Shelter Medicine Externship Information Form for Participating Shelters

Organization

Name of Agency: Associated Humane Societies - Forked River Branch
Physical Address: 1 Humane Way, P.O. Box 93, Forked River, NJ 08731
County: Ocean
Agency Phone: (609) 693-6551
Agency Fax: (609) 242-1071
Website: www.ahsncares.org

Executive Director/CEO/Administrator

Name: Roseann Trezza
Title/Position: Executive Director
Telephone: (973) 824-7080
E-Mail Address: nj humane@ao1.com

Supervising Veterinarian

Name: Dr. Lacey Paris
Title/Position: Head Veterinarian
Telephone: (609) 693-6551
E-Mail Address: medical.lacey@ahsppz.org

Organization Information

How would you characterize the organization? Please select all that apply.
- Open admission/traditional shelter
- Limited admission/adoption guarantee shelter
- Animal sanctuary
- Spay/neuter clinic
- Municipal agency
- Private nonprofit agency
- Private nonprofit agency with government contract
- Other (please describe): 200, low cost public clinic

How many animals did the organization admit (shelter) last year?
- >20,000
- 10,000-19,999
- 5,000-9,999
- 500-999 (Only for Forked River Branch)
- <500

Externship Information

We offer a two week long externship to fourth year veterinary students with a focus on shelter medicine. Our shelter has open admission and can house just over 100 dogs and 200 cats. Our branch has a dog and cat sanctuary as well as a 20 intake addition to a traditional shelter. Our externs will be expected to learn intake, adoption, and preventative medicine procedures. Once familiar with these procedures, they can provide these procedures to our patients. Externs will also participate in and perform spay/neuter surgeries and dental procedures on shelter animals. Externs will have the opportunity to participate in ride alongs with our ACO and to work in the shelter office.
Proposed externship duration: 2 weeks □ Yes □ No
□ 4 weeks □ Other: _______________
□ 6 weeks □ Other: _______________
□ Other: _______________

Is student housing provided? □ Yes □ No
Is a student stipend provided? □ Yes, amount: $________
□ No

Please list any prerequisites for an externship at your organization. 

Externs must submit a resume and cover letter.

Insurance required:

Health insurance

How to apply (method, point of contact, etc.):

Please fax or email resume/cover letter to Dr. Baris.

How many veterinarians will the extern work with?
□ 1 Full-time
□ 2 Part-time
□ 3 Paid Staff
□ 4 Paid Contractor
□ 5 Volunteer

Do any of these veterinarians hold specialty board certification? □ Yes: ____________________________
□ No

The goal of a shelter medicine externship is to provide the veterinary student with a robust training experience in shelter medicine accompanied by exposure to the critical aspects of animal sheltering. Please fill in the attached blank calendar with a sample schedule that an extern would expect to follow at your agency. A sample week's schedule has been provided. This is a tool only and is not considered a binding schedule.

To categorize subject areas, please reference the following list.

Shelter Medicine Minimum 40 hours of 80-hour externship
For example: Rounds, treatments, exams, forensic cases, population management, infectious disease control, preventive health care, etc.

Sheltering Operations Minimum 20 hours of 80-hour externship
For example: Working with administration/management, cleaning and disinfection, animal control officer ride-alongs, working at the shelter intake area or in adoptions, etc.

Shelter Animal Surgery Up to 16 hours of 80-hour externship
For example: Shelter animal spay/neuter and other surgical procedures. Time can exceed 16 hours if other minimum requirements are met.

Shelter Animal Behavior Up to 12 hours of 80-hour externship
For example: Wellness and environmental enrichment, behavior assessment, behavior modification.

Community Medicine & Surgery Optional
For example: Public-owned animal spay/neuter, vaccinations, wellness, etc.

Upon submission of this application to Maddie's Shelter Medicine Program, I give permission for a Student Services Coordinator to submit an application on my behalf to the UF CVM Office for Students and Instruction, in order to complete the externship approval process.

Please submit the completed forms and any additional documentation to:

Maddie's Shelter Medicine Program
University of Florida
College of Veterinary Medicine
2015 SW 16th Avenue 100126
Gainesville, FL 32610
sheltermedicine@vetmed.ufl.edu

Maddie's Fund
UF Maddie's Shelter Medicine Program
College of Veterinary Medicine
UNIVERSITY OF FLORIDA
<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
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<tbody>
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<td>Optimal Day</td>
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<tr>
<td>9:00</td>
<td>Shelter Rounds</td>
<td>ACO Ride</td>
<td>Shelter Rounds</td>
<td>Spay/Neuter</td>
<td>Shelter Rounds</td>
<td>Shelter Exams</td>
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<td>Intake Exams</td>
<td>ACO Ride</td>
<td>Preventative health</td>
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Subject Area:
- Medicine
- Sheltering
- Shelter Surgery
- Community
- Behavior
- Other

Subject:
- 9
- 5
- 9
- 4
- 5
- 9
- 4
- 5
- 9

Total Hours: 54