1. **Training records:** A set of formats for various documents to be maintained by various stake holders for recording and monitoring the training process
    1.1. ICVP-TC Form-1: ICVP-Format for recording descriptive morphology of a lesion
    1.2. ICVP-TC Form-2: Format for reporting photographic illustration of morphologic description of lesions to the ICVP
    1.3. ICVP-TC Form-3: Farm animal necropsy report
    1.4. ICVP-TC Form-4: Companion animal necropsy report
    1.5. ICVP-TC Form-5: Poultry necropsy report
    1.6. ICVP-TC Form-6: Poultry farm disease investigation report
    1.7. ICVP-TC Form-7: ICVP Trainee's daily diary
    1.8. ICVP-TC Form-8: Trainees log-book

2. **Financial management of the training process**
    2.1. All expenses for the onsite training shall be managed by the Trainer/supervisor as agreed prior to the start of the training.
    2.2. The training committee shall prescribe a fees for the centralised training programmes and annual fee shall not be higher than the ICVP-Diplomate Examination fee for the previous year.
    2.3. The ICVP treasurer may be made responsible for collecting all fees from the trainees.
    2.4. The ICVP shall meet all expenses, through the Training Committee, for the centralised training process and may include the following.
        2.4.1. Web/internet charges for online training process
        2.4.2. Honorarium for the resource persons
        2.4.3. Secretarial charges to the Training Committee for scheduling and organising the lectures/demonstrations

3. ICVP- TRAINING FORMS AND DOCUMENTS

ICVP-TC Form-1

ICVP-Format for recording descriptive morphology of a lesion

(Please use separate form for describing lesions in every specimen evaluate)

1. Record of specimen details				
1.1. Source of the specimen		**1.2. Identification number given by the client**		**For office use of the veterinary pathologist**
(Client details including cell phone)		*If not available, please say 'not available'*		*Identification number, given by the attending veterinary pathologist*
1.3. Species	**1.4. Breed/strain**	**1.5. Age/weight**	**1.6. Sex**	**1.7. Organ**
1.8. Case history (Please include document identification number, wherever possible)				

*NBF=Neutral buffered formalin ** H&E=Haematoxylin and eosin	**1.9. Please select the appropriate row for each of the following 3 columns**		
	1 Description of the specimen received	2 Description of the processing performed by the veterinary pathologist on the specimen (if any, if not, say 'Nil')	3 Nature of the specimen evaluated
1.9.1.Gross specimen			
Unpreserved			
Preserved in 10 % NBF*			
Other preservative (please specify)			
1.9.2.Light microscopy slide			
** H&E stain			
Others			
1.9.3- Blood film/sediments			

Unstained			
Stained with……			
1.9.4.Photograph			
Electron micrograph			
1.9.5. Others (Please specify)			

2. **Description of the lesion (Please support your claim with an illustration in ICVP-TC-Form 2)**

3. **Name of the lesion:**

4.1 Name, signature, date and registration number of the trainee	**4.2 Remarks by the trainer (or the ICVP supervisor)**	**4.3 Signature, date and registration number of the supervisor**

ICVP-TC Form-2

ICVP Format for reporting photographic illustration and morphologic description of lesions to the ICVP

Type of sample evaluated: ( ) gross ( ) histopathology ( ) blood smears ( ) Others……..

1. **Title: Bold and brief**

2. **Name of the trainee/author (ICVP Registration No…….)**
Name of the department/institution/affiliation (optional)

Complete contact details with PIN and e-mail id (optional)

3. **Brief Clinical history**: Species, breed/strain, sex, age/body weight/ name of the organ/tissue and such other essential details not more than three lines

4. **Image (s):**

Picture quality: 8 bit images for black and white images

3 x 8 bit colour (RGB) or CYMK images

Pictures must fit in this space: any size/shape

Composite pictures may be used

5. **Description of the lesion**

6. **Discussion notes on corroborative evidence**

7. **Interpretation/Impression/Diagnosis**

8. **Pathogenesis: step1> step2> step 3> step 4> step5 etc**

9. **Published references: one or two lines only (if any)**

10.1 Name, signature, date and registration number of the trainee	**10.2 Remarks by the trainer (or the ICVP supervisor)**	**10.2 Signature, date & registration number of the supervisor**

