to?**

Please complete this form and submit it by the online submission process through the ECVN website. Please contact the chair of the ECVN Credential and Recertification committee (credecom@ecvn.org) if you have any queries.

Without full details and clarity in the submission form, it can be difficult and very time-consuming for the members of the Recertification Committee to establish the validity of the information provided. Please refer to the **guidelines on how to fill the recertification documentation document** to avoid common mistakes.

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| **Title** | **First Name** | **Surname** |
|  |  |  |

|  |  |
| --- | --- |
| **Address (including Institution):** |  |

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| **Year ECVN Diploma was awarded:** |  |

Please list the re-certification points that you have accumulated over the last 5 years **up to a maximum of 200 points** (*the minimum required for successful reaccreditation is* ***100*** *over 5-years*). For each item please provide supportive evidence as bullet points (e.g. for publications please provide the reference, for conferences please name the conference, venue and date).

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|  | **Score per item** | **Total points for Section** |
| **Publications or peer-review work (maximum 70 points)** |  |  |
| Scientific papers / international journal (first, second or last author only) | 9 points per paper |  |
| Scientific papers / international journal (co- author) | 6 points per paper |  |
| Reviews / international journal | 6 points per review |  |
| Case reports (first, second or last author only) | 5 points per paper |  |
| Text book chapter or book editor | 12 points per chapter |  |
| Peer reviews for scientific journals | 5 points per review |  |
| **Presentations / Communications (maximum 60 points)** |  |  |
| At college / society annual meeting (presenting, second or last author) | 7 points per presentation |  |
| International congress (presenting, second or last author) | 5 points per presentation |  |
| National congress (presenting, second or last author) | 3 points per presentation |  |
| Poster (presenting, second or last author) | 2 points per poster |  |
| Continuing Education (international) | 3 points per 1h presentation |  |
| Continuing Education (national) | 2 points per 1h presentation |  |
| Meeting organisation (research) | 7 points per meeting |  |
| **Attendance of Congresses / Meetings (maximum 70 points)** |  |  |
| International congresses / meeting | 4 points per day |  |
| National congresses / meeting | 2 points per day |  |
| College congress | 8 points per congress |  |
| College workshop | 4 points per workshop |  |
| Attending advanced training courses | 3 points per day |  |
| PhD (award of PhD to yourself or award of PhD to a student supervised by you) | 18 points per PhD |  |
| Masters degree (award of Masters degree to yourself or award of Masters degree to a student supervised by you; if Master student is also a resident, should only add in one category) | 9 points per Masters |  |
| **Involvement in College Activities (maximum 60 points)** |  |  |
| Supervisor (per resident per year) | 8 points per resident per year if sole supervisor **or** 5 points per resident per year if shared supervision |  |
| Member of the College Board | 8 points per year |  |
| Member of an ECVN Committee | 8 points per year |  |
| Principal organiser of the annual ECVN symposium | 8 points per year |  |
| Assistant organiser of the annual ECVN symposium | 4 points per year |  |
| Principal organiser of the bi-annual brain camp | 15 points per year |  |
| Assistant organiser of the bi-annual brain camp | 8 points per year |  |
| Submitted questions for exam sessions (see guidelines on website) | 5 points per question (case-based or SAQ)  2 point per question (MCQ)  (Max 30 points) |  |
| ECVN Auditor | 2 points per year |  |
| **Other Boards & Committees (maximum 40 points)** |  |  |
| National editorial board | 3 points per board per year |  |
| Advisory boards | 8 points per board per year |  |
| Member of professional society | 4 points per society per year |  |
| International editorial board | 7 points per board per year |  |

**STATEMENT**:

I DECLARE that the information provided in this record is true and that I am actively practicing veterinary neurology for at least 60% of my time.

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| **MANDATORY REQUIREMENTS** | **NO** | **YES** |
| Practised the speciality of veterinary neurology for at least 60 % of normal working time (i.e. more than 24 hours a week). |  |  |
| Attendance to at least 2 ECVN annual general meetings within the past 5 years |  |  |
| Annual ECVN Membership paid in the last 5 years |  |  |
| **Total of Points Accrued in All Sections:** | Minimum required is 100 |  |

I also accept that my personal data will be evaluated and processed by the ECVN in line with the College By-laws and the College [Privacy Policy](https://www.ecvn.org).

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| --- | --- |
| **Name:** | |
| **Signature:** | **Date:** |