ICVP-TC Form-3

ICVP Proforma for Farm Animal Necropsy Report

PM report No:		PM date & time:	
Ref. letter & date:			
PM requested by:		PM conducted by:	
1. Animal owner details			
Name	Contact number and mail ID if available		
Address			
2. Animal details			
Species:	*Breed*: -	*Sex:*	*Age*:
Colour: -	*Calving/kidding history:* -	*Animal* ID : -	
Clinical, & laboratory investigation data (If available):-			
A. **HISTORY OF THE CASE**			
1. Date of admission		2. Date and time of death	
3. Date and time of necropsy		4. Clinical diagnosis	
5. Case history			
Abbreviations: NA: Not applicable, NAD: No appreciable gross abnormality detected. **Signs for color box** : √ - collected for HP in 10% NBF, **X** – not collected for laboratory investigation, **M** - Collected for microbiologic/molecular investigation			

B. EXTERNAL EXAMINATION

1.	Condition of the carcass	
2.	Rigor mortis	
3.	Natural orifices	
4.	Visible mucous-membranes	
5.	Eye – Cornea and pupil	
6.	Presence of wounds, if any	
7.	Any other abnormalities	
8.	Result of examination of blood smear taken after death to confirm anthrax before opening the carcass	

C. INTERNAL EXAMINATION

1.	Subcutaneous tissue and superficial lymph nodes	
2.	Mouth (Lips, teeth, gums, tongue, palate)	
3.	Eye ball – Aqueous humour, lens, etc.	
4.	Ears-Auditory canal	
5.	Pharynx and associated lymph nodes	
6.	Oesophagus	
7.	Nasal cavity, larynx and trachea	
8.	Thyroid and parathyroid	
9.	Thymus	
10.	**Abdominal cavity**	

10.1.	Peritoneal cavity and peritoneum	
10.2.	Position of organs	
10.3.	Any other abnormality	
11.	**Thoracic cavity**	
11.1.	Pleural cavity and pleura	
11.2.	Position of organs	
11.3.	Any other abnormality	
12.	Diaphragm	
13.	Pericardial sac	
14.	**Heart**	
14.1	Gross appearance	
14.2.	Chambers	
14.3.	Valves	
14.4.	Myocardium	
14.5.	Blood vessels	
15	**Lungs**	
15.1.	Gross appearance	
15.2.	Palpable abnormalities	

15.3.	Section	
15.4.	Parasites	
15.5.	Lymph nodes	
16.	Bronchi and trachea-bronchial lymph nodes	
17.	Spleen	
18.	Pancreas	
19.	Adrenal glands	
20.	**Kidneys**	
20.1.	Gross appearance	
20.2.	Capsule	
20.3.	Cortical surface	
20.4.	Section	
20.5.	Renal Pelvis	
20.6.	Parasites and calculi	
21.	**Liver**	
21.1.	Gross appearance	
21.2	Surface	
21.3.	Borders	
21.4.	Parenchyma	
21.5.	Lymph nodes	
21.6.	Gall bladder	
21.7.	Parasites	

22.	**Stomach(s) & (Forestomach in ruminants)** Rumen, reticulum, omasum Abomasum/True stomach	
22.1.	Serous surface	
22.2.	Contents and mucosa	
22.3.	Parasites	
23.	**Intestines**	
23.1.	Mesentery, mesenteric lymph nodes and parasites	
23.2.	Surfaces (serous and mucous)	
23.3	Ileocaecal valves	
23.4.	Contents	
23.5.	Parasites	
24.	**Pelvic cavity**	
24.1.	Urinary Bladder	
24.2.	Genital organs	
24.3.	Accessory sex glands	
24.4.	Lymph nodes	

25.	Musculature	
26.	Skeleton	
27.	Brain	
28.	Spinal cord	

PRESUMPTIVE DIAGNOSIS:

D. **RESULTS OF LABORATORY EXAMINATION**
(attach separate sheets, if required or from other laboratories)

1 Smears

2 Swabs

3 Scrapings

4 Fluids

5 Parasites

6 Any other material

7 Histopathology

8 Results of any other laboratory investigation

DIAGNOSIS

Impression/Recommendation/Advice (if any): _____

_____

_____

_____

Signature of the Veterinary Pathologist_____

Date/ Time _____`

Name_____

ICVP Registration No. _____

ICVP-TC Form-4

ICVP Proforma for Companion Animal Necropsy Report

PM report No:	PM date & time:
Ref. letter & date:	
PM requested by:	PM conducted by:
1. Animal owner details	
Name	Contact number and mail ID if available
Address	

2. Animal details			
Species:	*Breed*: -	*Sex:-*	*Age*: -
Colour:-	*Height*: -	*Weight:-*	*Neutered:* **Y/N**
Animal ID and/or name : -			
Date and time of death			
If euthanized (Specify method & agent used.)			
Clinical, & laboratory investigation data (if available):-			
Abbreviations: NA: Not applicable, NAD: No appreciable gross abnormality detected. **Signs for color box** : √ - collected for HP in 10% NBF, **X** – not collected for laboratory investigation, **M** - Collected for microbiologic/molecular investigation			

3. External Examination		
Rigor mortis:		
External orifices:		
Condition of the carcass :		
Wound/tumour :		
Visible mucous membranes:		

Other observations:			
4. Subcutaneous tissue & Neck			
Subcutaneous fat:			
Musculature:			
Superficial lymph nodes:			
Mammary glands:			
Salivary glands:			
Larynx:			
Trachea:			
Oesophagus:			
Major blood vessels:			
Thyroid /Parathyroid	L – Weight (gm)		
	R – Weight (gm)		
Other observations:			
5. Internal examination			
Thoracic Cavity			
Thymus/Thymic remnants:			
Ribs, Cartilage:			
Pleura:			
Diaphragm:			
Trachea:			
Bronchi:			
Lungs:	Weight (gm)		
Mediastinal lymph nodes:			

Heart:	Weight (gm)				
Pericardium:					
Pericardial fluid (colour & quantity):					
Epicardium:					
Endocardium:					
Myocardium:					
Major blood vessels:					
Auricles:					
Ventricle:	RV (mm)	LV (mm)	IVS (mm)		
Valves:					
Coronary vessels:					
Oesophagus:					
Other observations:					
Abdominal cavity					
Peritoneum:					
Peritoneal fluid (colour& quantity)					
Lymph nodes:					
Stomach					
Small intestine:					
Large intestine:					
Omentum & Mesentery:					
Vasculature (Arteries, veins, & lymphatics):					

Spleen	Weight (gm)		
Liver	Weight (gm)		
Gall bladder:			
Pancreas:			
Adrenals:	L – Weight (gm)		
	R – Weight (gm)		
Kidney :	L – Weight (gm)		
	R – Weight (gm)		
Ureters:			
Urinary bladder:			
Urine (colour& quantity):			
Urethra:			
Other observations:			
Pelvic cavity			
Testicle / Ovary:			
Epididymis / Uterus:			
Prostate / Cervix:			
Penis / Vagina:			
Other observations:			
6. Head			
Eye:			
Skull bones:			
Meninges:			
Brain:			
Spinal cord:			

Pituitary:		
Nasal cavity & sinuses:		
Tongue:		
Teeth & gums:		
Mouth Cavity:		
Tonsils:		
Ear & ear canal:		
Other observations:		
7. Limbs, Bones & Joints		
Bones of limbs:		
Bone marrow (collect two unstained cytology smears):		
Vertebral column:		
Joint :		
Muscles:		
Peripheral Nerves:		
Special observation or abnormalities:		
PRESUMPTIVE DIAGNOSIS:		

RESULTS OF LABORATORY EXAMINATION

(attach separate sheets, if required or from other laboratories)

1 Smears

2 Swabs

3 Scrapings

4 Fluids

5 Parasites

6 Any other material

7 Histopathology

8 Results of any other laboratory investigation

DIAGNOSIS

Impression/Recommendation/Advice (if any): _____

_____

_____

_____

Signature of the Veterinary Pathologist_____

Date/ Time _____`

Name_____

ICVP Registration No. _____

ICVP-TC Form-5

ICVP Proforma for Poultry Necropsy Report

Farm details

1. Name of the owner _____Cell Phone No._____
2. Address_____
3. Type of the bird _____Breed/strain_____ Age_____ Hatchery Source_____
4. Type of operation (floor, cage, range, etc.)_____
5. Feeding schedule_____ Source of feed_____
6. Vaccination history_____
7. De worming history_____

Clinical History

8. Date of first notice of the illness_____ Number of birds in the flock_____
   Number of birds affected by the illness_____ Numberof dead birds in the flock_____
9. Symptoms/observations/Medication_____
_____
10. Any other details_____

Necropsy Findings

1. External Examination

1.1. Condition of bird_____External Parasites_____
1.2. Comb and wattles_____
1.3. Ears _____
1.4. Vent Opening_____

2. Head

2.1. Eyes_____ Retro-orbital sinuses_____
2.2. Nasal cavities_____Mouth_____
2.3. Skin_____
Muscles_____

3. Respiratory and Circulatory System

3.1. Thoracic cavity
3.2. Nostrils, Larynx and Trachea _____
3.3. Lungs and Air sacs _____
3.4. Heart_____

4. Digestive System and Accessory Glands

4.1. Abdominal cavity / or peritoneal cavity
4.2. Esophagus_____
4.3. Crop, proventriculus and gizzard_____

4.4. Intestine_____

4.5. Ceca_____Cloaca_____

4.6. Liver and Pancreas_____

5. Urinary and Reproductive System

5.1. Kidneys and Ureters_____

5.2. Ovary and Oviduct/Testes_____

6. Nervous System

6.1. Brain_____

6.2. Spinal cord _____

6.3. Brachial nerve_____ Sciatic Nerve_____

7. **Bones and Joints**_____

8. **Lymphoid organs**

8.1. Bursa_____

8.2. Thymus_____

8.3. Spleen_____

8.4. GALT_____

8.5. BALT_____

8.6. Caecal tonsils_____

8.7. Harderian gland _____

9. **Any other specific lesion** _____

10. **Specimens collected for laboratory investigations**

Summary of observations

_____

_____

PRESUMPTIVE DIAGNOSIS _____

Report of special test if any_____

DIAGNOSIS: _____

Impression/Recommendation/Advice (if any): _____

_____

_____

Signature of the Veterinary Pathologist_____

Date/ Time _____`

Name_____

ICVP Registration No. _____

ICVP-TC Form-6

ICVP Trainee's diary

Name of the Trainee _____ (Registration No._____)
Month: _____ Year : 20_ _

Date*	Activity**	Identification No. of the supporting document	Remarks
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			

15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			

*Score off the date, if not applicable. **Please enter the activity id (sequence number as per the listed Training component) or please name the activity (if it is not already listed)

Remarks by the trainer **(or the ICVP supervisor)**		**Name/signature/date and Registration number of the supervisor**	

ICVP-TC Form-7

ICVP-Trainee's Log-book

Training Log Book of Dr_____ (Reg. No._____)

(Please enter the date on which you performed the activity)

List of skills and activities	**Date on which the activity was performed as entered in the daily diary**				
Core Activities and skills (CAS)	875				
CAS 1 Conducting a post-mortem examination		135			
CAS 1.1. Farm animals			35		
CAS 1.1.1. Bovine					
CAS 1.1.2. Ovine/caprine					
CAS 1.1.3. Swine					
CAS 1.1.4. Rabbit					
CAS 1.1.5. Equine					
CAS 1.1.6. Others					
CAS 1.2. Companion animals			25		
CAS 1.2.1. Canine and Feline					
CAS 1.2.2. Others					

CAS 1.3. Avian			50		
CAS 1.3.1. Chicken (layers)					
CAS 1.3.2.Chicken (broiler)					
CAS 1.3.3. Duck and/or quail					
CAS 1.3.4. Others					
CAS 1.4. Non-domestic animals			25		
CAS 1.4.1. Laboratory animals					
CAS 1.4.2. Laboratory animals (Rat and mouse)					
CAS 1.4.3. Laboratory animals (Rabbit, Guinea pig and hamster)					
CAS 1.4.4. Laboratory animals (Non-human primates and large animal species used in research)					
CAS 1.4.5 Wild animals					
CAS 1.4.6. Aquatic animals& invertebrates					

CAS 2. Descriptive pathology of gross lesions		250-260			
CAS 2.1. On various parts/regions of the body			130-140		
CAS 2.1.1. Head and neck					
CAS 2.1.2. Thorax					
CAS 2.1.3. Abdomen					
CAS 2.1.4. Pelvis					
CAS 2.1.5. Fore limbs					

CAS 2.1.6. Hind limbs					
CAS 2.1.7. Others (e.g.: tail)					
CAS 2.1.8. Skin & adnexa					
CAS 2.2. Systemic Pathology			130		
CAS 2.2.1. Respiratory system					
CAS 2.2.2 Cardiovascular system					
CAS 2.2.3. Gastro intestinal System					
CAS 2.2.4. Hepato biliary system					
CAS 2.2.5. Excretory system					
CAS 2.2.6. Endocrine system					
CAS 2.2.7. Musculoskeletal systems					
CAS 2.2.8. Male reproductive system					
CAS 2.2.9. Female reproductive system					

CAS 2.2.10. Nervous system					
CAS 2.2.11. Organs of special senses (eye, ear)					
CAS 2.2.12. Hematopoietic system					
CAS 2.2.13. Skin & integuments					
CAS 3. Histotechnology		60			
CAS 3.1.Tissue processing					
CAS 3.2. Block making					
CAS 3.3. Microtomy including cryotomy					
CAS 3.4. Haematoxylin and eosin staining					
CAS 3.5. Special stains for infectious agents (Bacteria, fungi, parasites & viral inclusions)					
CAS 3.6. Special stains for non-infectious agents (muscle, fibrous tissue, glycogen, amyloid, minerals and crystals)					
CAS3.7. Immunohistochemistry					
CAS 3.8. *In situ* hybridisation					

CAS 3.9. Others or any of the above					
CAS 4. Descriptive pathology of histomorphology, based on haematoxylin and eosin stain (s)		150-200			
CAS 4.1. Respiratory system: nasal passage,nasopharynx, larynx, trachea, bronchi, alveoli					
CAS 4.2.Cardiovascular system: Atria, ventricles, blood vessels, lymphatics					
CAS 4.3. Gastro intestinal system: buccal cavity, teeth, salivary glands, oropharynx, esopahagus, forestomachs, true stomach, duodenum, jejunum, ileum, ceacum,colon and rectum and associated glands					
CAS 4.4. Hepatobiliary system: liver, bile duct and gall bladder, exocrine pancreas					
CAS 4.5. Excretory system: kidneys, ureters and urinary bladder					
CAS 4.6. Endocrine system: hypothalamus, pituitary, thyroid., endocrine pancreas, adrenal, testis, ovary					

CAS 4.7. Musculoskeletal systems: skeletal muscles, bones,cartilage, joints tendons and ligaments					
CAS 4.8. Male reproductive system: testis, epididymis, spermatic cord, penis , prostate, bulbouretheral and seminal vesicles					
CAS 4.9. Female reproductive system: vulva, vagina, cervix, uterus, fallopian tube, ovary and mammary glands					
CAS 4.10. Nervous system: Brain (meninges, cerebrum, hypothslamus, thalamus,medulla oblongata, pons and cerebellum), spinal cord, cranial and spinal nerves, ganglia					
CAS 4.11 Organs of special senses (eye, ear)					
CAS 4.12. Skin and adnexa					
CAS 4.13. Haemopoietic System: bone marrow, spleen, thymus and lymph nodes					
CAS 5.Descriptive pathology of cytology and blood smears		155-205			
CAS 5.1 Haematology			40-60		
CAS 5.1.1 Preparation of blood					

smears					
CAS 5.1.2 Staining of blood smears (Giemsa, Leishman, Wright's, Giemsa-Leishman & Supra vital stains)					
CAS 5.1.3 Interpretation of differential leucocyte count					
CAS 5.1.4 Interpretation of erythrocytic abnormalities					
CAS 5.1.5 Interpretation of leucocytic abnormalities					
CAS 5.1.6 Interpretation of platelets abnormalities					
CAS 5.1.7 Haemoprotozoa and other infectious agents					
CAS 5.2 Cytology			20-45		
CAS 5.2.1 Collection of materials for cytology – FNAC, impression smear, swabs, scrapings and body fluids)					
CAS 5.2.2 Preparation of cytological smears					
CAS 5.2.3 Staining of cytological smears					
CAS 5.2.4 Cytopathological interpretation of neoplastic lesions					

CAS 5.2.5 Cytopathological interpretation of non-neoplastic lesions					
CAS 5.3 Urine sediment evaluation			10-20		
CAS 5.3.1 Preparation of urine sediment					
CAS 5.3.2 Smear preparation from urine sediment					
CAS 5.3.3 Staining and interpretation of urine sediment smears					
CAS 5.3.4 Interpretation of nasal washing/smears					
CAS 5.4 Cytopathology of body fluids (Pericardial, peritoneal, thoracic, CSF and synovial fluids)			40		
CAS 5.4.1 Collection of Sample					
CAS 5.4.2 Smear preparation					
CAS 5.4.3 Staining of body fluid smears					
CAS 5.4.4 Interpretation of neoplastic and non-neoplastic changes					
CAS 5.5 Vaginal exfoliative cytology					
CAS 5.5.1 Preparation of vaginal cytology smears					
CAS 5.5.2 Staining of vaginal cytology smears					

CAS 5.5.3 Interpretation of estrous cycle					
CAS 5.6 Milk sample cell count and cytology			10		
CAS 5.6.1 Collection of milk samples					
CAS 5.6.2 Preparation of milk smears					
CAS 5.6.3 Interpretation of milk smears					
CAS 5.7 Nasal washings and transtracheal washing			15		
CAS 5.7.1 Collection of nasal and transtracheal washings					
CAS 5.7.2 Preparation of nasal smears					
CAS 5.7.3 Interpretation of nasal washings for parasites and tumours					
CAS 5.7.4 Interpretation of transtracheal washings for neoplastic and non-neoplastic conditions					
CAS 5.8 Microbiology			15		
CAS 5.8.1 Preparation of sample smears					
CAS 5.8.2 Staining: Gram's , Ziehl- Neelsen stain, PAS and Lactophenol cotton blue					

CAS 5.8.3 Interpretation of bacterial morphology					
CAS 5.8.4 Interpretation of fungal morphology					
CAS 6. Descriptive Ultrastructural pathology		10-15			
CAS 6.1. Transmission electron microscopy					
CAS 6.2. Scanning electron microscopy					
CAS 6.3. Advanced light microscopy					
CAS 7. Interpretation of molecular pathology		5-10			
CAS 7.1. Blotting techniques					
CAS 7.2. Genomics					
CAS 7.3. Microarray					
CAS 7.4. Proteomics					
CAS 7.5. Flow cytometry					
CAS 8. Interpretation of Serum biochemistry and organ function tests		50			
CAS 8.1 Clinical haematology					

CAS 8.2.Clinical biochemistry					
CAS 8.3. Body fluids: urine					
CAS 8.4. Body fluids: milk					
CAS 8.5. Analytical chemistry of body fluids: synovial fluid, rumen fluid & CSF)					
Additional Core Skills (ACS)	50				
ACS 1.Pre post-mortem examination procedures		25			
ACS1.1. Assessment of common documentry requirements					
ACS 1.2. Assessment of legal requirements					
ACS 1.3. Assessment of availability of instrumentation requirements for different kinds of necropsy					
ACS 1.4. Assessment of availability of infrastructure requirements for different kinds of necropsy					

ACS 2. Gross/Micro photography					
Specialised Professional Skills (SPS)	75				
SPS 1. Report preparation and development of communication skills with professional (e.g.: doctors, policy makers, legal establishments) and social clients (farmers, pet owners).		70	70		
SPS 1.1. Preparation of technical reports: post mortem examination					
SPS 1.2. Preparation of technical reports : histopathology and clinical pathology					
SPS 1.3. Preparation of technical reports: ultrastructural and molecular pathology					
SPS 1.4. Preparation of scientific reports for indexed scientific journals					
SPS 1.5. Preparation of case reports for ICVP competitions					

SPS 1.6. Preparation of popular articles					
SPS 2. Capability to articulate the concepts in animal health for advancing livestock economy, maintaining ecological balance and promoting the concept of 'One-health'		2			
SPS 2.1. Participation in IAVP award competitions					
SPS 2.2. Participation in annual conferences of non-Veterinary Pathology organisations					
SPS 3. Awareness and use of opportunities for continued professional advancement and quality control in respective areas		3			
SPS 3.1. Participation in veterinary continuing education programmes					
SPS 3.2. Participation in non-pathology continuing education programmes					
SPS 3.3. Conducting/ organising continuing education programmes for farmers and / or professionals					
SPS 3.4. Documentary evidence of awareness of personal accreditation systems					
SPS 3.5. Documentary evidence of awareness of quality system platforms: ISO, GLP, OECD, NABL					

SPS 3.6 Any other relevant activity					

Any other activity not listed above

Sl No	Activity	Date of the performance			

Please add more sheets if required. **No. additional sheets added_____**

Name/date/signature and Registration number of the trainee	Remarks by the trainer (or the ICVP supervisor)	Name/date/signature and Registration number of the trainer	Page **38** of **47**

(Please submit a copy of this document at the end of the training to the Chair of the Training Committee or the Registrar as per the direction of the President, ICVP)

4. MODEL LESION REPORTS

ICVP-TC Form-1

ICVP-Format for recording descriptive morphology of a lesion

(Please use separate form for describing lesions in every specimen evaluate)

1. Record of specimen details				
1.1. Source of the specimen		**1.2. Identification number given by the client**		**For office use of the veterinary pathologist**
Dr. Aparna Sandeep		ST 6		Id: G-001-2020
1.3. Species	**1.4. Breed/strain**	**1.5. Age/weight**	**1.6. Sex**	**1.7. Organ**
Indian Star Tortoise *(Geochelone elegance)*		4.5yrs/ 196g	Male	carapace

1.8. Case history

Reported that animal was found dead in captivity in a terrarium of a zoo.

	1.9. Please select the appropriate row for each of the following 3 column		
*Neutral buffered formalin ** Haematoxylin and eosin	1 Description of the specimen received	2 Description of the processing performed by the veterinary pathologist on the specimen (if any, if not, say 'Nil')	3 Nature of the specimen evaluated
1.9.1.Gross specimen			
Unpreserved	✔	Gross evaluation	Gross specimen
Preserved in 10 % NBF*			
Other preservative (please specify)			
1.9.2.Light microscopy slide			
** H&E stain			

Others			
1.9.3Blood film/sediments Unstained			
Stained with……			
1.9.4.Photograph			
Electron micrograph			
1.9.5. Others (Please specify)			

2. Description of the lesion (Please use page No. 2 for reporting the lesion to the ICVP
Moderate to severe bumpiness characterised by elevated appearance of most of the scutes on the dorsum of carapace. The texture of the scutes was soft to feel.

3. Name of the lesion: Pyramiding of carapace

4.1 Name, signature, date and registration number of the trainee	**4.2 Remarks by the trainer (or the ICVP supervisor)**	**4.3 Signature, date and registration number of the supervisor**
Dr. Purnima C.	Satisfactory	TV Anilkumar

ICVP-TC Form-2

Format for reporting photographic illustration of morphologic description of lesions to ICVP

Type of sample evaluated: (✔) gross ( ) histopathology ( ) blood smear ( ) Others…….

Pyramiding of carapace in an Indian star tortoise (Geochelone elegans)
Purnima C. purnima.ckm08@gmail.com
Brief Clinical history: Chelonian- *Geochelone elegans*, male, 4.5 yrs, 196g, Carapace

Description of the lesion

Moderate to severe bumpiness characterised by elevated appearance of most of the scutes on the dorsum of carapace. The texture of the suctes was soft to feel.

Discussion notes on corroborative evidence

Tortoise had a change in feeding schedule from cactus based fibre-rich diet to a long yard beans-based protein-rich diet. The animal also had impacted intestines, chronic pancreatitis, urolithiasis.

Interpretation/Impression/Diagnosis

Pyramiding of Carapace

Pathogenesis: change in feed schedule from fibre rich diet to protein rich diet> Renal failure>metabolic disturbances along with Vitamin D deficiency>osteoclastic bone resorption>pyramiding

Published references: one or two lines (if any)

Mader D. Calculi Urinary: In: Divers S, Mader D (Eds.). Reptile Medicine and Surgery. 2nd ed. St. Louis (MO): Elsevier; 2006. P: 763-771.

Name, signature, date and registration number of the trainee	Remarks by the trainer (or the ICVP supervisor)	Signature, date & registration number of the supervisor
Dr. Purnima C.	Satisfactory	TV Anilkumar

ICVP-TC Form-1

ICVP-Format for recording descriptive morphology of a lesion

(Please use separate form for describing lesions in every specimen evaluate)

1. Record of specimen details				
1.1. Source of the specimen		**1.2. Identification number given by the client**		**For office use of the veterinary pathologist**
Dr. Aparna Sandeep		ST 3		Id: HP-001-2020
1.3. Species	**1.4. Breed/strain**	**1.5. Age/weight**	**1.6. Sex**	**1.7. Organ**
Indian star tortoise (*Geochelone elegance)*		4yrs/ 254g	Male	Pancreas

1.8. Case history

Reported that animal was found dead in captivity in a terrarium of a zoo.

	1.9. Please select the appropriate row for each of the following 3 column		
*Neutral buffered formalin ** Haematoxylin and eosin	1 Description of the specimen received	2 Description of the processing performed by the veterinary pathologist on the specimen (if any, if not, say 'Nil')	3 Nature of the specimen evaluated
1.9.1.Gross specimen			
Unpreserved			
Preserved in 10 % NBF*	✔	Tissue was processed, paraffin embedded, sectioned & stained with H&E	Microscopic evaluation
Other preservative (please specify)			
1.9.2.Light microscopy slide			
** H&E stain			
Others			

1.9.3Blood film/sediments Unstained			
Stained with……			
1.9.4.Photograph			
Electron micrograph			
1.9.5. Others (Please specify)			

2. Description of the lesion (Please use page No. 2 for reporting the lesion to the ICVP
Moderate to severe Infiltration of mononuclear inflammatory cells with acinar cell atrophy and ductular hyperplasia.

3. Name of the lesion: Chronic Pancreatitis

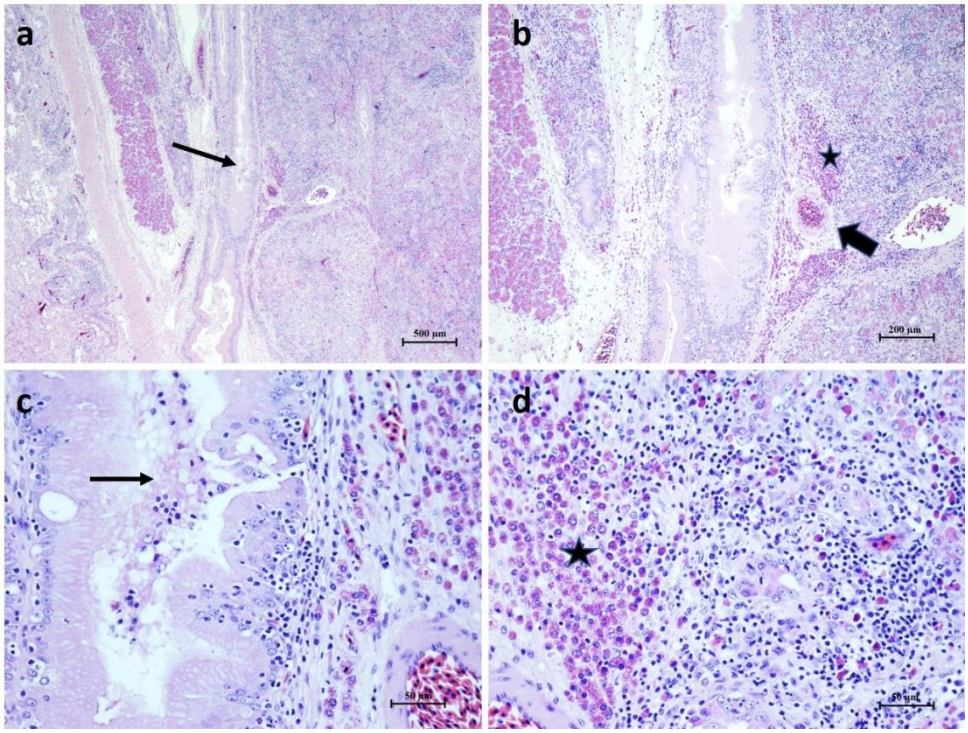
4.1 Name, signature, date and registration number of the trainee	**4.2 Remarks by the trainer (or the ICVP supervisor)**	**4.3 Signature, date and registration number of the supervisor**
Dr. Purnima C.	Good	TV Anilkumar

ICVP-TC Form-2

Format for reporting photographic illustration of morphologic description of lesions to ICVP

Type of sample evaluated: ( ) gross (✔) histopathology ( ) blood smears ( ) Others……

Chronic pancreatitis *in an Indian star tortoise (Geochelone elegans)*
Purnima C. (purnima.ckm08@gmail.com)
Brief Clinical history: Chelonian- *Geochelone elegans*, male, 4yrs, 254g, urolithiasis



Description of the lesion: Moderate hyperplasia of epithelium of pancreatic ducts with denuded necrotic cell debris along with eosinophilic materials in lumen (thin arrow). There was moderate to severe diffuse infiltration of mononuclear cells with focal congestion (thick arrow) of blood vessels. Focal infiltration of macrophages (star) was seen occasionally.

Discussion notes on corroborative evidence: Tortoise had a change in feeding schedule from cactus based fibre-rich diet to a long yard beans-based protein-rich diet which might have caused intestinal obstruction leading to pancreatic ductular obstruction and acinar cell necrosis.

Interpretation/Impression/Diagnosis: Chronic pancreatitis

Pathogenesis: Change in feed schedule> slowing of gastric emptying>intestinal impaction>obstruction to the pancreatic ducts>accumulation of secretions>necrosis of exocrine glands> inflammation and adaptive hyperplasia of pancreatic duct.

Published references: one or two lines (if any)

Chen CH; Lin CL; Jeng LB. Association between chronic pancreatitis and urolithiasis: a population-based cohort study. *PLoS ONE*. 2018; 13:e0194019.

Name, signature, date and registration number of the trainee	Remarks by the trainer (or the ICVP supervisor)	Signature, date & registration number of the supervisor
Dr. Purnima C.	Very good	TV Anilkumar